

# PREVALENCIA DE DESENLACES GRAVES EN PACIENTES CRÍTICOS CON NEUMONÍA SECUNDARIA POR COVID-19 QUE INGRESARON EN UNA UNIDAD DE CUIDADOS INTENSIVOS DE BARRANQUILLA DURANTE EL AÑO 2021

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## RESUMEN

**Introducción:** La presencia de desenlaces graves en pacientes críticos con neumonía secundaria por COVID-19 coloca en alarma el modelo de atención debido a la presencia de complicaciones tempranas y el elevado de riesgo mortalidad.

**Objetivos:** Determinar la prevalencia de los desenlaces graves de pacientes críticos con neumonía secundaria por COVID-19 que ingresaron en la unidad de cuidados intensivos durante el año 2021.

**Materiales y métodos:** La información clínica de los pacientes fue recolectada retrospectivamente. Obtuvimos las variables de interés de la historia clínica de los pacientes y los comparamos con la presencia o ausencia de uno o más desenlaces graves (ventilación mecánica; terapia de remplazo renal, traqueostomía; transfusiones). Se realizó un modelo de regresión logística binaria y una correlación lineal donde se calcularon OR y coeficientes con sus intervalos de confianza al 95%.

**Resultados:** De los 252 pacientes incluidos el 75.4% desarrollaron desenlaces graves y de estos el 86.3% de los pacientes fallecieron. La presencia de APACHE II score  $\geq 20$  puntos, uso de vasoactivos, lesión renal aguda, estancia hospitalaria y la muerte son variables predictoras para la presencia de un desenlace grave. Los niveles de lactato deshidrogenasa y leucocitos en la admisión se correlaciono con la presencia de desenlace grave.

**Conclusiones:** La presencia desenlaces graves en pacientes con COVID-19 se asoció con una alta mortalidad. Además, la presencia de APACHE II score  $\geq 20$  puntos, estancia hospitalaria, vasoactivos y los niveles de lactato deshidrogenasa y leucocitos en la admisión se correlaciono con desenlaces graves.

**Palabras claves:** Cuidados intensivos; Desenlaces graves; COVID-19; Muerte.

## ABSTRACT

**Introduction:** The presence of serious outcomes in critically ill patients with secondary pneumonia due to COVID-19 alarms the care model due to the presence of early complications and the high risk of mortality.

**Objectives:** To determine the prevalence of severe outcomes in critically ill patients with secondary pneumonia due to COVID-19 who were admitted to the intensive care unit during the year 2021.

**Materials and Methods:** The clinical information of the patients was collected retrospectively. We obtained the variables of interest from the patients' medical records and compared them with the presence or absence of one or more serious outcomes (ventilation mechanical; therapy replacement renal, tracheostomy; transfusions). A binary logistic regression model and a linear correlation were performed where OR and coefficients with their 95% confidence intervals were calculated.

**Results:** Of the 252 patients included, 75.4% developed serious outcomes and of these, 86.3% of the patients died. The presence of APACHE II score  $\geq 20$  points, use of vasoactive agents, acute kidney injury, hospital stay, and death are predictive variables for the presence of a serious outcome. Lactate dehydrogenase and leukocyte levels on admission correlated with the presence of severe outcome.

**Conclusions:** The presence of severe outcomes in patients with COVID-19 was associated with high mortality. In addition, the presence of APACHE II score  $\geq 20$  points, hospital stay, vasoactive and lactate dehydrogenase and leukocyte levels on admission were correlated with severe outcomes.

**Keywords:** Intensive care; serious outcomes; COVID-19; Death.

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