

CAP, HCAP患者における誤嚥リスクと胸部CT所見

本邦でのCTで診断したCAP, HCAP患者の検討 (retrospective)

		Risk factors for aspiration		
		+	-	total
Gravity-dependent opacity on chest CT	+	116 (18%)	129 (20%)	245
	-	72 (11%)	320 (50%)	392
	total	188	449	637

CTで肺炎と診断された症例の胸部単純X線判定

Definite pneumonia (positive)	368 (58%)
Normal radiographs (negative)	168 (26%)
Uncertain	91 (14%)

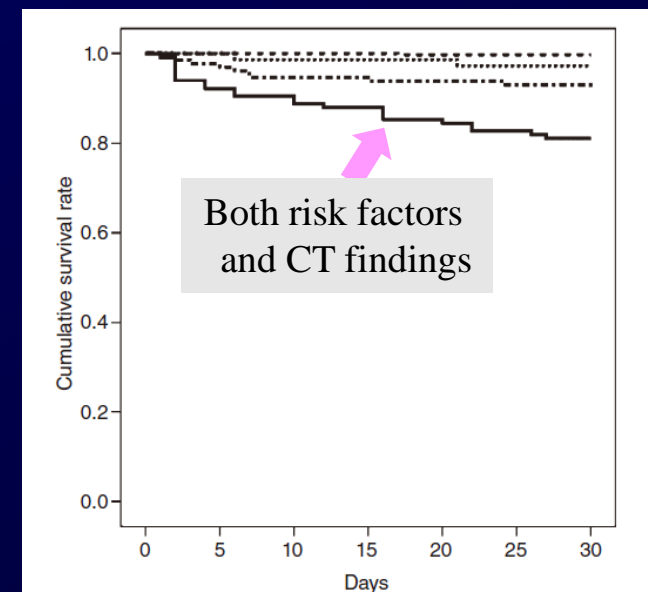


Figure 2 The Kaplan-Meier survival probability based on the presence of aspiration pneumonia among community-acquired pneumonia and healthcare-associated pneumonia patients. Patients with aspiration pneumonia who had both risk and computed tomography (CT) findings of aspiration had the worst survival in comparison to those who had risk factors alone ($P=0.001$), CT findings alone ($P=0.009$) and neither of them ($P<0.001$). Patients who had the risk alone and those who had the CT findings alone had worse survivals than those who had neither of them ($P=0.030$ and $P<0.001$, respectively). There was no significant difference between patients who had the risk alone and those who had CT findings alone ($P=0.154$). (—) neither risk factors nor CT findings of aspiration ($n=320$); (---) risk for aspiration (+) ($n=72$); (-.-) CT findings consistent with aspiration (+) ($n=129$); (-.-) both risk factors and CT findings of aspiration (+) ($n=116$).