

Prognostic factors and outcome of community-acquired pneumonia in hospitalized adult patients Estudio multicéntrico de factores pronósticos en adultos hospitalizados por neumonía adquirida en la comunidad

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Background: Severity assessment of community-acquired pneumonia (CAP) patients allows the clinician to decide the place of management and guide empirical antimicrobial treatment. **Aim:** To assess admission prognostic factors and outcome of CAP in immunocompetent adult patients hospitalized in 21 medical centers in Chile. **Material and methods:** Prospective evaluation of non immunocompromised adults with CAP admitted to 21 Chilean hospitals between July and August, 1999. All patients were assessed on admission and followed until discharge or death. **Results:** During the study period, 1,194 patients (aged 68 ± 17 years, 573 males) were evaluated. Seventy two percent had an underlying disease (especially chronic cardiovascular, neurological, respiratory

diseases and diabetes mellitus), and 90% were treated with β -lactamic agents (especially a third generation cephalosporin or penicillin). Mean hospital length of stay was 11 ± 9 days, 10% were admitted to Intermediate Care or Intensive Care Units (I