

MJEKIMI EMPIRIK I INFEKSIONEVE TË RRUGËVE TË POSHTME TË FRYMËMARRJES ME SPARFLOKSACINË

(MJEKIMI I INFEKSIONEVE RESPIRATORE ME SPARFLOKSACINË)

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Summary

Empiric Treatment of Low Respiratory Tract Infections with Sparfloxacin

Background:

Community acquired pneumonia (CAP) is usually diagnosed and treated based on disease's clinical manifestation and chest X-ray examination of the patients because data on its microbiological etiology might not always be available for many reasons. Furthermore there is strong evidence supporting the increased rate of mixed microbiological etiology of the disease and the increased rate of infections with atypical pathogens.

For these reasons many medical associations have modified their guidelines for the treatment of CAP including the third-generation fluoroquinolones as a valuable alternative for the treatment of CAP in hospital settings or intensive care units.

Methods:

In this study were enrolled 22 patients with CAP and 10 patients with COPD, stage II-b or III, fulfilling all the diagnostic criteria respectively. All patients gave their oral consent for participating in this study.

Sparfloxacin was given orally 400 mg as a single in the first day of the treatment and 200 mg once a day subsequently for 7 – 10 days. From these study were excluded: comatose patients from high level of PaCO₂, patients with irregular cardiac rhythm, patients with fever manifested after 72 hours from the hospital admission, those who had discontinued the medication and pregnant patients.

The study were conducted during the period November 2002 – May 2003.

Results:

From the patients enrolled in this study 80% of them were classified as group III or IV in terms of the gravity of pneumonia. In 73% of patients studied, sparfloxacin was given after the previous antibiotic therapy has failed.

The decrease of temperature was usually seen within the first 2 days of therapy and the improvement of respiratory frequency within 3 days. Amelioration in the radiological examination was evident within 1 week from the beginning of the treatment.

The clinical efficacy of sparfloxacin therapy after 7 and 10 days of treatment was 89% and 98%, respectively.

Conclusion:

Empiric treatment of CAP and COPD with sparfloxacin for 7 – 10 days is a treatment alternative with an optimal efficacy/safety/cost ratio and is a treatment of choice for patients with a relatively severe form of disease.

Pneumonia e fituar në komunitet (CAP) ngelet një nga shkaqet kryesore të sëmundshmërisë.(1) Çdo vit CAP prek 1.5% të popullatës së vëndeve të zhvilluara.

Shumica e pacientëve (75-80%) mjekohen në kushte ambulatorie dhe mortaliteti në keto raste është i ulët <5%. Mortaliteti është i lartë (15-25%) në pacientet me pneumoni të cilët kërkojnë

* Dërguar në Redaksi në 3 Mars 2002, miratuar për botim në 4 Dhjetor 2002.

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Adresa për letërkëmbim: Kapiszy P.: Shërbimi i Pneumologjisë. Spitalali Universitar i Sëmundjeve të Mushkërive "Shefqet Ndroqi"