

Bacteremia in Cancer Patients. Comparison between Solid and Hematological Tumors and Impact on 30-day Mortality



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BACKGROUND

The characteristics and outcomes of bacteremia in cancer patients can be different depending if the underlying disease is a solid tumor (ST) or a hematological tumor (HT).

OBJECTIVES

To compare the characteristics and outcomes of episodes of bacteremia in these patients according to their underlying disease.

METHODS

Prospective, multicenter study. Episodes of bacteremia in adult patients with cancer were included in 10 centers in Argentina, from July 2014 to January 2016. The 30-day mortality was examined by the Kaplan-Meier method with the log-rank test and the Cox regression model was used to test statistical significance.

CLINICAL CHARACTERISTICS

370 episodes of bacteremia in 307 patients were included

SOLID TUMOR
79 (21.4%)

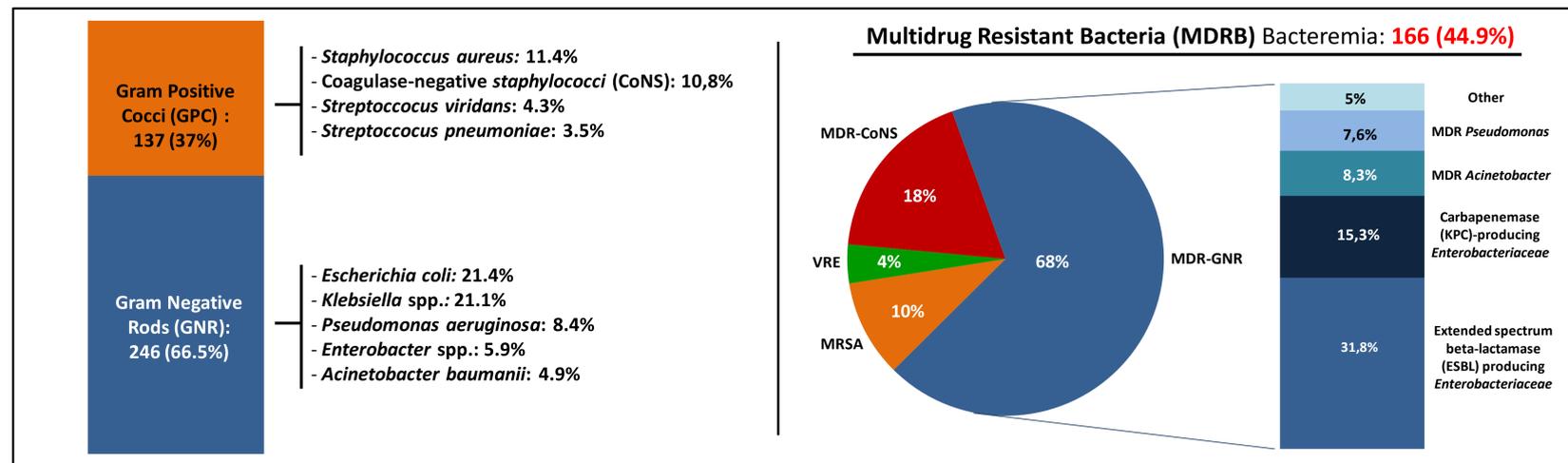
HEMATOLOGICAL TUMOR
291 (78.6%)

- Older patients (years) (median) (57 vs 52, $p=0.026$)
- Higher Charlson scores (median): (6 vs 2, $p=0.0001$)
- Higher PITT scores (median): (1 vs 0, $p=0.015$)
- More urinary tract infections (25.7 vs 3.9%, $p=0.0001$)
- More community-acquired infections (29.1 vs 6.2%, $p=0.0001$)

- More recently diagnosed tumors: (41.9 vs 26.6%, $p=0.013$)
- More frequently neutropenic: (68 vs 27.8%, $p=0.0001$)
- Only group that received FQ prophylaxis (17.9 vs 0%, $p=0.0001$)
- More catheter-related infections (33.5 vs 15.7%, $p=0.005$)
- More healthcare-associated infections (67.7 vs 38%, $p=0.0001$)

- Similar APACHE II scores (median) (13 vs 12, $p=0.59$)
- Similar frequency of abdominal infections (24.3 vs 28.6%, $p=0.49$)
- Similar frequency of respiratory infections (15.7 vs 8.9%, $p=0.11$)

