中文題目:嚴重性流感併發呼吸衰竭的治療預後:一個區域醫院的經驗

英文題目:Treatment outcome of patients with severe influenza with respiratory failure: Experience

in a regional hospital

作 者: 鐘威昇

服務單位:衛生福利部臺中醫院內科

**Background:** Seasonal influenza becomes a serious public health problem in the globe. Severe influenza is defined as influenza with a syndrome of respiratory distress, altered consciousness, or accompanying a severe complication such as heart or renal failure. We reported the treatment outcome of patients with severe influenza complicated with respiratory failure in a regional hospital.

**Methods:** We enrolled patients with severe influenza illness complicated with respiratory failure requiring hospitalization at the intensive care unit from Jan 1 to March 31, 2016 in a regional hospital.

Results: In total, 5 patients (3 men and 2 women) with severe influenza illness complicated with respiratory failure were admitted at the intensive care unit in a regional teaching hospital. Their mean age was 52.6± 20.6 years (range from 36 y to 84 y). Most of patients (80%) were infected with influenza A and 1 patient (20%) was infected with influenza B. One of them (20%) was dead on the 2<sup>nd</sup> admission day. The average days from URI symptoms to ICU admission were 7 ± 4.7 days. The mean days from URI symptoms to prescribing antiviral therapy (oseltamivir) were 6.6 ± 3.8 days. One patient received double doses of oseltamivir 150 mg twice a day for 5 days. In addition to oseltamivir, two survival patients received concomitant therapy of teicoplanin, 3<sup>rd</sup> generation cephem, and macrolide treatment, and two survival patients received concomitant therapy of levofloxacin treatment. One dead patient received 3<sup>rd</sup> generation cephem and oseltamivir. Conclusions: The case fatality rate for severe influenza with respiratory failure was 20%. In addition to oseltamivir therapy, concomitant strong antibiotics to cover staphylococcus, streptococcus, and atypical pneumonia pathogen may become mandatory at the first.