

Glucose levels at admission predict death in pneumonia

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(HealthDay) -- For patients with community-acquired pneumonia without preexisting diabetes, serum glucose levels at admission are predictive of death at 28 and 90 days, according to a study published online May 29 in *BMJ*.

To investigate whether acute dysglycemia predicts death in patients with community-acquired pneumonia, Philipp M. Lepper, M.D., from the University Hospital of Saarland in Homburg, Germany, and colleagues conducted a multicenter [prospective cohort study](#) involving 6,891 patients with community-acquired pneumonia between 2003 and 2009.

The researchers found that, for patients with community-acquired pneumonia and no preexisting diabetes, an increased [serum level](#) at admission was a predictor of death at 28 and 90 days. Compared to

patients with normal glucose levels on admission, patients with serum concentrations of 6 to 10.99 mmol/L (mild acute [hyperglycemia](#)) had a hazard ratio of 1.56 for death at 90 days, and the risk increased to 2.37 with a serum concentration of ≥ 14 mmol/L. Compared to those without preexisting diabetes, patients with preexisting diabetes had significantly increased overall mortality, independent of glucose level on admission (crude hazard ratio, 2.47).

"Serum glucose levels on admission to hospital can predict death in patients with community-acquired pneumonia without preexisting diabetes," the authors write. "Acute hyperglycemia may therefore identify patients in need of intensified care to reduce the risk of death from community-acquired pneumonia."

More information: [Full Text](#)

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