成人肺炎診療ガイドライン 2024

編集　日本呼吸器学会成人肺炎診療ガイドライン 2024 作成委員会

Online Supplement

SR2
市中肺炎における原因微生物

図 Suppl-1. Unknown etiology.

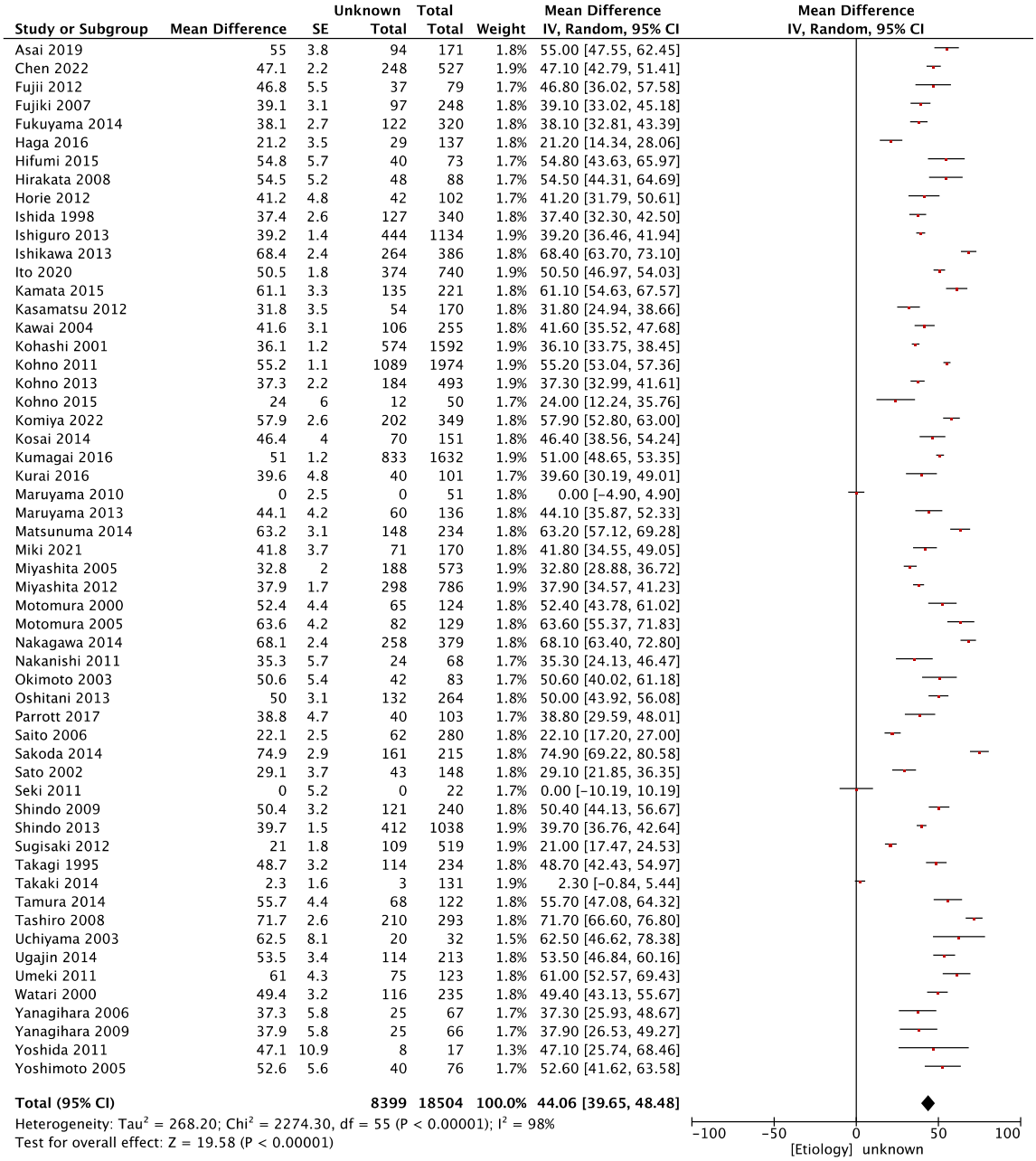


図 Suppl-2-1. Frequency of *S. pneumoniae* isolated in CAP in both inpatients and outpatients.

