KSN 2020
FULLY VIRTUAL MEETING

Abstract Type : Oral
Abstract Submission No. : OR-1079

H1N1 in Chronic Kidney Disease, " Still a mystery in 2020 "

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Case Study: Aims and Objectives: H1N1 influenza virus is an orthomyxovirus which is highly contagious causing mild to severe respiratory disease.Our country reported 1216 deaths of 28714 cases of H1N1 in the year calendar 2019. After 2009 H1N1 pandemic there has been no published data of H1N1 in ESRD. How this bug affects this group of pateints is still a mystery. The novelty of our study was the outcome of H1N1 affected ESRD in the year 2017-2019 which has never been described in the literature.

Methods: All suspected cases were screened for H1N1 through PCR tests, only confirmed cases were included in the study. All were given oseltamavir therapy along with isolation and supportive therapy. The characteristics of survivors and non-surviviors were compared.

Results: Total of 27 cases were detected in three years. In 2017 most cases occurred in first half of the calendar, while in 2018 majority of the cases occurred in end of the year. In 2019 all cases came from August and September. 2 out of 5 cases in 2017 died, 5 of 8 cases died in 2018 and 7 of 14 cases succumb to death in 2019. 9 out of 27 patients maintained oxygen saturation at room air, and their discharge was uneventful. 16 patients required ventilator support of which only 2 recovered. Mean duration of ventilator requirement to death was 2.5 days. One patient had concomitant CMV. Interstingly no statistical difference was found in PSI (Pneumonia severity Index) and CURB65 score among the two groups. High APACEII, and SOFA score were associated with mortality. Older age, Antirejection, and deceased transplant had no association with mortality.

Conclusion: High mortality and lack of utility of PSI in ESRD in our study highlights the importance of boosting vaccination strategy and novel antiviral therapy to treat H1N1 in ESRD.