

Significance of Bacteremia in Left Ventricular Assist Device Infections due to *Pseudomonas aeruginosa*

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BACKGROUND

- Infection is one of the most common complications of Left Ventricular Assist Devices (LVADs).
- Pseudomonas aeruginosa (PA) LVAD infections in particular are challenging due to limited antibiotic options and tendency to form biofilm making eradication difficult.

OBJECTIVE

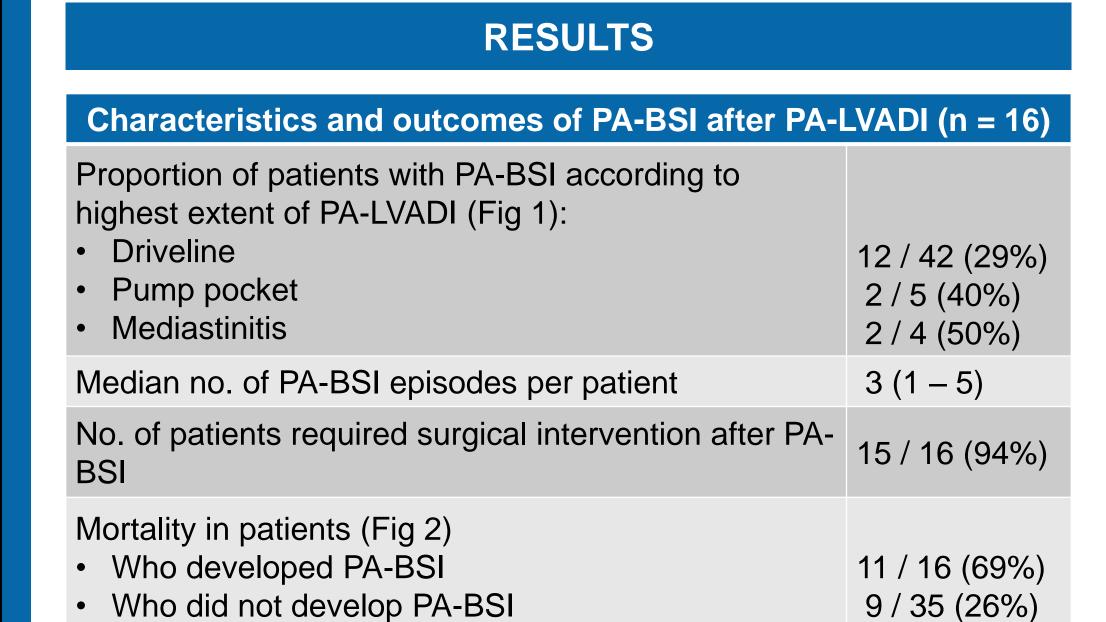
 In this study we examined the implications of PA bloodstream infection (PA-BSI) in patients with PA LVAD infections (PA-LVADI)

