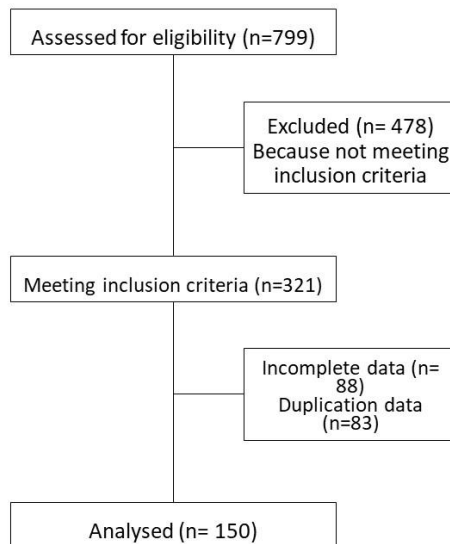


Basic Results Summary

ISRCTN 13543394

The impact of initial scores, white blood cell and platelet counts, and albumin on length of stay and mortality in sepsis patients

Participant Flow



Baseline Characteristics

Table 1. Participants Characteristics

		Mortality in ICU		p
		Yes N= 113 (75.3%)	No N= 37 (24.7%)	
Sex				
Male	N= 68	50 (73.5%)	18 (26.5%)	0.641‡
Female	N= 82	63 (76.8%)	19 (23.2%)	
Age – median (range) (years)*	61 (23-80)	62 (24-80)	56 (23-80)	0.008 §
Weight – median (range) (kg)*	60 (40-93)	62 (40-93)	60 (45-90)	0.163 §
Comorbidities				
Hypertension	N= 25	19	6	0.716**
Diabetes mellitus	N= 20	13	7	
Heart failure	N= 5	3	2	
CVA/ stroke	N= 5	4	1	
Asthma or COPD	N= 5	3	2	
Chronic kidney disease	N= 2	2	0	
Others (tumor, schizophrenia, liver disease)	N= 4	3	1	
Hypertension and Diabetes mellitus	N= 9	6	3	
Hypertension and chronic kidney disease	N= 3	1	0	

Hypertension and CVA/ stroke	N= 2	2	0	
Hypertension and heart failure	N= 2	2	0	
Diabetes mellitus and coronary artery disease	N= 2	2	0	
Others combination	N= 8	5	3	
Number of comorbidities				
No comorbidities	58 (38.7)	46	12	0.568‡
1 comorbid	66 (44.0)	47	19	
2 or more	26 (17.3)	20	6	

*not normally distributed data

‡ Uji Chi square, bermakna secara statistik jika $p < 0,05$

φ Uji Mann-Whitney U Test, bermakna secara statistik jika $p < 0,05$

** Uji Fisher's Exact Test, bermakna secara statistik jika $p < 0,05$

Outcome Measures

Table 2. Differences between qSOFA, NEWS-2, and ROX index in mortality group and survival group.

	N	Mortality in ICU		P φ
		Yes	No	
qSOFA				
0	19	5	14	< 0.001**
1	40	28	12	
2	50	42	8	
3	41	38	3	
NEWS-2	10 (0 – 17)	11 (1-17)	7 (0-14)	< 0.001
ROX index	4.7 (1.9 – 31.7)	4.1 (1.9 – 31.7)	9.3 (2.7 – 23.6)	< 0.001

** Fisher's Exact Test, statistically significant if $p < 0.05$

φ Mann-Whitney U Test, statistically significant if $p < 0.05$

Table 3. Leucocyte, differential count of leucocyte, platelet, and its ration in mortality group and survival group.

		Mortality in ICU		P φ
		Yes	No	
Total leucocyte x 10 ³	15.15 (1.91 – 40.31)	15.21 (4.62 – 40.31)	15.03 (1.91 – 31.40)	0.711
Neutrophil	12.09 (1.08 – 37.11)	12.03 (1.08 – 37.11)	12.53 (1.18 – 27.34)	0.769
Lymphocyte	1.03 (0.17 – 11.51)	1.01 (0.17 – 11.51)	1.06 (0.33 – 5.72)	0.050
Monocyte	0.83 (0.02 – 3.44)	0.82 (0.02 – 3.44)	0.86 (0.04 – 2.41)	0.856
Platelet	283.50 (6.40 – 832.00)	269.00 (6.40 – 702.00)	316.00 (100.00 – 832.00)	0.014***
		Mean: 278.24 (7.13)	Mean: 367.41 (197.65)	
Neutrophil- Lymphocyte Ratio	11.17 (0.93 – 57.95)	11.76 (0.93 – 52.61)	10.26 (0.95 – 57.95)	0.142
Platelet- Lymphocyte Ratio	256.43 (7.36 – 1505.88)	264.86 (7.36 – 1505.88)	221.37 (58.80 – 1081.82)	0.843
Lymphocyte- Monocyte Ratio	1.25 (0.25 – 24.75)	1.20 (0.25 – 11.67)	1.37 (0.44 – 24.75)	0.151

φ Mann-Whitney U Test. statistically significant if $p < 0.05$

***T-test. statistically significant if $p < 0.05$

Albumin serum level was not analysis due to incomplete data.

Table 4. Differences between qSOFA, NEWS-2, and ROX index in the length of stay 1-5 days and > 5 days group.

		Length of stay		P φ
		1-5 days N=82 (57.3%)	>5 days N=61 (42.7%)	
qSOFA				
0	18	10	8	0.409
1	38	18	20	
2	48	28	20	
3	39	26	13	
NEWS-2		10 (0-17)	8 (0-16)	0.092
ROX index		4.25 (1.9 – 23.6)	4.9 (2.3 – 31.7)	0.359

Table 5. Leucocyte, differential count of leucocyte, platelet, and its ratio in the length of stay 1-5 days and > 5 days group.

		Length of stay		P φ
		1-5 days	>5 days	
Total leucocyte		16.27 (4.62 –	13.19 (5.17 –	0.043
x 10 ³		40.31)	33.61)	
Neutrophil		13.78 (0.08 –	10.44 (4.46 –	0.081
		37.11)	32.09)	
Lymphocyte		1.02 (0.17 –	1.06 (0.39 –	0.890
		5.72)	11.51)	
Monocyte		0.89 (0.02 –	0.81 (0.16 –	0.481
		3.44)	2.64)	
Platelet		283.5 (15.0 –	285.0 (6.4 –	0.845
		832.0)	634.0)	
Neutrophil- Lymphocyte Ratio		12.32 (0.09 –	9.81 (0.93 –	0.121
		57.95)	52.61)	
Platelet- Lymphocyte Ratio		241.9 (13.03 –	262.07 (7.36 –	0.677
		1505.88)	810.26)	
Lymphocyte- Monocyte Ratio		1.12 (0.44 –	1.25 (0.25 –	0.538
		11.63)	8.25)	

φ Mann-Whitney U Test. statistically significant if $p < 0.05$

Adverse Events: There were no adverse events associated with this study