

P1403

Paper Poster Session

Influenza - clinical epidemiology

Clinical profile of patients hospitalized with complicated influenza in 2014-2015 season – a single-centre experience

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Background: The 2014-2015 influenza season in Romania had 2.4 times more confirmed cases compared to previous season. The evolution and intensity of the epidemic was not uniform across the country. The aim of this study was to analyze the clinical profile of patients admitted with complicated influenza in our hospital.

Material/methods: A descriptive retrospective study was conducted. Starting with the influenza-like illness (ILI) compatible patients who were admitted in our hospital from December 2014 to April 2015, we have selected patients with confirmed complicated influenza. We used for confirmation either rapid test (CerTest Biotec Influenza A+B) or RT-PCR (GeneXpert-Cepheid) or both from nasopharyngeal swab. Case description used in this study was according to WHO recommendations. Among analyzed variables in selected patients we have included: the length of hospital stay, ICU-admittance and types of comorbidities.

Results: Of a total of 1581 patients who presented to the emergency department of our hospital with ILI, 754 (47.7%) were admitted and treated with oseltamivir; 186 (24.6%) of these patients were tested for influenza, with 32 patients (17.2%) being positive. From confirmed patients, 26 were classified as patients with complicated flu. There were: 13 men (50%), with the average age 43.5, (min 3, max 77 years), 20 patients (77%) being younger than 65. The average length of hospital stay was 7.6 days, range: 1-18 days. Most common symptoms were: cough and fever in 23 patients (88.4%), dyspnoea at presentation in 15 patients (57.7%) and neurological symptoms at the onset in 7 patients (27%). Only 6 patients (23%) received oseltamivir in the first 48h after the onset of the disease. The aetiology was represented by A virus for 18 patients: 5 A H1N1 (pdm09), one A H3N2, 12 untyped and by virus B for 8 patients. 14 patients (53.8%) required ICU admission for ARDS, neurological symptoms or sepsis. Except 4 pregnant women, all complicated cases had at least one comorbidity, cardiac comorbidities were encountered in 11 cases (42.3%); neurological conditions or obesity were found in 7 patients (27%); 6 patients (23%) had underlying pulmonary conditions and 5 (19.2%) patients were immunosuppressed. All but one patient received antibiotics. There have been 7 deaths (27%): all 5 patients with AH1N1, one with A untyped and one with B virus.

Conclusions: Among patients with complicated influenza in our hospital, influenza A H1N1 pandemic strain was responsible for the disease in the most severe cases with poor outcome.

Due to an increased time until hospital presentation, few patients received specific treatment in the first 48h after the onset of the disease. Apart from 4 pregnant women, all patients had more than one comorbidity.