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P1232 Pneumocystis jirovecii pneumonia in Navarra patients

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Background: *Pneumocystis jirovecii* is an opportunistic pathogen that causes severe pneumonia in immunocompromised patients, particularly in AIDS and oncohematological patients.

The aim of this study is to describe the patient's demographic, clinical and microbiological features with positive PCR for *P. jirovecii*.

Materials/methods: Patients with PCR for *P. jirovecii* in CHN (reference population: 650.000 inhabitants) were retrospectively studied (1/1/2015 - 31/8/2017). Demographic, clinical, radiologic data, LDH levels, treatment and clinical outcome from patients with positive PCR were included. The samples were processed using MycAssay™ Pneumocystis (Myconostica®) kit (1/1/2015 – 1/12/2015) and RealCycler® Monotest PJIR (Progenie molecular) kit (1/12/2015 – 31/8/2017).

Results: Among 202 patients analysed by *P. jirovecii* PCR, 35/202 (17.3 %) were positive. The average age of these patients was 52.5 +/- 21.1 years old and 24/35 (68.6%) were males. Respiratory samples processed: bronchoalveolar lavage (19), sputum (12), bronchoalveolar aspiration (2), induced sputum (1) and tracheal aspiration (1). Underlying pathology: 9/35 (25.7%) AIDS, 8/35 (22.9%) haematological malignancies (5 leukemia, 2 lymphoma, 1 myeloma), 7/35 (20%) solid tumour, 7/35 (20%) autoimmune disease, 4/35 (11.4%) other pathologies. 34/35 (97.1%) patients presented X-ray control, 31/34 (91.2%) presented interstitial pattern.

LDH levels were determined in 30/35 (85.7%) patients, 27/30 (90%) presented higher LDH values. 5/35 (14.3%) patients did not present clinical symptoms of pneumonia and 10/35 (28.6%) had co-infection with other respiratory pathogens. 31/35 (88.6%) patients were treated with cotrimoxazol. Of the 4 non-treated patients, 1 died before the start of treatment and 3 were considered as colonized patients. The overcome of the lasts ones was good. 25/35 (71.4%) patients had a good overcome and 10/35 (28.6%) died. The mean Ct was: 27.4 +/- 6.3 in HIV patients, 32.9 +/- 3.9 in non-HIV immunocompromised patients, 34.0 +/- 2.0 in colonized patients and 31.3 +/- 5.3 in patients with real infection.

Conclusions: *P. jirovecii* pneumonia in our media is a severe infection with in-hospital mortality near 30%. It is more frequent in non-HIV immunocompromised patients. Ct in AIDS patients was lower than Ct in non-HIV immunocompromised patients. High LDH levels were associated to *P. jirovecii* pneumonia.