

Déclaration d'intérêt de 2014 à 2023

- Intérêts financiers : aucun
- Liens durables ou permanents : aucun
- Interventions ponctuelles : aucun
- Intérêts indirects : aucun

Objectifs

Evaluer l'impact d'un traitement antibiotique empirique comprenant un aminoside *versus* sans aminoside sur la survie et le pronostic rénal des patients admis en réanimation pour urosepsis



Etude rétrospective multicentrique

(4 réanimations d'IDF)



Urosepsis

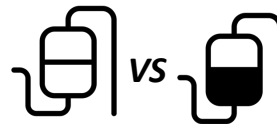
Sepsis/choc septique à point de départ urinaire



Score de propension (IPTW)



Adultes hospitalisés en réanimation de **2015 à 2022**



Antibiothérapie probabiliste avec aminosides VS sans aminoside

Critères de jugement

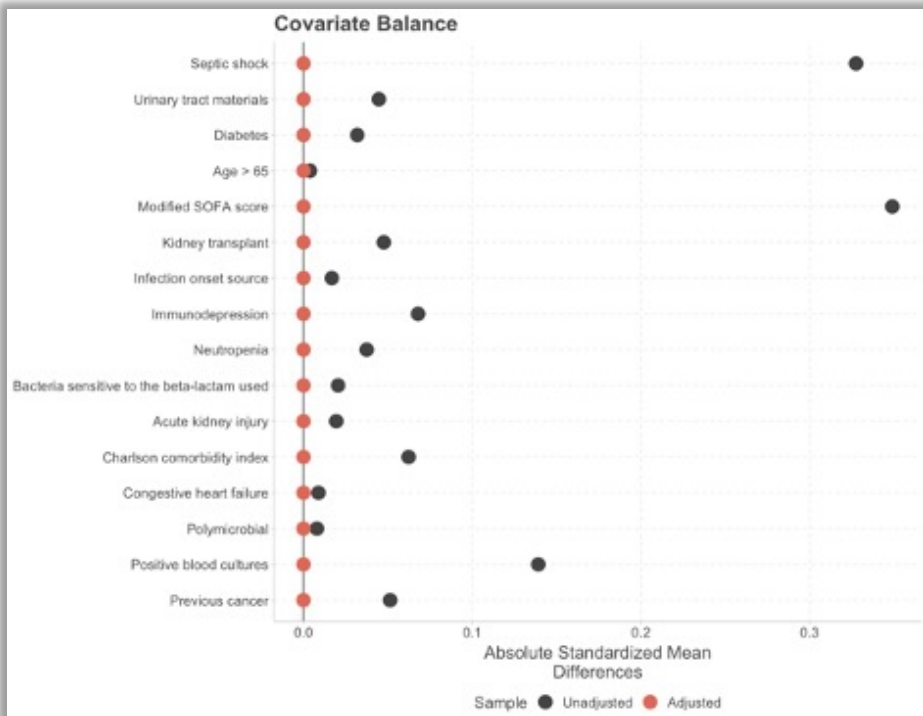
- **Principal** : mortalité à J30
- **Secondaires** : récupération rénale à J30, la nécessité de dialyse dans les 30 jours, le MAKE 30 et la durée de séjour en réanimation

Caractéristiques initiales

Variables	Without AG (n=136)	With AG (n=444)	Total (n=580)	p-Value
Age (median, IQR)	71 (58-79)	70 (57-76)	70 (58-77)	0.574
Male	66 (48.5%)	245 (55.2%)	311 (53.6%)	0.174
Infection onset source				0.487
Community acquired	49 (36.0%)	161 (36.3%)	210 (36.2%)	
Community onset healthcare associated	62 (45.6%)	182 (41.0%)	244 (42.1%)	
Hospital acquired	25 (18.4%)	101 (22.7%)	126 (21.7%)	
Comorbidities				
Chronic kidney disease	38 (27.9%)	157 (35.4%)	195 (33.6%)	0.109
Kidney transplant	13 (9.6%)	68 (15.3%)	81 (14.0%)	0.090
Urinary tract materials	29 (21.3%)	117 (26.4%)	146 (25.2%)	0.237
Chronic urinary diversion	13 (9.6%)	31 (7.0%)	44 (7.6%)	0.321
Diabetes	39 (28.7%)	144 (32.4%)	183 (31.6%)	0.410
Congestive heart failure	16 (11.8%)	60 (13.5%)	76 (13.1%)	0.597
Previous malignancy	62 (45.6%)	185 (41.7%)	247 (42.6%)	0.418
Active malignancy	41 (30.1%)	119 (26.8%)	160 (27.6%)	0.445
HIV	4 (2.9%)	9 (2.0%)	13 (2.2%)	0.529
Cirrhosis	17 (12.5%)	20 (4.5%)	37 (6.4%)	<0.001
Immunosuppression	37 (27.2%)	154 (34.7%)	191 (32.9%)	0.104
Charlson comorbidity index	6 (4-8)	5.5 (4-8)	6 (4-8)	0.728
Admission characteristics				
SAPS II score (median, IQR)	44.00 (33-54)	48.00 (37-61)	46.00 (36-60)	0.014
SOFA score (median, IQR)	5.00 (3-7)	7.00 (5-10)	7.00 (4-9)	<0.001
Septic shock	44 (32.4%)	291 (65.5%)	335 (57.8%)	<0.001
Acute kidney injury	105 (77.2%)	343 (79.8%)	448 (79.2%)	0.273
Mechanical ventilation	17 (12.5%)	98 (22.1%)	115 (19.8%)	0.029
Neutropenia	1 (0.7%)	19 (4.3%)	20 (3.4%)	0.048
Urgent urinary diversion	34 (25.0%)	112 (25.2%)	146 (25.2%)	0.958

