

O103

Oral Session

An update on malaria

**RETROSPECTIVE COHORT STUDY ON THE OUTCOME OF ACUTE RESPIRATORY DISTRESS SYNDROME DUE TO MALARIA**

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**Objectives** : Over the past few years, malaria has increasingly been associated with the occurrence of acute respiratory distress syndrome (ARDS) and has emerged as an important, treatable cause of ARDS. As there is limited data on this from south India, this study will attempt to throw some light on this important issue.

**Methods** : Data from hospital records was analysed from January 2008 to December 2012. Patients (aged 18 years and above) concurrently suffering from malaria and ARDS were included in the study. Diagnosis of malaria was confirmed by Quantitative Buffy Coat (QBC) Analysis and/or Peripheral smear. ARDS was diagnosed clinically. Patients' demographics, other associated complications and mortality were studied.

**Results** : A total of 29 patients were included in the study. Median age of the patients was 42 years and 69% of the patients were male. Most of the patients (58.6%) had Plasmodium Falciparum infection alone and the rest had P. vivax alone. Average duration of ventilation (Invasive and non-invasive) was 5.103 days. 96.55% of the patients with ARDS had other associated features of severe malaria. The most commonly associated complication was hepatitis (present in 86.2% of the patients), followed by metabolic acidosis (75.9%) and thrombocytopenia (58.6%). Mortality rate in the study was 20.68%. Of the patients studied, only 1 developed ventilator associated pneumonia (VAP), but recovered.

**Conclusion** : ARDS as a complication of malaria is most often seen with P. falciparum infection and is associated with high mortality. ARDS as an isolated complication is a rarity.