METHODS

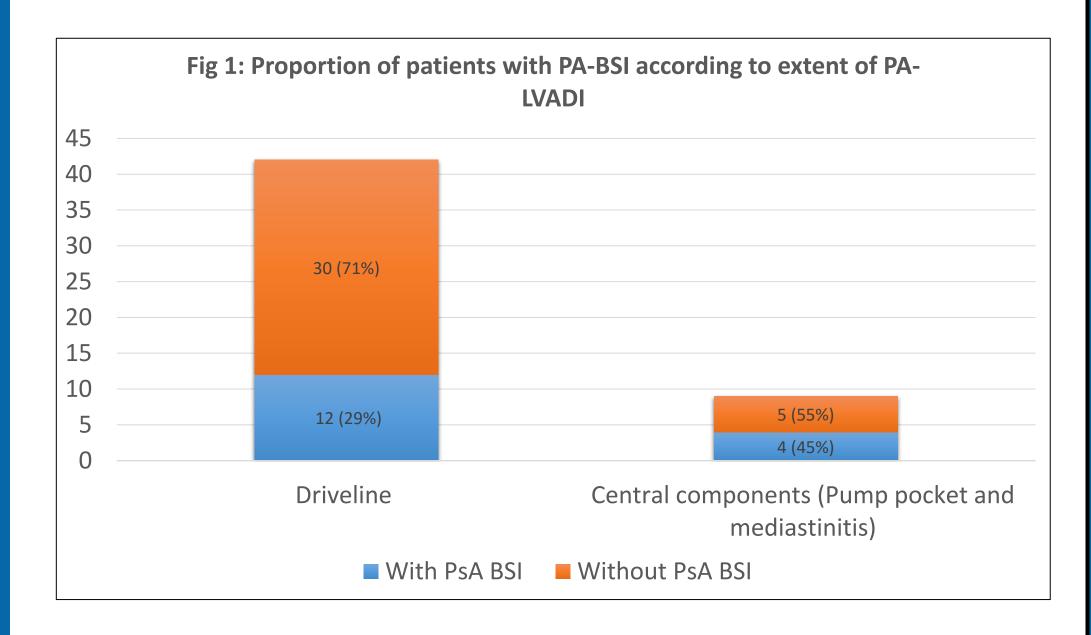
- Single center retrospective review using electronic medical records.
- Inclusion criteria
 - ≥ 18 years old at time of LVAD placement.
 - LVAD placed from 7/1/2007 to 2/1/2021 at Cleveland Clinic, Ohio who developed proven or probable driveline infection (DLI), pump pocket, or pump/cannula infection due to PA according to International Society for Heart & Lung Transplantation criteria

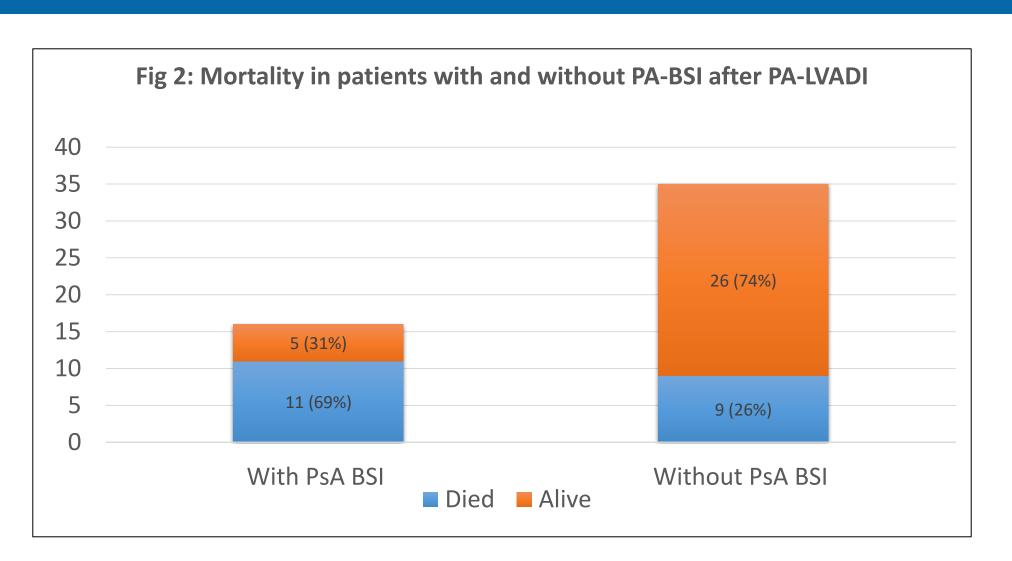
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- There were 717 patients that received LVAD during our study period.
- 51 / 717 had proven or probable VAD-specific infection PA.
 16/51 (31%) developed PA-BSI after PA-LVADI.





Total 41 episodes of PA-BSI identified. 21/41 (51%) PA-BSI episodes were in patients already on antibiotics for PA with a median duration of 49 days (7-198) prior to onset of bacteremia.

CONCLUSION

- A significant number of patients with PA-LVADI develop bacteremia, especially in those with involvement of central LVAD components.
- The presence of bacteremia should prompt evaluation for ascending infection.
- Most of the patients who developed bacteremia died, even when infection appeared limited to driveline. It is possible that endoluminal infections were present in these cases.
- A substantial proportion of patients with bacteremia were on antibiotics at the time of bacteremia, which suggests that suppressive antibiotics alone may not be effective in controlling PA-LVADI.

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