

Ventilator-Associated Pneumonia PIRO Score - Philippine Heart Center

Orlando Endaya, MD

Background --- Patient risk mortality and severity scores have been successfully incorporated for patients of different conditions admitted at the hospital including intensive care unit (ICU) admission for critically ill patients but to date there is no risk assessment is being used for patients with ventilator-associated-pneumonia. This study aims to assess the use of VAP PIRO Scoring in predicting ICU mortality of patients with VAP.

Method --- A prospective cohort observational study was done including 20 patients with VAP over a period of 4 months. Patients were scored according to PIRO Scoring based on the study done by Lisboa et al. Best cut off for predicting ICU mortality was then determined.

Results --- Patients were scored using the VAP PIRO Score. Using the following variables for scoring; predisposition (comorbidities: COPD, congestive heart failure, chronic renal failure and immunocompromised, insult (bacterimia), response (hypotension SBP <90 mmHg) and organ dysfunction (hypoxemia PF ratio of <300). Using the simple PIRO scoring, with score ranging from 0-4, the best cut off for predicting ICU mortality would be a score of 3 and above with a sensitivity of 88.9% and specificity of 54.5%.

Conclusion --- VAP PIRO score is a simple tool for assessing risk severity for patients with VAP in the ICU and may guide clinicians in managing patients with VAP. Phil Heart Center 2012;16:82-83.