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Acinetobacter baumannii ventilator-associated pneumonia epidemiology, risk and prognosis factors

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Introduction:

Ventilator-associated pneumonia (VAP) is the most common nosocomial infection in critically ill patients, reaching up to 30 to 50%, with a high mortality rate. *Acinetobacter Baumannii* (AB) has emerged as a pathogen frequently incriminated in VAP's in Tunisia.

The aim of this study was to describe the epidemiological characteristics of *Acinetobacter Baumannii* ventilator-associated pneumonia, to identify the risk factors and the predictors of poor outcome of VAP with AB.

Methods: A retrospective study was conducted in the intensive care unit of the Military Hospital of Tunis, from January 2015 to December 2016. All patients with VAP's documented infection were included. VAP's patients with AB vs VAP's patients due to other pathogens.

Results:

Seventy patients (10%) developed VAP. The incidence of VAP with AB was 6.28%. In multivariate analysis, previous antibiotic therapy was identified as a risk factor for *Acinetobacter Baumannii*-induced pneumonia, unlike the underlying disease ($p < 0,0001$). AB was resistant to ceftazidime in 100%, imipenem in 97.5% with sensitivity to colistin in 100% of cases. Multidrug-resistant AB accounted for 22.5% and highly resistant AB accounted for 77.5%. Patients with AB pneumonia were more frequently complicated by acute respiratory distress syndrome compared to other patients (37.5% versus 8.9%, $p = 0.02$), leading to higher mortality (52.5% versus 20%, $p = 0.02$).

Conclusion:

The increasing incidence of VAP in multidrug-resistant and highly resistant AB predicts a high morbidity and mortality. Hence, the risk factors related to poor outcome in VAP's need to be identified. The implementation of infection-control measures, mainly the cross-transmission, may be needed to improve outcome.