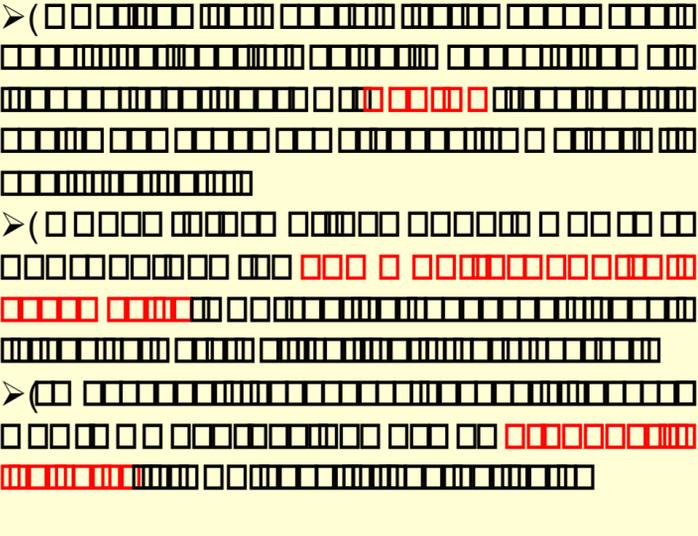


MONOCYTE HLA-DR EXPRESSION IN COMMUNITY-ACQUIRED PNEUMONIA HOSPITALISED PATIENTS

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INTRODUCTION

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RESULTS

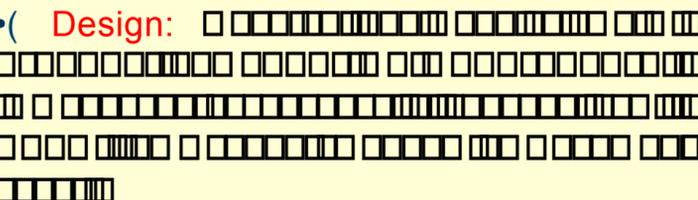
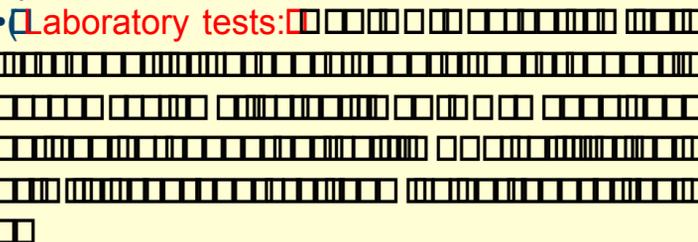
184 hospitalised patients with CAP

12 (6.5%) pts were ICU admitted
14 (7.6%) pts with therapeutic failure
7 (3.8%) pts readmitted
3 (1.6%) pts died in the first 30 days

RESULTS



METHODS

- (**Design:** )
- (**Setting:** Hospital Universitari de Bellvitge and Hospital de Barcelona, Barcelona, Spain.)
- (**Laboratory tests:** )
- (**Outcomes:** the principal outcomes tested were Intensive care Unit (ICU) admission, therapeutic failure, hospital readmissions and 30-day mortality.)
- (**Analysis:** we compared HLA-DR levels at day 1 and day 3 by outcomes groups.)

Clinical characteristics

Age, median (IQR), years	73 (61,5-83)
Male sex, %	64.7
Comorbidities	50.2
High-risk PSI classes (IV-V)	57.1
Bacteremia	9.0
Pneumococcal pneumonia	24.5
Respiratory failure	53.8
Septic shock	5.4

HLA-DR levels (day 1) by outcomes

	NO	YES	p
ICU admission	75.2 (49.0 – 134.8)	91.7 (37.9 – 169.2)	NS
Therapeutic failure	78.6 (49.0 – 134.8)	89.6 (34.9 – 150.5)	NS
Readmission	83.2 (48.8 – 150.5)	54.2 (45.7 – 66.5)	NS
30-day case-fatality rate	81.8 (49.2 – 135.7)	25.8 (23.3 – 108.2)	NS

HLA-DR levels (day 3) by outcomes

	NO	YES	p
ICU admission	125.3 (67.1 – 211.0)	96.4 (53.7 – 131-1)	NS
Therapeutic failure	136.6 (67.3 – 215.1)	96.4 (40.3 – 162.9)	NS
Readmission	130.9 (66.4 – 187.2)	85.5 (58.3 – 96.3)	NS
30-day case-fatality rate	125.3 (67.1 – 196.77)	236.78*	NS

CONCLUSIONS

- (In our study we observed lower levels of HLA-DR expression at admission in CAP patients with fatal outcome.)
- (Lower levels of HLA-DR expression on day 3 seem to be related with therapeutic failure and readmissions.)
- (The few patients with adverse outcomes in our cohort do not allow statistical inference.)
- (Further studies with larger cohorts and assessing HLA-DR expression together with other immunological biomarkers are needed.)