293. What Is Different When Dealing with Bacterial Brucellosis?

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Background. Bacteremic brucellosis is an acute febrile disease often associated with digestive complaints and biological inflammatory syndrome. In this perspective, we studied the utility of predictive factors of bacteremia in patients with brucellosis.

Methods. We conducted a retrospective study including all patients hospitalized with brucellosis between 1990 and 2014.

Results. We reviewed 163 cases of brucellosis among which bacteremia was documented in 30 cases (18.6%). Mean age was of 39.6 ± 17 years. Brucella melitensis was solely isolated. In bacteremic brucellosis, there were more fever (93.3% vs. 78%; P = 0.049; HR = 4), nausea (16.7% vs. 4.6%; P = 0.033; HR = 4.2), and splenomegaly (20% vs. 7.6%; P = 0.049; HR = 3). The acute form was significantly more common in bacteremic brucellosis (66.7% vs. 42%; P = 0.015; HR = 2.7). Bacteremic brucellosis patients had a significantly higher frequency of anemia (76.7% vs. 51.6%; P = 0.013; HR = 3.2) and higher C-reactive protein value (85.5 ± 45 vs. 35 ± 20 mg/L; P < 0.001). Commonly used antimicrobial regimens consisted of rifampicin plus doxycycline given for 6 weeks in both bacteremic and non-bacteremic brucellosis (86.7% vs. 72%; P = 0.1). A favorable outcome was significantly associated with bacteremic brucellosis (73.3% vs. 52%; P = 0.03; HR = 2.38). Multivariate analysis using logistic regression revealed that the probability of a negative outcome was: 9.0 at bacteremia, 1.83 at bacteremia receiving an acute form of brucellosis (HR = 4.5; C95% 1.2-17; P = 0.025) and C-reactive protein value (HR = 1.12; C95% 1.1-1.2; P = 0.02) were independent predictors of bacteremic brucellosis.

Conclusion. Our study highlighted clinical and biological particularities of bacteremic brucellosis which may help clinicians to establish a prompt diagnosis and suitable treatment, two main conditions to improve patients’ prognosis.

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