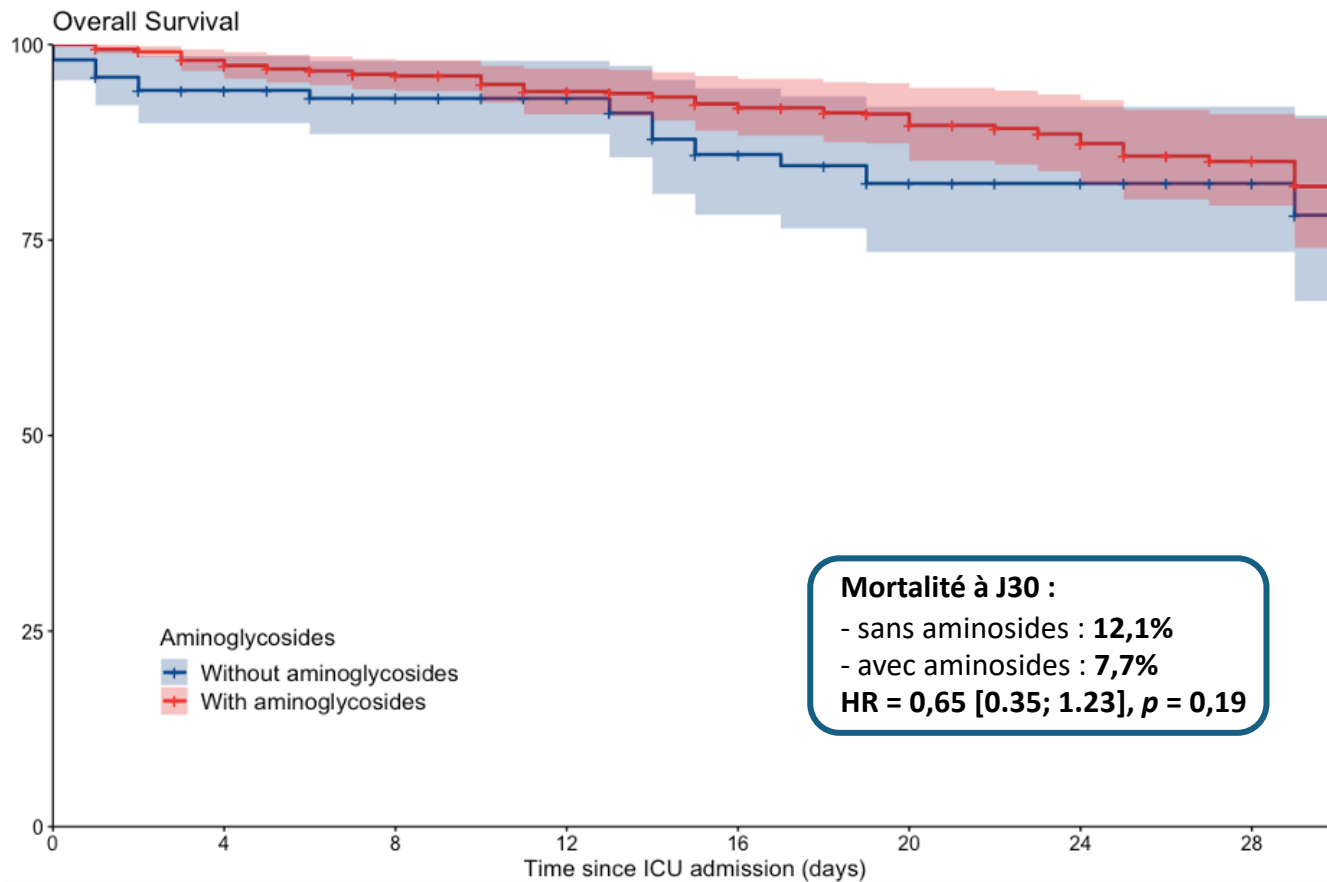
Variables	Without AG (n=136)	With AG (n=444)	Total (n=580)	p-Value
Microbiology				
Enterobacterales	113 (83.1%)	384 (86.5%)	497 (85.7%)	0.322
<i>Proteus mirabilis</i>	11 (8.1%)	16 (3.6%)	27 (4.7%)	0.030
<i>Escherichia coli</i>	78 (57.4%)	261 (58.8%)	339 (58.4%)	0.767
Group 2	28 (20.6%)	96 (21.6%)	124 (21.4%)	0.797
Group 3	14 (10.3%)	38 (8.6%)	52 (9.0%)	0.535
ESBL	20 (14.7%)	68 (15.3%)	88 (15.2%)	0.862
3CG-resistant	22/113 (19.4%)	75/384 (19.5%)	97/497 (19.5%)	0.988
<i>Enterococcus faecalis</i>	11 (8.1%)	52 (11.7%)	63 (10.9%)	0.235
<i>Enterococcus faecium</i>	2 (1.5%)	11 (2.5%)	13 (2.2%)	0.488
<i>Pseudomonas aeruginosa</i>	11 (8.1%)	35 (7.9%)	46 (7.9%)	0.938
<i>Staphylococcus aureus</i>	6 (4.4%)	6 (1.4%)	12 (2.1%)	0.028
Other pathogens	4 (2.9%)	22 (5.0%)	26 (4.5%)	0.321
Polymicrobial	24 (17.6%)	76 (17.1%)	100 (17.2%)	0.886
Positive blood cultures	64 (47.1%)	272 (61.3%)	336 (57.9%)	0.003
GNB resistant to the beta-lactam used	12/113 (10.6%)	28/362 (7.7%)	40/475 (8.4%)	0.441
GNB resistant to the aminoglycoside used	-	23/325 (7.1%)	-	-

