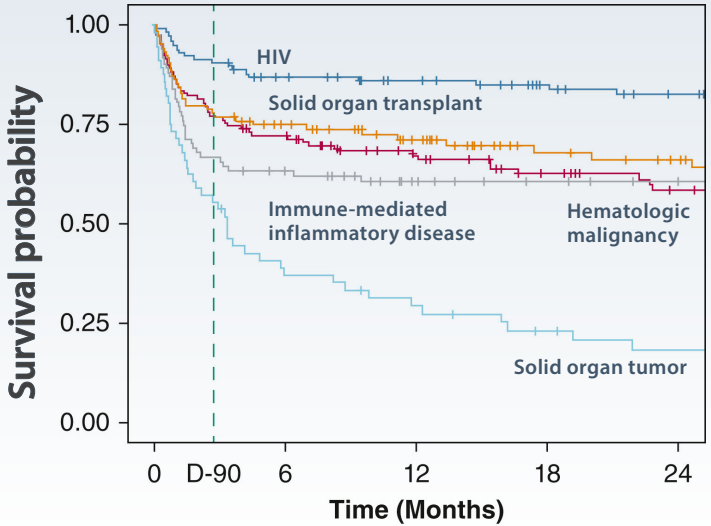
Does the Underlying Disease and Immunosuppression Causing *Pneumocystis jirovecii* Pneumonia Impact Outcome and Presentation?

STUDY DESIGN

Multicenter, retrospective, observational study of ***Pneumocystis jirovecii* pneumonia** from 1/2011 to 12/2021 to assess the epidemiology and impact of underlying immunosuppressive diseases **on overall and 90-day mortality**

RESULTS

n=481 patients
(37.4% proven, 62.6% probable)



Risk Factors With 90-Day Mortality

Solid organ tumor
OR 5.47; 95% CI, 2.16 to 14.1

Immune-mediated inflammatory disease
OR 2.19; 95% CI, 1.05 to 4.60

Long-term corticosteroid exposure
OR 2.07; 95% CI, 1.03 to 4.31
- Prednisone >10 mg daily
  OR 1.80; 95% CI, 1.14 to 2.85

Cysts in sputum/BAL smears
OR 1.92; 95% CI, 1.02 to 3.62

SOFA score at admission
OR 1.58; 95% CI, 1.39 to 1.82

Patients with immune-mediated inflammatory disease and solid tumors experience the most severe forms of *Pneumocystis jirovecii* pneumonia and the highest mortality rates. Long-term corticosteroid use prior to diagnosis was independently associated with increased 90-day mortality.

Lécuyer R, et al. *CHEST* June 2024 | @journal_CHEST | https://doi.org/10.1016/j.chest.2024.01.015