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## **LEPTOSPIROSIS: CLINICAL PROFILE AND OUTCOME IN CRITICAL CARE SETTINGS IN SRI LANKA**

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### **Introduction**

Leptospirosis can vary from mild subclinical disease to severe disease including multiple organ failure requiring intensive care treatment. Case fatality of severe leptospirosis may exceed 40%.

### **Objective**

To determine the clinical profile and outcome of severe leptospirosis in critical care settings in Sri Lanka.

### **Methodology**

All patients suspected of leptospirosis admitted to the Intensive Care Units of selected hospitals were included. Lab diagnosis was done using a rapid IgM immunochromatographic assay and polymerase chain reaction.

### **Results**

Of the 20 patients 19 were male. The mean ICU stay was 5 days. Fifteen were presumptively diagnosed as leptospirosis using the modified Faine's criteria; 15 patients were IgM positive and 4 were confirmed by PCR. However, one patient was negative for IgM and PCR although he has fulfilled the Faine's criteria. The most common complications were myocarditis (35%), renal failure (30%), liver failure (30%), hypotension/shock (30%), meningitis (25%), disseminated intravascular coagulation (10%) and multiple organ failure (40%). One death was reported due to meningoenzephalitis. Artificial ventilation was provided to 25% of patients. *Leptospira interrogans* and *L. borgpetersenii* were identified in this group of patients.

### **Conclusion**

The commonest complication of severe leptospirosis was myocarditis. Mortality rate in our study (5%) was low compared to the reported literature.