

P0097 Characterisation of a Portuguese population with influenza

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Background: Influenza is a common respiratory viral illness. It is an important cause of morbidity and mortality and represents a significant burden to the healthcare system. We aimed to characterize a population with influenza infection.

Materials/methods: We conducted a retrospective cohort study of laboratory confirmed cases of influenza in adults in Centro Hospitalar de São João (CHSJ) between November 2016-March 2017 and October 2017-May 2018. CHSJ is a tertiary care academic hospital. Patients' demographic characteristics, comorbidities, influenza vaccination status, clinical and laboratorial parameters, oseltamivir treatment, hospitalizations and in-hospital mortality were gathered from individual medical records. The median follow-up period was 9 (7-18) months. Patients' vital status was assessed by consulting RNU (Registo Nacional de Utente).

Results: There were 321 confirmed influenza cases. Of these, 174 (54.2%) were male and mean patients' age was 62 years. Prior vaccine coverage rate was 35.3% and 58.3% of the patients were treated with oseltamivir. Hospitalization was required in 68.8% of the cases and median length of hospital stay was 9 (interquartile range: 5-18) days. Patients with influenza virus infection had high comorbidity burden: 21.8% were obese, 27.1% were diabetic, 22.1% had chronic kidney disease, 21.5% had congestive heart failure, 37.4% had chronic pulmonary disease and 33.0% of the patients had some degree of immunosuppression (chronic corticoid therapy, HIV infection, transplanted organ or an autoimmune disease). A total of 100 patients needed mechanical ventilation, vasopressor support or had a prolonged hospitalization (≥ 30 days). Seventy-seven (24%) died during follow up, 37 (11.5%) of them during the index hospitalization due to influenza virus infection.

Conclusions: The majority of laboratory confirmed influenza cases required hospitalization. Patients with influenza infection have high comorbidity burden and frequently have long and complicated admissions. In hospital and medium-term mortality are high. Vaccination coverage seems insufficient considering patients age and comorbidities.

