

To compare adropand CRB 65 for predicting the Severity in Community acquired pneumonia

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I. Introduction

The A-DROP scoring system assesses the following parameters: (i) Age (male ≥ 70 years, female ≥ 75 years)

(ii) Dehydration

(iii) Respiratory failure (SpO₂ $\leq 90\%$ or PaO₂ ≤ 60 mm Hg); (iv) Orientation disturbance (confusion);

(v) low blood Pressure (systolic blood pressure ≤ 90 mm Hg).

CRB-65 assesses

1.confusion

2. respiratory rate ≥ 30 /min

3.low blood pressure diastolic ≤ 60 mm Hg or systolic < 90 mmHg

4. age ≥ 65 years.

•1.These are the scoring systems used for assessing severity in community acquired pneumonia (CAP).

•2.These scoring systems are used to assess severity of pneumonia where first day Blood urea values are not available.

•AIM; To compare the efficacy of A DROP and CRB 65 for predicting IN HOSPITAL MORTALITY of CAP.

•INCLUSION CRITERIA

•Patients diagnosed with pneumonia. •Patients who were admitted.

EXCLUSION CRITERIA

Patients who were not admitted. Patients with mental retardation.

•MATERIALS AND METHODS; An observational study was conducted on patients with CAP hospitalized at GHCCD.

•For SpO₂ pulse oximetry was used.

•For dehydration assessment urine output, skin turgor were examined.

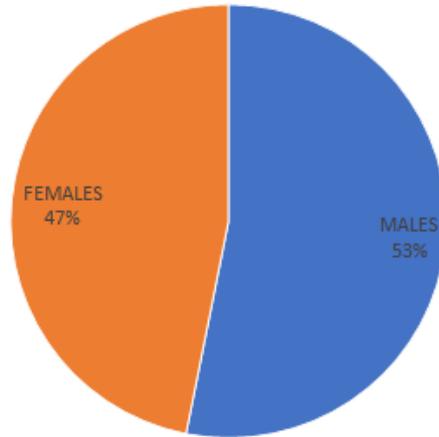
•For confusion assessment new mental definition of confusion was used.

•For orientation assessment orientation to time, place and surroundings were used.

II. Results

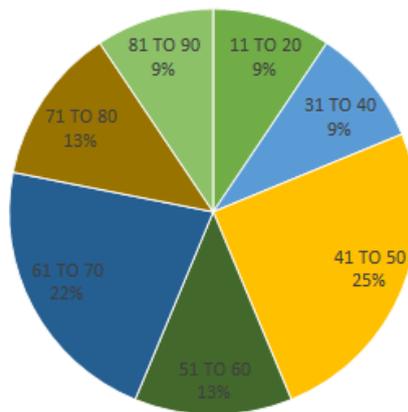
SEXDISTRUBUTION

TOTAL 32



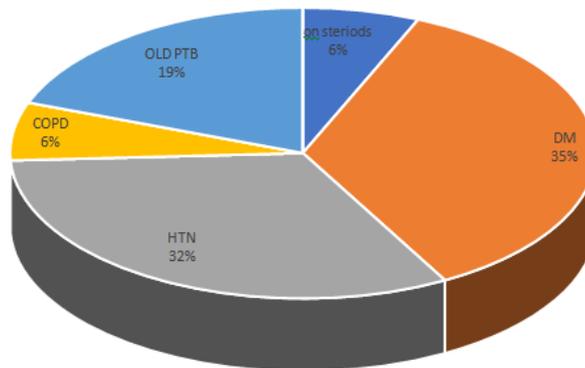
AGE DISTRUBUTION

TOTAL 32



COMORBITIES

comorbities



In Hospital outcome

In hospital death 13%

Discharged was 87%

- A DROP score as in hospital mortality predictor.
- score 0 to 1 in hospital mortality percentage is 0%
- score 2 in hospital mortality percentage is 12.5%
- score 3 TO 5 in hospital mortality percentage is 50%
- CRB 65 score as a in hospital mortality predictor.
- For score 0 in hospital mortality percentage is 0%
- For score 1 TO 2 in hospital mortality percentage is 11.11%
- For Score 3 TO 4 In hospital mortality percentage is 50%

III. Conclusion

A-DROP can be used to assess in hospital mortality of CAP, and gives similar results to CRB 65.

A DROP is equivalent to CRB 65 for predicting severity of community acquired pneumonia (CAP).

DEHYDRATION in A DROP has no significant impact in outcome of CAP.

References

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- [2]. Shindo, Y., Sato, S., Maruyama, E., Ohashi, T., Ogawa, M., Imaizumi, K., & Hasegawa, Y. (2008). Comparison of severity scoring systems A-DROP and CURB-65 for community-acquired pneumonia. *Respirology*, 13(5), 731-735. doi: 10.1111/j.1440-1843.2008.01329.x
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