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Review of Patients Presenting with Atypical Pneumonia Findings: A Retrospective Evaluation for 5 Years

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Objectives: The importance of the atypical pneumonias is related to difficulties in their diagnosis, and their nonresponsiveness to b-lactam therapy. We aimed to retrospectively review adult patients who admitted to pulmonary and infectious diseases departments and presenting atypical pneumonia clinical findings for last 5 years.

Methods: The patients, who had radiological findings (chest X-ray and/or chest CT) with, compatible clinical features and abnormal mycoplasma, Q Fever and ornithosis complement-fixation (CF) tests between 1st Jan 2014 and 31st Dec 2018, are enrolled in this study. The diagnosis of pneumonia was made in all cases with the presence of relevant symptoms, physical examination findings and radiological features.

Results: Totally 141 patients (73 female, 68 male) were underwent serological tests for atypical pathogens such as *Mycoplasma pneumoniae*, *Coxiella burnetii* and *Chlamydia psittaci*. Most of the patients (n=96,68%) consisted of who admitted to university hospital outpatient clinics. The most common presentation symptom was cough (102, 72%), followed by dyspnea (39, 55%), sputum (53, 38%), fever, fatigue and chest pain and rash. *Mycoplasma* CF test in 53 patients, ornithosis CF test in 47 patients and Q fever CF test in 41 patients were found >1/5 titers. Although laboratory significance is fourfold titer rise for paired sera or a single titer of $\geq 1/128$, minority of cases ($\approx 5\%$) met one of these two criteria.

Conclusion: CFT most widely used serological assay. It's important to notice that CFT may be combined with PCR to allow both fast and reliable diagnosis of atypical pneumonia.

Keywords: Atypical pneumonia, *Mycoplasma pneumoniae*, *Chlamydia psittaci*, *Coxiella burnetii*, complement fixation test