

INCIDENCIA Y MORTALIDAD EN PACIENTES CON BACTERIEMIA POR *Staphylococcus aureus* EN UNA CLINICA DE IV NIVEL DE BARRANQUILLA EN EL 2021- 2022

Nombres y apellidos:

Daney Sofia Aguilera Caro

Brenda Paola Cuadro Diaz

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Tutor(es):

Dr. Andrés Angello Cadena Bonfanti

Dra. Shirley Iglesias Pertuz

RESUMEN

La bacteriemia por *Staphylococcus Aureus* (SAB) es definida como el aislamiento del organismo a partir de 1 o más juego de frascos de hemocultivo recolectados mediante el uso de una técnica estéril estandarizada (1) y tiene una mortalidad asociada entre el 13 y el 60% (10), Nuestro objetivo es valorar la incidencia y mortalidad en una institución de cuarto nivel de la costa caribe colombiana durante el periodo 2021-2022, así como la influencia de los factores de riesgo y el patrón de resistencia en el desenlace. Se realiza por medio de un estudio analítico, de corte transversal retrospectivo, tomando la selección dentro de los cultivos tomados durante el periodo mencionado, aquellos que hayan sido obtenidos únicamente en sangre (Hemocultivos) con un resultado positivo para *Staphylococcus aureus*. La incidencia fue de aproximadamente 33 casos por año, siendo mas común en hombres, el aislamiento de MRSA fue mayor con un 68% de las SAB, la mortalidad total fue del 44% y la comorbilidad más comúnmente asociada fue la enfermedad renal crónica con un 55%. En la valoración del desenlace fatal se asoció la edad y el uso de antibiótico previo como los factores con más riesgo por lo que considerarse estas características clínicas para valorar la probabilidad de presentación y el pronóstico de la patología.

PALABRAS CLAVE: Bacteriemia, *Staphylococcus aureus* Meticilino sensible, *Staphylococcus aureus* Meticilino resistente.

ABSTRACT:

Staphylococcus aureus bacteremia (SAB) is defined as the isolation of the organism from 1 or more sets of blood culture bottles collected using a standardized sterile technique (1) and has an associated mortality between 13 and 60% (10), Our objective is to assess the incidence and mortality in a fourth-level institution on the Colombian Caribbean coast during the period 2021-2022, as well as the influence of risk factors and the resistance pattern on the outcome. It is carried out through a retrospective cross-sectional analytical study, selecting from the cultures taken during the mentioned time, those that have been obtained only in blood (Blood cultures) with a positive result for *Staphylococcus aureus*. The incidence was approximately 33 cases per year, being more common in men, the isolation of MRSA was higher with 68% of the SAB, the total mortality was 44% and the most associated comorbidity was chronic kidney disease with a 55%. In the assessment of the fatal outcome, age and previous antibiotic use are adjusted as the factors with the highest risk, so these clinical characteristics are considered to assess the probability of presentation and the prognosis of the pathology.

KEYWORDS: Bacteremia, Methicillin-sensitive *Staphylococcus aureus*, Methicillin-resistant *Staphylococcus aureus*.

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