



李园园, 葛卫红, 于锋. 重症监护室铜绿假单孢菌肺炎患者预后和无效经验性治疗因素. 中国现代应用药学, 2014, 31(3):364-369

重症监护室铜绿假单孢菌肺炎患者预后和无效经验性治疗因素

Risk Factors of Clinical Outcomes and Inadequate Initial Antibiotic Therapy with Pneumonia Caused by Pseudomonas Aeruginosa in Intensive Care Unit

投稿时间: 2013-08-28 最后修改时间: 2013-08-28

DOI: 10.13745/j.cjam.2013.08.061

中文关键词: [铜绿假单孢菌](#) [肺炎](#) [重症监护室](#) [多药耐药](#) [无效经验性治疗](#)

英文关键词: [Pseudomonas aeruginosa](#) [pneumonia](#) [intensive care unit](#) [multidrug resistance](#) [inadequate initial antibiotic therapy](#)

基金项目: 国家自然科学基金(81273077)

作者 单位

李园园 南京大学医学院附属南京市鼓楼医院药剂科, 南京 210008; 中国药科大学临床药学教研室, 南京 210009

葛卫红* 南京大学医学院附属南京市鼓楼医院药剂科, 南京 210008

于锋 中国药科大学临床药学教研室, 南京 210009

摘要点击次数: 52

全文下载次数: 54

中文摘要:

目的 研究重症监护室(ICU)的铜绿假单孢菌(PA)肺炎的死亡率及风险因素。方法 回顾性分析2009年1月—2013年3月ICU的101例肺炎患者,采用Logistic回归分析死亡和IIAT的相关危险因素。结果 细菌培养111株PA中有45.0%为MDRPA; 101例患者中37例患者接受IIAT治疗, 37例患者死亡。Logistic回归分析显示, 住院天数、CPIS评分、APACHE II评分和IIAT是死亡和IIAT的独立因素。MDRPA是IIAT的独立危险因素(OR=9.8~112.0; P<0.001)。结论 IIAT是影响ICU PA肺炎死亡率的主要危险因素。

英文摘要:

OBJECTIVE To identify the mortality and risk factor of intensive care unit (ICU) patients with Pseudomonas aeruginosa (PA) pneumonia and the factor of inadequate initial antibiotic therapy (IIAT). METHODS A retrospective analysis of 101 ICU patients with PA pneumonia from Jan, 2009 to Mar, 2013 was conducted. Logistic regression analysis was used to identify the risk factors of mortality and IIAT. RESULTS The 45.0% of isolated PA was multidrug resistance PA (MDRPA). 37 cases of 101 patients received IIAT. Logistic regression analysis showed that independent risk factors that associated with mortality were length of stay, CPIS score, APACHE II and IIAT. Only MDRPA was the predictive factor of IIAT (OR=9.8~112.0; P<0.001). CONCLUSION Our findings highlight the importance of IIAT in ICU PA pneumonia mortality.

risk factor for mortality in ICU patients with PA pneumonia. 1
factor of IIAT is MDRPA.