Record Nr. UNINA9910144101603321 Community acquired pneumonia [[electronic resource]]: strategies for **Titolo** management / / edited by Antoni Torres and Rosario Menendez Pubbl/distr/stampa Chichester, England;; Hoboken, NJ,: John Wiley & Sons, c2008 **ISBN** 0-470-77277-8 1-281-84105-6 9786611841058 0-470-77278-6 Descrizione fisica 1 online resource (287 p.) Altri autori (Persone) Torres MartiA (Antoni) MenendezRosario 616.2/41 Disciplina 616.241 Soggetti Community-acquired pneumonia Pneumonia Electronic books. Lingua di pubblicazione Inglese **Formato** Materiale a stampa Livello bibliografico Monografia Description based upon print version of record. Note generali Nota di bibliografia Includes bibliographical references and index. Nota di contenuto Community-Acquired Pneumonia; Contents; Preface; List of Contributors: 1 Epidemiology of Community-Acquired Pneumonia Outside Hospital; 2 Epidemiology of Adult Hospitalized Community-Acquired Pneumonia; 3 Microbial Aetiology and Antibiotic Resistances in Community-Acquired Pneumonia; 4 Microbiological Diagnosis of Community-Acquired Pneumonia; 5 Empirical Treatment of Community-Acquired Pneumonia: Current Guidelines; 6 Pathogen Directed Antimicrobial Treatment of Pneumonia: 7 General Pharmacological Considerations in Antibiotic Treatment of Community-Acquired Pneumonia 8 -Lactams in the Therapy of Community-Acquired Pneumonia9 Macrolides and Ketolides; 10 Role of Fluoroquinolones in the Treatment of Community-Acquired Pneumonia; 11 Non-Responding Pneumonia; 12 Influenza and Pneumococcal Vaccination for Prevention of Community-Acquired Pneumonia in Immunocompetent Adults; 13 Adjunctive Therapy in Community-Acquired Pneumonia; Index

## Sommario/riassunto

Community-Acquired Pneumonia (CAP) refers to pneumonia acquired outside of hospitals or extended-care facilities, and is distinct from Nosocomial or hospital-acquired pneumonia, which is a separate disease entity. It is one of the most common respiratory infections and presents one of the major health problems today, with an incidence that ranges from eight to fifty cases per thousand individuals each year. Mortality is still very high and yet the risk factors are very well known. Many of these are related to antibiotic treatment; delay in administration, inadequacy of empiric antibioti