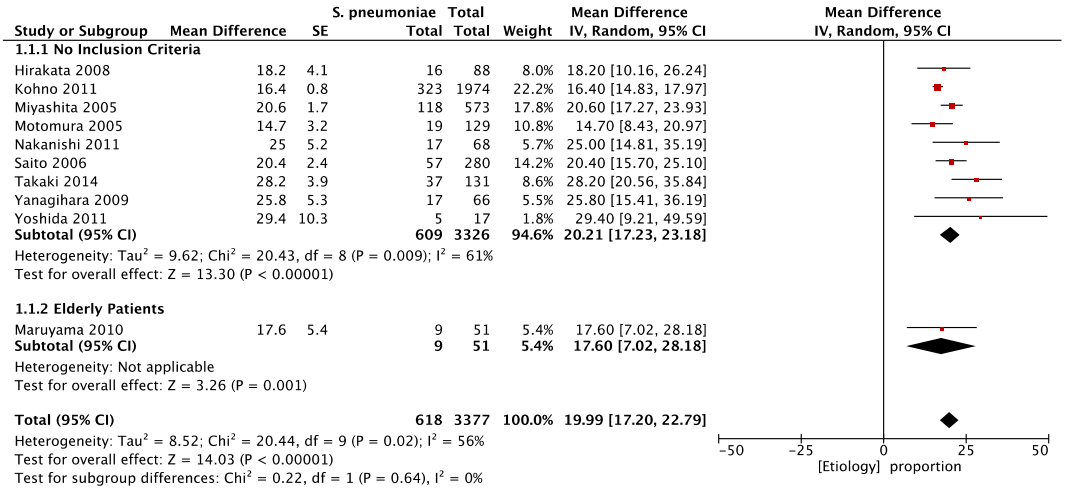


図 Suppl-2-2. Frequency of *H. influenzae* isolated in CAP in both inpatients and outpatients.

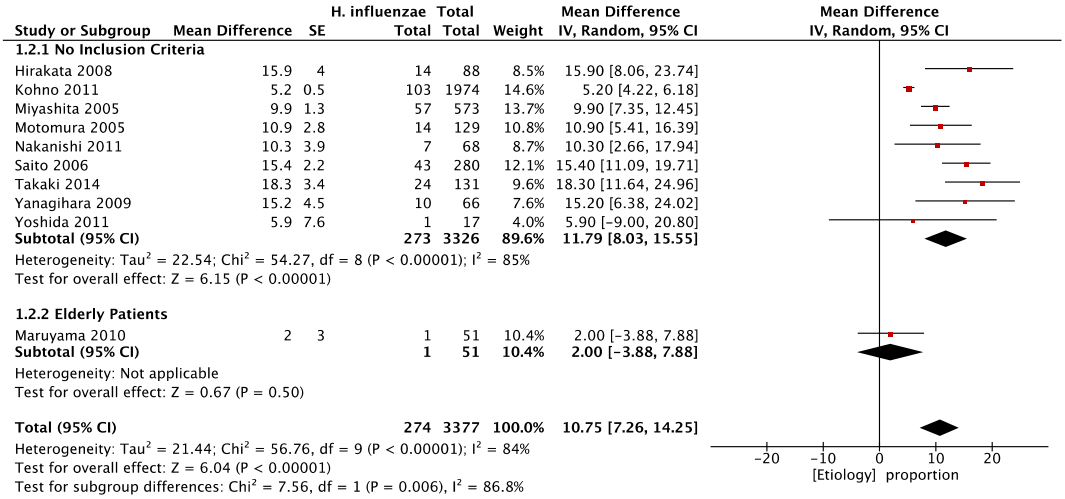


図 Suppl-2-3. Frequency of *M. pneumoniae* isolated in CAP in both inpatients and outpatients.

