

> ACESSE AQUI A REVISTA ONLINE

THESIS ABSTRACT

## Mortality rates of Acinetobacter baumannii ventilatorassociated pneumonia in an intensive care unit

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## **ABSTRACT**

Acinetobacter baumannii is an important agent of health care-associated infections in intensive care units, mainly ventilator associated pneumonia.

We analyzed the mortality rate of patients diagnosed with ventilator associated pneumonia due to *Acinetobacter baumannii* in the intensive care unit of a teaching hospital from Southern Brazil from January 2002 to December 2009.

First, we identified the positive clinical specimens for *Acinetobacter baumannii*, identified from sputum or blood, from the above mentioned period. Then we analyzed clinical reports and images in order to identify patients with ventilator associated pneumonia. Patients were divided into two groups, according to their clinical outcomes in the period of 14<sup>th</sup> days after diagnosis. We identified 130 patients with ventilator associated pneumonia as a result of *Acinetobacter baumannii* infection. Patients were

mostly males (85/130, 65,4%), with a mean age of 54 years-old (15-91 years, standard deviation  $\pm$  20,23). We identified 67 deaths registered during the period of  $14^{\rm th}$  days after diagnosis (67/130, 51,5%). The multivariate analysis demonstrate as independent risk factors for increased mortality in this population: use of corticosteroids (OR 7,71; IC 95% 1,41-19,11; p = 0,01); age (OR 0,08; IC 95% 1,04-1,10; p = 0,001). Previous use of antimicrobials agents have had a protective effect (OR 0,08; IC 95% 0,01-0,52; P = 0,009). Age (OR 1,03; IC 95% 1,01-1,06; p = 0,004) and McCabe 1 score (OR 5,14; IC 95% 1,84-14,33; p = 0,002) were predictors of mortality in this study.

Ventilator associated pneumonia due to *Acinetobacter bau-mannii* infection is a serious infection, associated with higher mortality rates. Patient-related factors and use of corticosteroids were variables related to increased mortality in the analyzed population.