

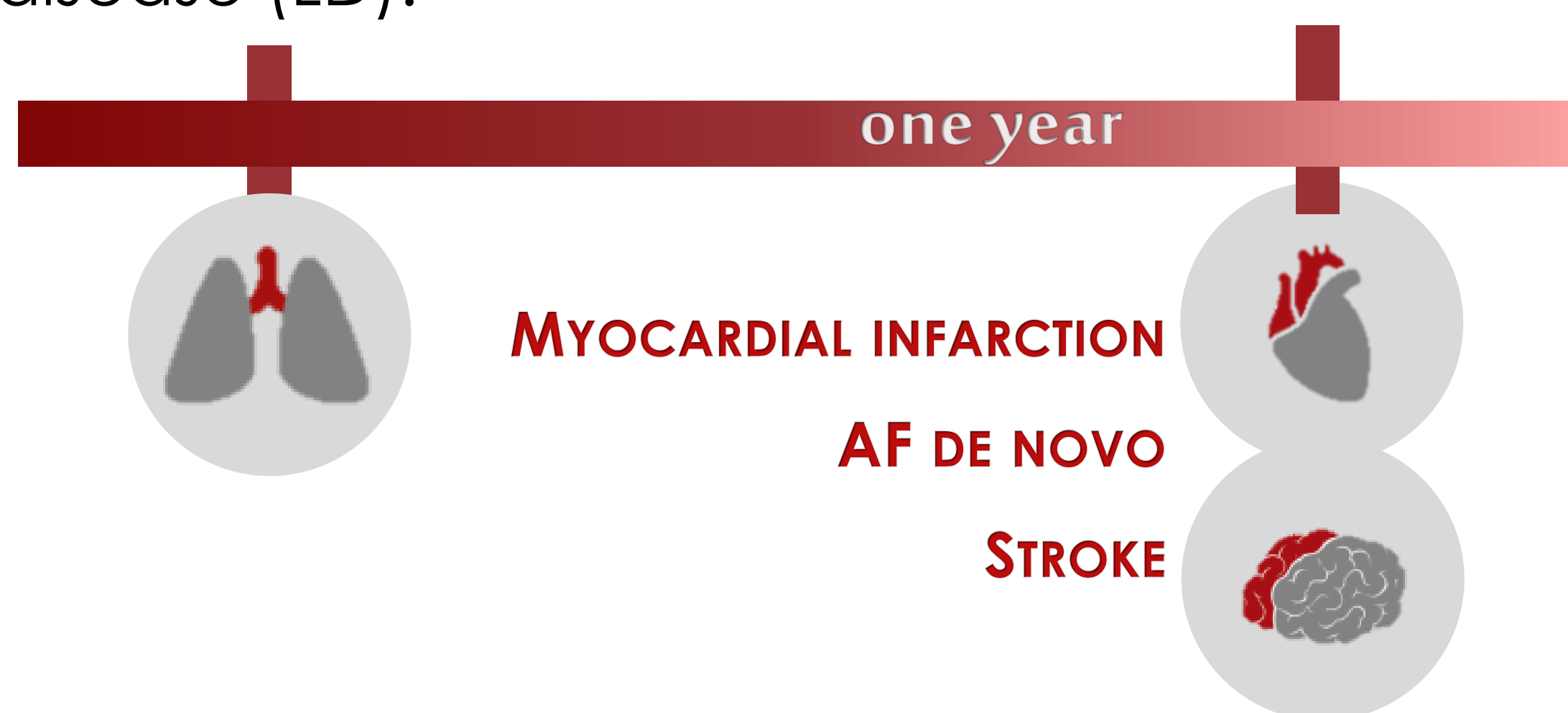


## INTRODUCTION

Cardiovascular diseases are a major cause of death worldwide, related to several risk factors. <sup>1</sup> Infection can be a risk factor for cardiovascular (CV) events, because it triggers inflammation, thrombosis and endothelial dysfunction that lead to atherosclerosis. Low respiratory tract infections have well established association with CV events, specially when severe.<sup>2</sup>

## OBJETIVES

We aimed to report CV events and *de novo* atrial fibrillation within the year after Legionnaires disease (LD).



## METHODS

We assessed our retrospective single-center LD cohort from 2008 to 2015 in order to study the incidence of cardiovascular events (myocardial infarction or stroke) within 1 year after a LD diagnosis. We also looked for *de novo* atrial fibrillation during that year, as well as for vascular risk factors that were identified for assistant physicians. LD was defined by a positive Legionella Urinary Antigen Test (serotype 1) and according to assistant physician diagnosis.