Analyse multivariée des facteurs de risque de mortalité



91 patients par groupe

Variables	Survived (n=519)	Died (n=61) 10,5%	Total (n=580)	p-Value
Septic shock	288 (55.5%)	47 (77.0%)	335 (57.8%)	0.129
Urinary tract materials	132 (25.4%)	14 (23.0%)	146 (25.2%)	0.158
Diabetes	162 (31.2%)	21 (34.4%)	183 (31.6%)	0.219
Age > 65	123 (23.7%)	17 (27.9%)	140 (24.1%)	0.945
Modified SOFA score (median, IQR)	2 (1-3)	4 (2-6)	2 (1-4)	<0.001
Kidney transplant	74 (14.3%)	7 (11.5%)	81 (14.0%)	0.301
Infection onset source	327 (63.0%)	43 (70.5%)	370 (63.8%)	0.233
Immunodepression	173 (33.3%)	18 (29.5%)	191 (32.9%)	0.510
Neutropenia	17 (3.3%)	3 (4.9%)	20 (3.4%)	0.770
Bacteria sensitive to the beta-lactam used	447/513 (87.1%)	56/60 (93.3%)	503/573 (87.8%)	0.091
Acute kidney injury	398/509 (78.2%)	50/57 (87.7%)	448/566 (79.2%)	0.157
Charlon comorbidity index (median, IQR)	5 (4-7)	7 (6-9)	6 (4-8)	0.010
Congestive heart failure	59 (11.4%)	17 (27.9%)	76 (13.1%)	0.026
Polymicrobial	84 (16.2%)	16 (26.2%)	100 (17.2%)	0.389
Positive blood cultures	294 (56.6%)	42 (68.9%)	336 (57.9%)	0.123
Previous cancer	157 (30.3%)	25 (41.0%)	182 (31.4%)	0.291
Aminoglycosides	398 (76.7%)	46 (75.4%)	444 (76.6%)	0.131



Mortalité J30 en sous-groupes

Subgroups	Death without AG (n=15/136)	Death with AG (n=46/444)	p-Value
Septic shock (n=335)	8/44 (18.2%)	39/291 (13.4%)	0.395
Positive blood culture (n=336)	10/64 (15.6%)	32/272 (11.8%)	0.401
Kidney transplant (n=81)	0/13 (0.0%)	7/68 (10.3%)	0.591
ESBL Enterobacterales (n=88)	2/20 (10.0%)	5/68 (7.4%)	0.655
Gram negative bacteria sensitive to the beta-lactam used (n=435)	12/101 (11.9%)	32/334 (9.6%)	0.502
Gram negative bacteria resistant to the beta-lactam used (n=40)	1/12 (8.3%)	1/28 (3.6%)	0.515

Critères de jugement secondaires

Secondary outcomes	Without AG (n=91)	With AG (n=91)	Total (n=182)	p-Value
No renal recovery at day 30	12 (13.7%)	10 (11.5%)	23 (12.6%)	0.540
Need for RRT within 30 days	11 (12.1%)	10 (10.9%)	21 (11.5%)	0.640
MAKE 30	20 (21.7%)	17 (18.9%)	37 (20.3%)	0.580
ICU length of stay, day (median, IQR)	3.00 (1.4-4)	2.00 (1-4)	2.00 (1-4)	0.507

Conclusion

- « Tendance » mais pas de réduction significative de la mortalité à J30 avec association d'un aminoside au traitement probabiliste chez les patients admis en réanimation pour urosepsis.
- L'utilisation des aminosides n'est pas associée à une augmentation de la toxicité rénale.
- Etude prospective randomisée nécessaire pour définitivement répondre à la question?



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