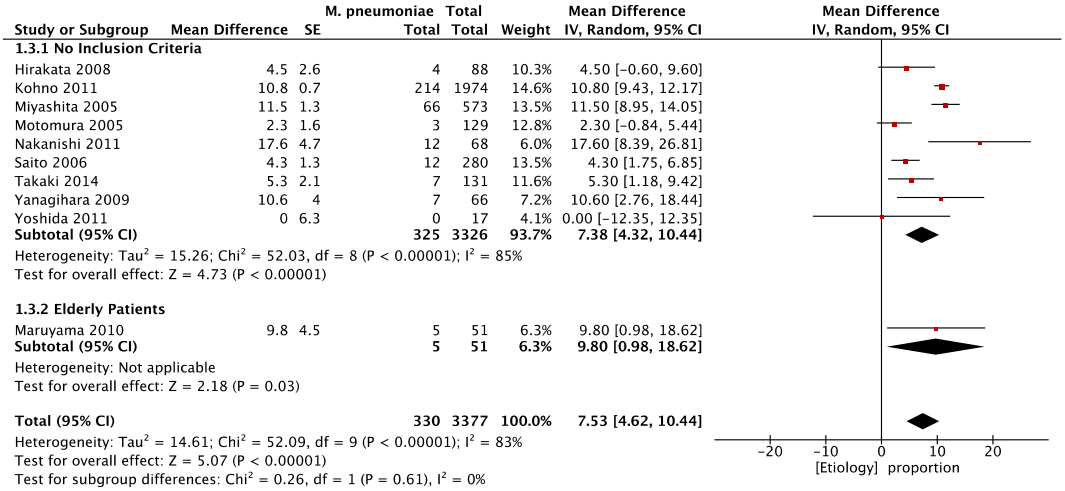


図 Suppl-2-4. Frequency of *C. pneumoniae* isolated in CAP in both inpatients and outpatients.

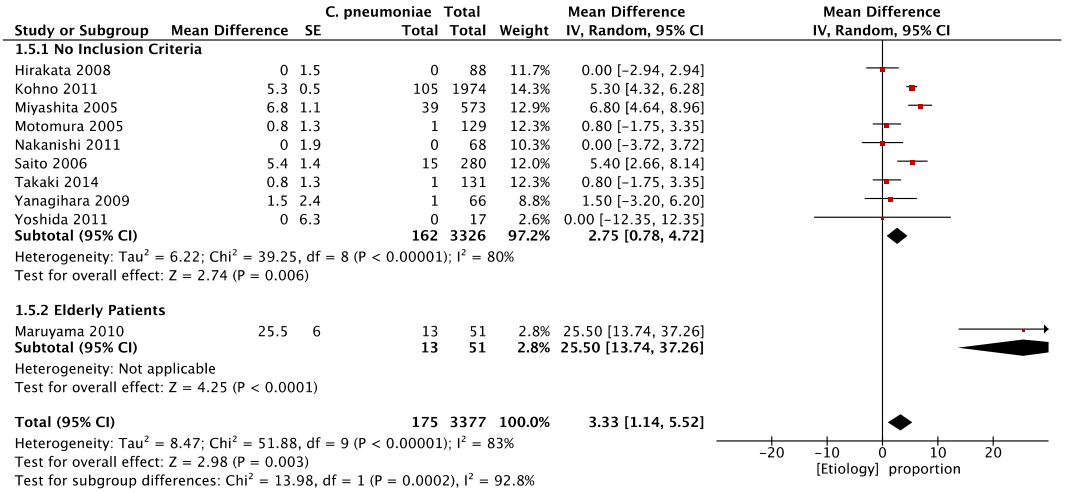


図 Suppl-2-5. Frequency of *M. catarrhalis* isolated in CAP in both inpatients and outpatients.

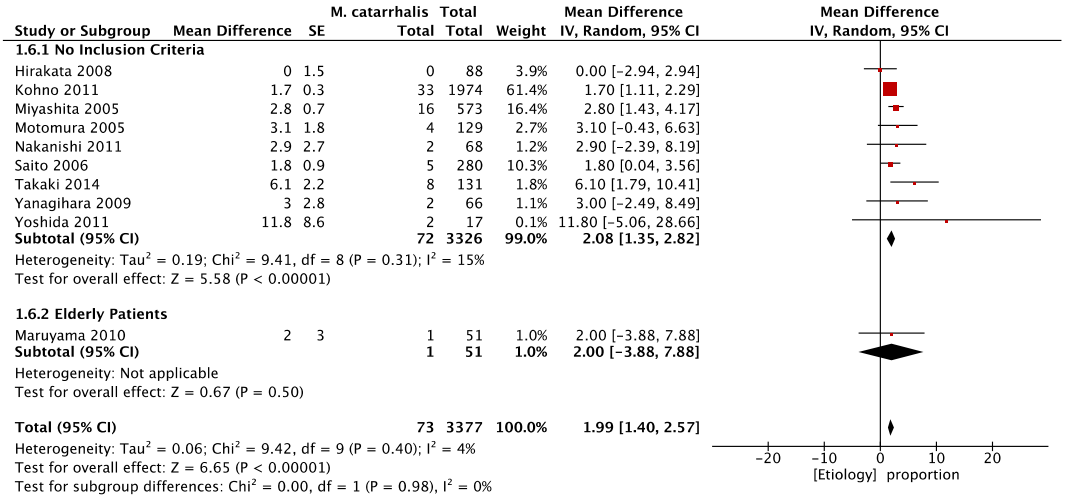


図 Suppl-2-6. Frequency of *S. aureus* isolated in CAP in both inpatients and outpatients.

