

ETIOLOGIC TREATMENT OF PANDEMIC INFLUENZA

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Abstract

Introduction: Oral oseltamivir administration is effective treatment for influenza in adults. This study was conducted to determine the efficacy, safety and tolerability of oseltamivir in adults with influenza.

Objectives: To access the effect of antiviral treatment of the patients admitted with pandemic A(H1N1) infection.

Patients and method: Medical records of patients with confirmed influenza A(H1N1) 2009 were reviewed retrospectively for this study after their admission to the Infectious Diseases Hospital at UHC "Mother Theresa", Tirana between May 2009 and January 2010.

Results: Of 182 patients were enrolled in the study. A significant correlation was found between the time of disease onset and radiologic diagnosis of pneumonia, $\rho=2.6$, $p<0.01$. Patients who presented early at disease onset did not develop severe disease. The mean duration of hospitalization among patients presented with co-morbidities was 7.9 days ($SD\pm 4.9$) which was significantly higher compared to patients without co-morbidities with a mean of 5.8 days ($SD\pm 2.8$), $t=3.5$ $p<0.01$). Patients who received oseltamivir had a significant reduction in the median duration of symptoms such as fever,

cough and coryza than did the untreated patients (Log-rank = 4.2 $p=0.04$).

Conclusions: Oral oseltamivir administration is an efficacious and well-tolerated therapy for influenza in adults when given within 48 h of onset of illness.

Key words: A(H1N1) virus, co-morbidities, oseltamivir, treatment.

Introduction

Pandemic influenza is a respiratory infection that caused substantial morbidity, including upper and lower respiratory complications, and it increased health care contacts (12,3,4). The very young patients and those with underlying health problems, particularly those immune-compromised, patients with chronic heart and lung disease, diabetes, obesity and pregnant women should be considered to be at high-risk in the event of an influenza pandemic (5,6,7,8). Fortunately the virus and the pandemic were milder than many had initially feared. Bacterial co-infection in the lungs often occurred when pandemic influenza was accompanied by pneumonia. Among patients with 2009 pandemic influenza A (H1N1), we found significant differences in clinical and laboratory manifestations between patients with lung involvement and those without (9,10,11,12,13,14). On the basis of data from this study and the existing literature, early