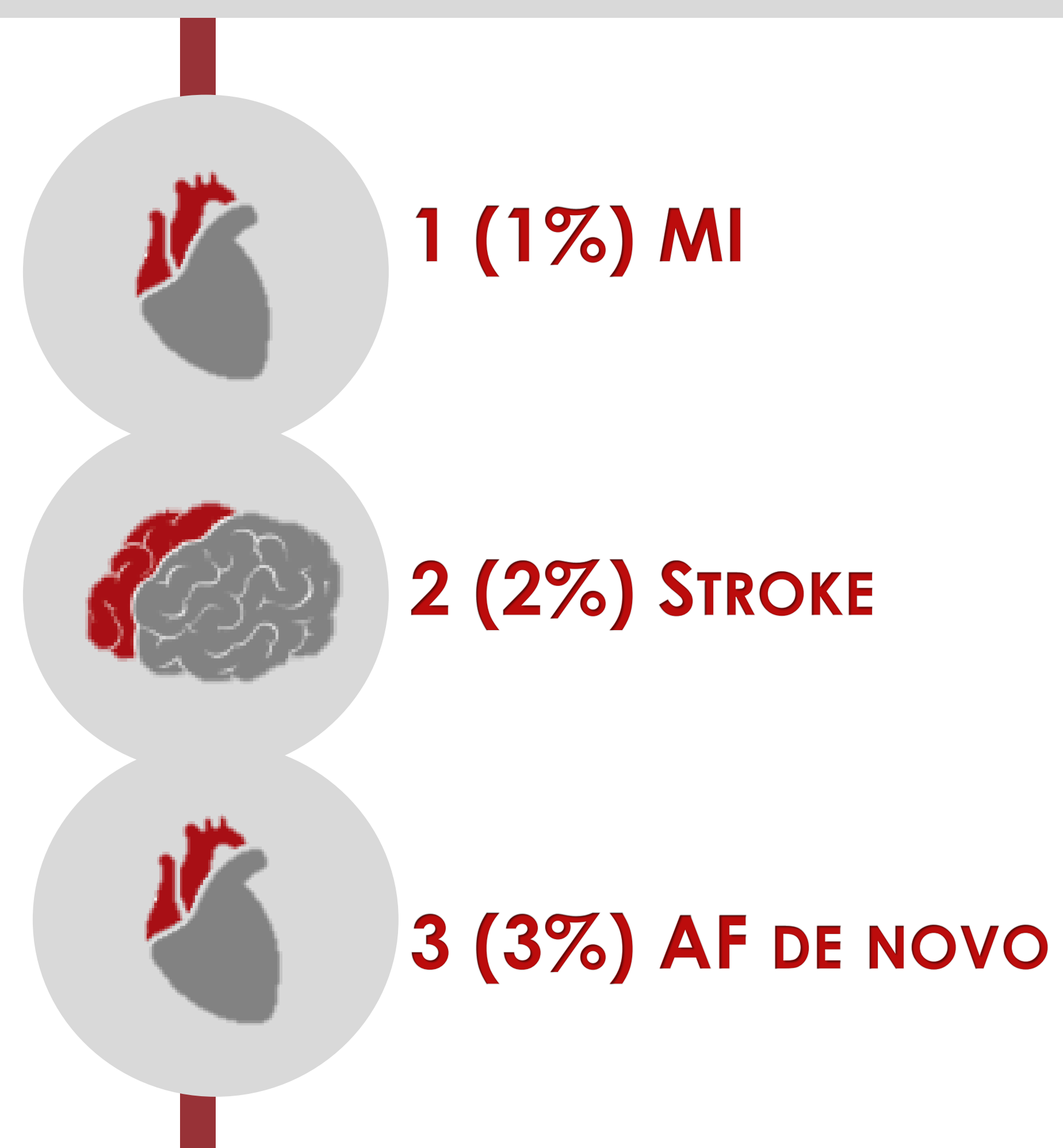


## RESULTS

### PATIENTS CHARACTERISTICS

Number of patients n (%)	110 (100)
Male sex, n (%)	75 (68)
Age, yo, median (IQR)	58 (25)
Charlson, median (IQR)	1 (3)
CURB – 65, median (IQR)	1 (2)
Vascular risk factors	
Obesity, n (%)	17 (16)
HTN, n (%)	51 (46)
Dyslipidemia, n (%)	37 (34)
Diabetes, n (%)	25 (23)
Active smoking, n (%)	49 (45)
Alcohol consumption, n (%)	25 (22)

During the study period we identified 2 stroke episodes, one patient had myocardial infarction and 3 patients had *de novo* AF. Interestingly, non-ICU patients had more CV events one year after LD, but in the other hand they had less incidence of *de novo* AF.



## CONCLUSION

Cardiovascular events and LD share some risk factors, but the incidence of CV events after LD is low. *De novo* AF occurred always in the first day of disease as well as MI. Stroke episodes occurred late. Despite its limitations, our study provides new data about CV events following Legionnaires disease, allowing new studies in the pathogenesis of cardiovascular disease after infection.