MICROBIOLOGICAL CHARACTERISTICS



SOLID TUMOR

- More GPC bacteremia: (46.8 vs 34.4%, $p=0.04$)
- More polymicrobial bacteremia (11.4 vs 4.5%, $p=0.021$)

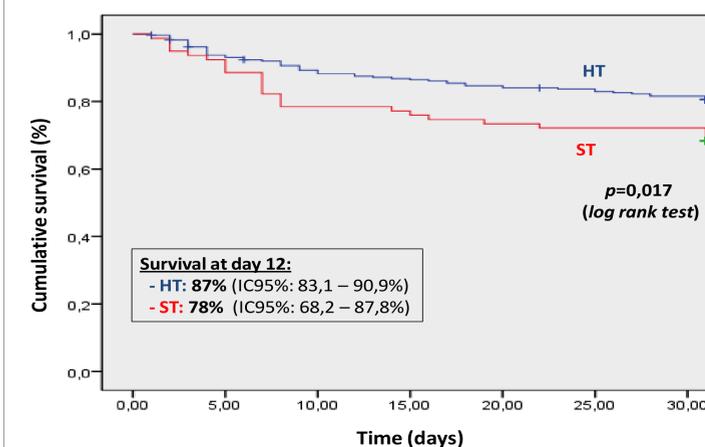
HEMATOLOGICAL TUMOR

- More MDRB bacteremia: (51.2 vs 21.5%, $p=0.001$)
- More ESBL-produc. *Enterobacteriaceae*: (15.5 vs 6.3%, $p=0.035$)
- More *Acinetobacter* bacteremia (6.2 vs 0%, $p=0.023$)
- More MDR-CoNS bacteremia (9.6 vs 2.5%, $p=0.04$)

TREATMENT AND OUTCOMES

Variable	ST	HT	p
Adequate empirical antibiotic treatment	65 (82.3%)	218 (74.9%)	0.171
Empirical carbapenem use	15 (19%)	126 (43.3%)	0.0001
Empirical colistin use	5 (6.3%)	55 (18.9%)	0.007
Combined antibiotic treatment	21 (26.6%)	79 (27.1%)	0.92
Breakthrough bacteremia	0	37 (12.7%)	0.001
Intensive care unit requirement	15 (19%)	63 (21.6%)	0.607
Shock	18 (22.8%)	63 (21.6%)	0.829
7-day mortality	18 (22.8%)	39 (13.4%)	0.04
30-day mortality	25 (31.6%)	57 (19.6%)	0.02

OUTCOMES – 30-day mortality



30-day mortality: risk factors

Risk factor	UNIVARIATE		MULTIVARIATE	
	HR (IC95%)	p	HR (IC95%)	p
Age (years)	0,99 (0,9-1,05)	0,478		
High Charlson score (>4)	2 (1,2-3,2)	0,004	2,06 (1,04-4,1)	0,03
Solid tumor	1,76 (1,09-2,9)	0,019	1,45 (0,76-2,75)	0,254
Recently diagnosed disease	1,37 (0,9-2,1)	0,152		
Disease in complete remission	0,38 (0,14-1,05)	0,06	0,47 (0,17-1,31)	0,149
Refractory / relapsed disease	1,04 (0,6-1,6)	0,86		
High APACHE II score (>24)	3,9 (2,1-7,3)	0,0001	2,69 (1,37-5,27)	0,004
High PITT score (>4)	5 (2,8-9)	0,0001	4,25 (2,3-7,9)	0,001
MDRB bacteremia	1,9 (1,2-3)	0,004	2,15 (1,2-3,7)	0,006
Neutropenia	1,2 (0,7-1,9)	0,39		
Bacteremia with clinical source	1,2 (0,7-2)	0,443		
Breakthrough bacteremia	1,6 (0,8-3)	0,137		
Adequate empirical treatment	0,6 (0,4-1,06)	0,086	1,05 (0,6-1,8)	0,852
Empirical carbapenem use	1,1 (0,7-1,7)	0,545		
Nosocomial infection	1,57 (0,9-2,5)	0,06	1,55 (0,9-2,67)	0,113

CONCLUSION

Patients with ST and bacteremia had a higher risk of death compared to HT, secondary to more comorbidities and more severe infections, even though HT patients had more MDRB bacteremia.