



Medicine

Category: Clinical

65

**Community acquired pneumonia in hospitalized patients:
Demographics and quality of care**

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Introduction:

Community acquired pneumonia (CAP) is a potentially preventable disease and one of the leading causes of hospitalization in Kuwait. The aim of this study was to identify the demographic characteristics of hospitalized adults (> 12 years) admitted with CAP, and to evaluate the quality of care provided to these patients according to the recommended international guidelines.

Methods:

An observational study was conducted, and the medical records were reviewed for all adults admitted with CAP from April 2013 to December 2014 in the Department of Medicine at Al-Sabah Hospital.

Results:

93 adults with CAP were hospitalized during the study period (53.8% males, 65.2% Kuwaiti nationals). The overall mean age was 58.5±19.0 years, and the median hospital stay was 8 days. Hospital stay was significantly longer in patients with diabetes and hypertension. The most frequent co-morbidities were Hypertension (57.0%), diabetes (54.8%), ischemic heart disease (30.1%), bronchial asthma (17.2%), dyslipidemia (14.0%), and chronic obstructive airway disease (11.8%). Although blood culture was indicated in 44.1% of the cases, it was performed in 88.2%. Blood culture was collected before the administration of the antibiotics in 96.3% of the cases. Empirical antibiotics were given according to the recommended guidelines in 98.9% of the cases. Ceftriaxone and clarithromycin were the antibiotics of choice in more than two thirds of the cases. Influenza and pneumococcal vaccines were given in 56.3% and 53.5% out of the eligible cases for vaccinations. Smoking status was assessed in 83.9% of the cases, and counselling to quit smoking for the current smokers (21.8%) was not satisfactory.

Conclusions:

This study highlighted important demographic characteristics and quality care indicators for hospitalized patients with CAP, which may help health policy makers to devise strategies to improve health care delivery system, and enhance patients' outcomes.

Key Words: Pneumonia; Hospitalization; Quality of care

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