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Title: Predictors of treatment failure in patients with bacteremic pneumococcal community-acquired pneumonia

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Body: Background: Bacteremia has usually been associated with poor outcomes in patients with pneumococcal pneumonia. However, risk factors for a worse in-hospital course are not easily recognized. Objectives: The aim of this study was to identify predictive characteristics for treatment failure in patients with bacteremic pneumococcal pneumonia. Methods: A prospective and observational study was carried out in 2 hospitals. We analysed cases with bacteremic pneumococcal pneumonia from a cohort of hospitalized patients. Patients with meningitis and/or endocarditis were excluded. Treatment failure was defined as clinical deterioration during hospitalization with hemodynamic inestability, confirmation of respiratory failure or the onset thereof, need of mechanical ventilation, demonstrated radiological progression of pneumonia or a new focus of infection, or persistent fever or the reappearance of fever if a change in treatment was needed. The predictive accuracy was measured by means of logistic regression models while the AUC was used to measure the predictive ability. Results We analyzed 399 (44.8%) patients with bacteremic pneumococcal pneumonia. Figure 1 shows predictors of treatment failure with an AUC of 0.78.

Conclusions The presence of pH < 7.35, respiratory rate \geq 30 and serotypes 3, 6A, 6B, 8, 19F and 23F were identified as predictors for treatment failure in patients with bacteremic pneumococcal pneumonia.