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Abstract (publication only)

Stroke-associated pneumonia in a rural general hospital

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Objectives: Stroke is the main cause of disability in high-income countries and ranks second as a cause of death worldwide. Stroke-associated pneumonia (SAP) constitutes a clinically relevant complication of stroke, because it increases the mortality and has a negative impact on the neurological prognosis of the patient. The aim of this study was to determine the incident of SAP and the microbiological data and outcome of patients with SAP in our Internal Medicine Ward. **Methods:** We retrospectively investigated the medical files of all patients admitted to our Internal Medicine Ward, over a period of five years, with acute stroke. Patients who developed pneumonia were identified and divided into two groups: group1 patients who developed pneumonia within the first 72 hours of admission and group2 patients who developed pneumonia after 72 of admission. The demographical, laboratory, radiological, microbiological data and outcome at discharge of patients with SAP were registered and analyzed. Patients who had dysphagia and fever before stroke onset and those who required mechanical ventilation during hospitalization, were excluded. **Results:** 389 patients with stroke were registered, 112(28.8%) had SAP and 64(57.1%) of them registered at the group1. 69(61.6%) patients were male and 43(38.4%) female with mean age of 64 ± 13.4 years. 51(45.5%) patients had positive cultures of tracheal aspirates and 32(28.7%) had infiltrates on their chest radiographs. The microorganisms identified in group1 and group2 were: *Staphylococcus aureus* 10(15.6%) vs. 6(12.5%), *Pseudomonas aeruginosa* 9(14.1%) vs. 8(16.7%), *Klebsiella pneumoniae* 0(0%) vs. 4(8.4%), *Streptococcus pneumoniae* 6(9.4%) vs. 3(6.25%), *Candida albicans* 1(1.6%) vs. 4(8.4%), respectively. Median length of stay was 12 days compared to 6 days for all stroke patients and the mortality rate was 36.6%. However, the mortality rate was not affected by age, gender, time of onset and results of cultures. Patients in group2 tended to be older and had higher frequency of positive cultures of tracheal aspirate and chest radiography with infiltrates, as compared to patients in group1. **Conclusions:** Pneumonia is a common complication after acute stroke and it is associated with a high mortality and prolongs the hospital stay. *Pseudomonas aeruginosa* and *Staphylococcus aureus* are most common organisms in stroke-associated pneumonia both of groups.