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Original Article

Poor Prognostic Factors in Patients Infected with Staphylococcus Aureus Admitted to Intensive Care Units

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ABSTRACT

Staphylococcus aureus (S. aureus) infections in intensive care unit (ICU) patients are associated with high morbidity and mortality. Identifying poor prognostic factors is crucial to guide clinical management and improve patient outcomes. This study aimed to investigate the risk factors for poor prognosis in ICU patients with S. aureus infections. A retrospective cohort study was conducted in a tertiary ICU between January 2018 and December 2022. Adult patients with confirmed S. aureus infections, including bacteremia, pneumonia, and skin/soft tissue infections, were included. Demographic data, clinical characteristics, laboratory findings, and treatment information were collected. The primary outcome was 30-day all-cause mortality. Multivariable logistic regression analysis was performed to identify independent risk factors for mortality. The overall 30-day mortality rate was 18%. Independent risk factors for mortality included age > 60 years presence of septic shock, acute kidney injury, and infection with methicillin-resistant S. aureus (MRSA). Early appropriate antimicrobial therapy and source control were associated with improved survival. In conclusion, several poor prognostic factors in ICU patients with S. aureus infections, including older age, septic shock, acute kidney injury, and MRSA infection. Early recognition of these risk factors and prompt implementation of appropriate management strategies may help to improve clinical outcomes in this high-risk patient population.

Keywords: Staphylococcus aureus, intensive care unit, mortality, risk factors, prognosis

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