

## CIRRHOSIS

# #P15 - Infection in cirrhotics: Prevalence and impact on prognosis in the hepatogastroenterology department of Aristide Le Dantec hospital

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### Background & Aims

Infection remains one of the leading causes of mortality and morbidity in cirrhotics. It is the main decompensating factor in cirrhosis and is favored by the state of immunosuppression secondary to hepatocellular insufficiency. The objective of our study was to determine the prevalence and impact on prognosis of infection in hospitalized cirrhotic patients.

### Methods

We conducted a retrospective, single-center, descriptive and analytical study in the hepato-gastroenterology department of Aristide Le Dantec hospital over a period of 18 months (January 2021-July 2022). All cirrhotic patients hospitalized during the study period were included. Data were collected from medical records then analyzed using Sphinx version 23 software.

### Results

During the study period we included 130 patients. The average age of the patients was 44 years [18-87 years]. The sex ratio (M/F) was 2.96. It was viral B cirrhosis in 60.4% of patients. It was classified CHILD C in 50.76% of patients. Cirrhosis was decompensated in the ascitic mode in 76.61%. An infection was noted in 47 patients, giving a prevalence of 36.15%. There was fever in 27.66% of patients, abdominal pain in 38.29% of patients, crackles in 17.02% of patients and urinary irritative syndrome in 4.61% of patients. Hyperleukocytosis was noted in 19.15% of patients. The average CRP was 74.51 mg/l. It was high in 50.85% of patients. The bacteriological study of the ascitic fluid revealed spontaneous infection of the ascitic fluid in 20.42% of patients. ECBU was positive in 4 patients. The chest x-ray revealed a focus of pneumonia in 8.14% of patients. Complications of cirrhosis in patients with infection were dominated by acute renal failure in 29.07% of patients and hepatic encephalopathy in 12.76%. The overall 56-day mortality rate was 39.23%. The mortality rate of patients with infection was 51.06% ( $p < 0.001$ ) compared to 31.21% ( $p < 0.005$ ) in patients without infection. In multivariate analysis with multilogistic regression, the presence of AKI was associated with death ( $p < 0.001$ ).

### Conclusions

Infection is a common complication of cirrhosis. It must be sought and then treated early in any hospitalized cirrhotic patient in order to improve the prognosis.