

Content:

- Procalcitonin (PCT) for Risk Assessment and Rule-out of Bacterial Coinfection

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COVID-19 Pneumonia:
Procalcitonin (PCT) for Risk Assessment and Rule-out of Bacterial Coinfection

PCT on admission	PCT during hospital stay
Test PCT as an aid for early risk assessment and prioritization of high risk patients	Monitor PCT to detect:
<p><0.50 µg/L* low risk for bacterial coinfection and adverse outcome</p> <p>≥0.50 µg/L high risk patients, bacterial coinfection likely</p>	<p>secondary bacterial infections</p> <p>progression of disease</p>

* Majority of patients with mild disease had PCT values <0.25 µg/L or even <0.1 µg/L. ** Risk of bacterial infection and recommendation of oral antibiotic therapy with 100% at PCT 0.25 µg/L. ***

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The Role of Procalcitonin for Risk Assessment and Treatment of COVID-19 Patients

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Procalcitonin is widely used to assess the risk of bacterial infection and disease progression. Can it be an additional tool to identify COVID-19 patients at risk of severe disease?

Key Points

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COVID-19 Pneumonia:

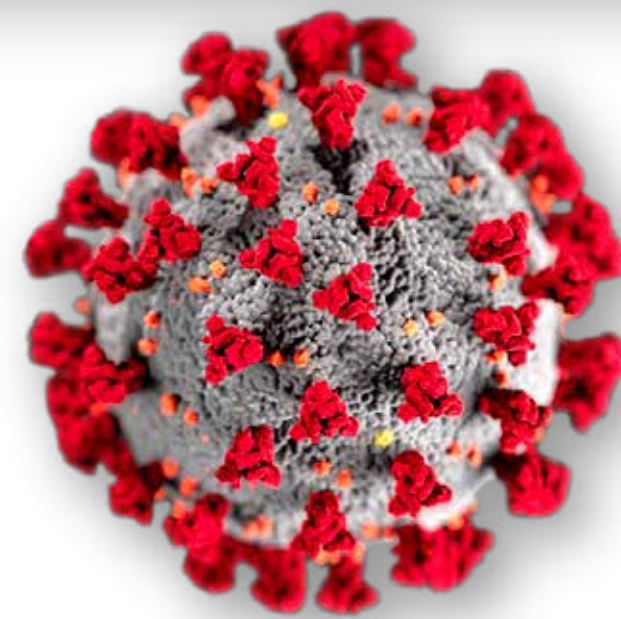
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* Majority of patients with mild disease had PCT values <0.25 µg/L or even <0.1 µg/L. ^{Ref-1-6}
Likelihood of bacterial infection and recommendation to start antibiotics in patients with LRTI at PCT 0.25 µg/L. ^{Ref-7}

References

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- Ref-2: Guan W. et al., NEJM 28 Feb 2020, <https://www.nejm.org/doi/full/10.1056/NEJMoa2002032>
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- Ref-6: Huang Y et al., medRxiv preprint 2020, doi: <https://doi.org/10.1101/2020.02.27.20029009>
- Ref-7: Schuetz P. et al., Exp. Rev Anti-infect. Ther., 2018, 16:7, 555-564, DOI: 10.1080/14787210.2018.1496331



COVID-19

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