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Predictors of bacterial co-detection in influenza outpatients in Nanjing, China

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Background: Studies suggested that secondary bacterial pneumonia substantially increases the morbidity and mortality from influenza virus infections, and carriage of bacteria in influenza outpatients further enhances this risk. The current study therefore aimed at identifying the predictors for co-existence of two commonest bacteria: *S. pneumoniae* and *H. influenzae* in the collected throat swabs from confirmed influenza outpatients in Nanjing, China.

Methods: The bacterial detection was done by PCR. The demographic and clinical characteristics of influenza outpatients were analyzed between patients with and without bacterial co-detection, and multivariate logistic regression was used to identify the independent risk factors.

Results: The overall bacterial co-detection rate was 42.6% (63/148) with 27.7% (41/148) for S. pneumoniae and 33.8% (50/148) for *H. influenzae*, respectively. Older age (≥38 years) and longer interval from illness onset to medical consultation (≥6 days) were identified as independent risk factors for bacterial co-detection of influenza outpatients. The aforementioned factors were also independent predictors for co-detection of *S. pneumoniae*. However, only longer interval was recognized as independent predictor for co-detection of *H. influenzae*.

Conclusions: The overall study findings provide more evidence for clinicians in empirical administration of antibiotics for influenza outpatients. Additionally, these two risk factors should also be addressed in health education program for influenza.

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Notes:

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