

# FACTORS LINKED TO PROGNOSIS WORSENING IN CIRRHOTIC PATIENTS WITH SPONTANEOUS BACTERIAL PERITONITIS: A RETROSPECTIVE STUDY

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**A retrospective study of 114 cirrhotic patients with spontaneous bacterial peritonitis identified renal dysfunction, elevated INR, hyperbilirubinemia, and hyponatremia as significant factors associated with in-hospital mortality.**

## KEY POINTS

- Renal dysfunction was the strongest predictor of in-hospital mortality with an odds ratio of 8.4118 (95% CI 2.9190 to 24.2403,  $P=0.0001$ ).
- Serum bilirubin above 3 mg/dl, serum sodium below 130 mmol/l, and INR above 2 were each significantly associated with mortality, with odds ratios ranging from 4.4 to 4.9.
- The study included 114 first-time SBP patients from 2022-2024, predominantly with advanced liver disease (86% Child-Pugh C), with an overall in-hospital mortality rate of 17.5%.
- SBP diagnosis was based on ascitic fluid PMN count greater than 250 cells/mm<sup>3</sup>, with or without positive bacterial culture.
- This material is most relevant for clinicians managing cirrhotic patients with SBP who need to stratify mortality risk based on laboratory parameters.

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