

Epidemiology, clinical presentation and respiratory sequelae of severe Adenoviral Pneumonia (ADVP) in children admitted in a tertiary care Pediatric Intensive Care Unit (PICU) in Kolkata, India.

Argha Rajbanshi¹, Prabhas Giri¹, Somrita Laha¹, and Sumon Poddar¹

¹Institute of Child Health

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Abstract

i.Objective- To describe epidemiological, clinical, biochemical, and radiological profile of children admitted in PICU of a tertiary care hospital with severe Adenoviral Pneumonia (ADVP) and respiratory sequelae among them. ii. Design-This is a single-center, prospective observational study conducted at the Institute of Child Health iii. Settings-The study had been done in PICU and General Pediatric ward of Institute of Child Health a 200 bedded tertiary level 3 Pediatric Hospital of Kolkata, India. iv. Patient-Children less than 10 years of age admitted with features of Lower Respiratory Tract Infection(LRTI)/Pneumonia and became positive for adenovirus by respiratory sample PCR and needed intensive care at any point of the disease course during the period of -1st December 2018 to 1st May 2019 and then followed up. v. Interventions-This is a non interventional study. Standard protocolized treatment of patients with severe adenoviral pneumonia needing PICU care had been done. vi. Main outcome measures- Survival , poor prognostic factors and development of respiratory sequelae. vii. Results-96 cases in total and 33 among them needed PICU care and had been considered as severe ADVP. Males were in higher proportion than female and almost all had fever, cough, and respiratory distress at the time of admission. 67% of patients presented after one week of appearance of symptoms.24 patients had SPO2 <90% in room air at the time of hospital admission. 29 kids needed respiratory support beyond simple oxygen therapy. HRCT, done in most of the kids with recurrent symptoms mostly showed features of Post Infective Bronchiolitis Obliterans.

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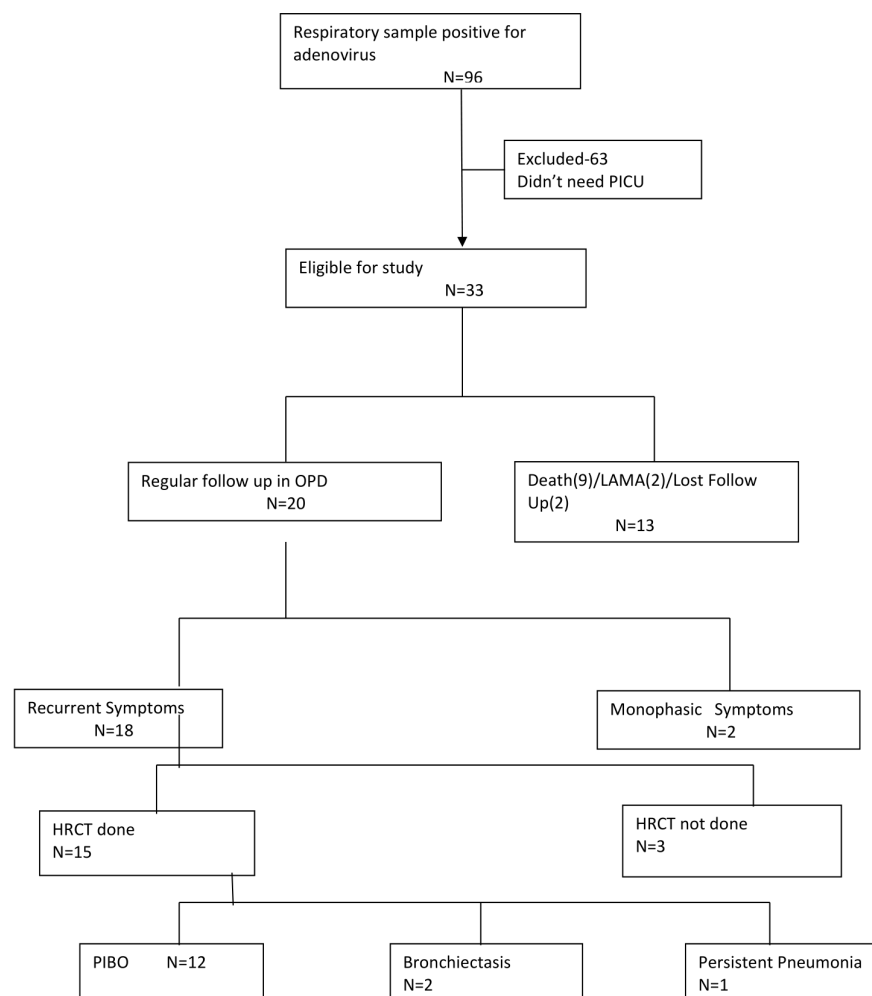


Fig1.Study flow of the 33 patients with adenovirus pneumonia.