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Title: Comparison of treatment outcomes in community-acquired pneumonia patients treated with beta lactam-macrolide combination versus fluoroquinolone monotherapy

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Body: The clinical outcomes of patients with community-acquired pneumonia treated in accordance with the recommendations of Turkish Thoracic Society (TTS) guidelines and who had received beta lactam-macrolide combination or fluoroquinolone (FQ) monotherapy were evaluated using the data from four contributing sites to the TURCAP database of TTS Assembly of Respiratory Infections. A total of 343 patients was included. Of these patients, 63.6% had received combination treatment and 36.4% had received FQ monotherapy. There was no difference between the two groups regarding age, gender and comorbidities. However, the mean Pneumonia Severity Index (PSI) scores were 101.8 ± 35.8 and 91.0 ± 28.9 ($p=0.006$) and CURB-65 scores were 2.3 ± 1.0 and 2.0 ± 0.8 ($p=0.002$), respectively. The length of hospital stay was 9.5 ± 6.1 days in the combination and 8.5 ± 4.4 days in the FQ groups ($p=0.24$). The rates for cure, partial improvement and mortality were 59.1%, 28.2%, 12.8% for the combination group versus 72.6%, 24.2%, 3.2% for the FQ group, respectively. There was no significant difference between the improvement rates; on the other hand, the mortality was higher in the combination group ($p=.0.03$). Logistic regression analysis showed that mortality was associated with PSI score and not with the choice of antibiotic treatment. In this retrospective analysis of TURCAP database, the clinical success rates were similar in patients who received a combination of beta lactam and macrolide and fluoroquinolone monotherapy. The lower mortality observed in the latter group was found to be associated with less severe disease at presentation.