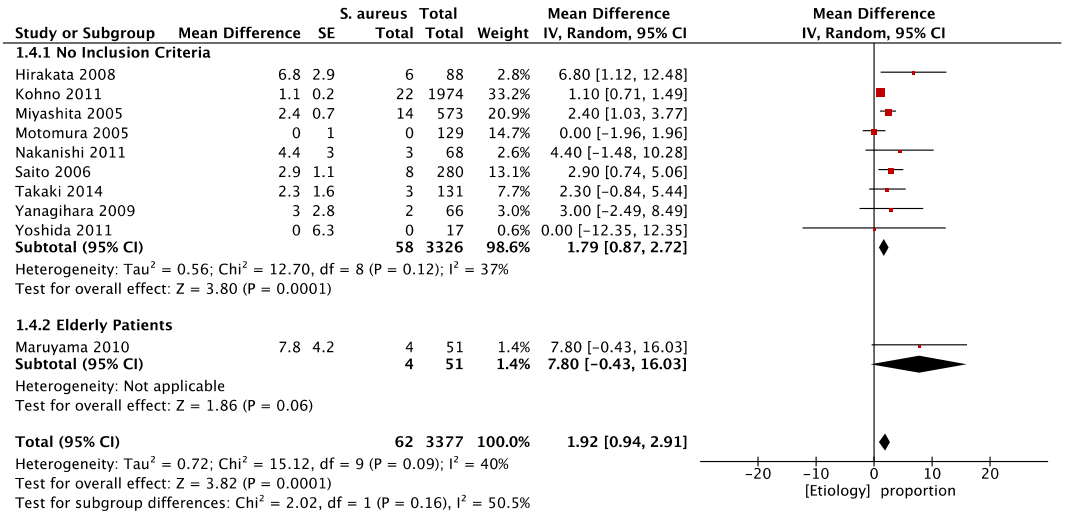


図 Suppl-2-7. Frequency of *K. pneumoniae* isolated in CAP in both inpatients and outpatients.

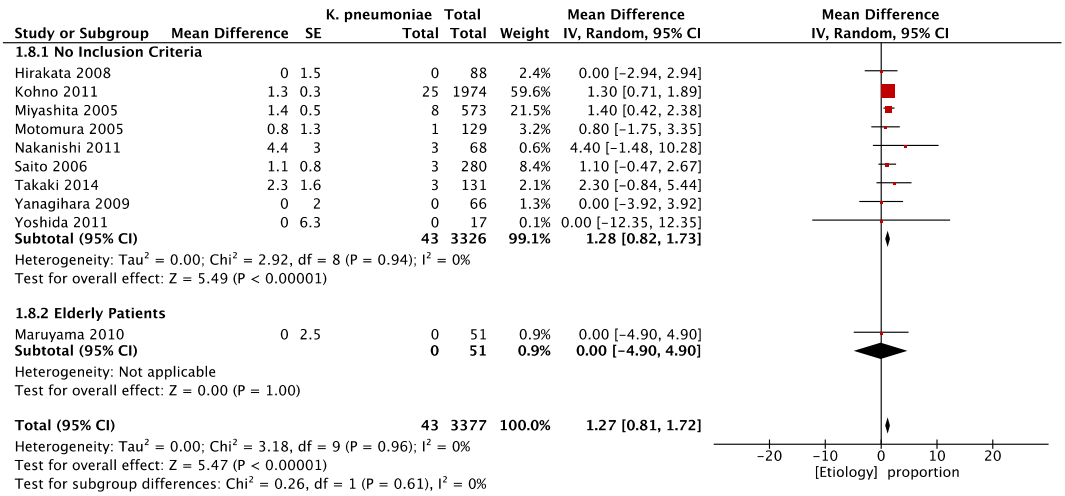


図 Suppl-2-8. Frequency of *P. aeruginosa* isolated in CAP in both inpatients and outpatients.

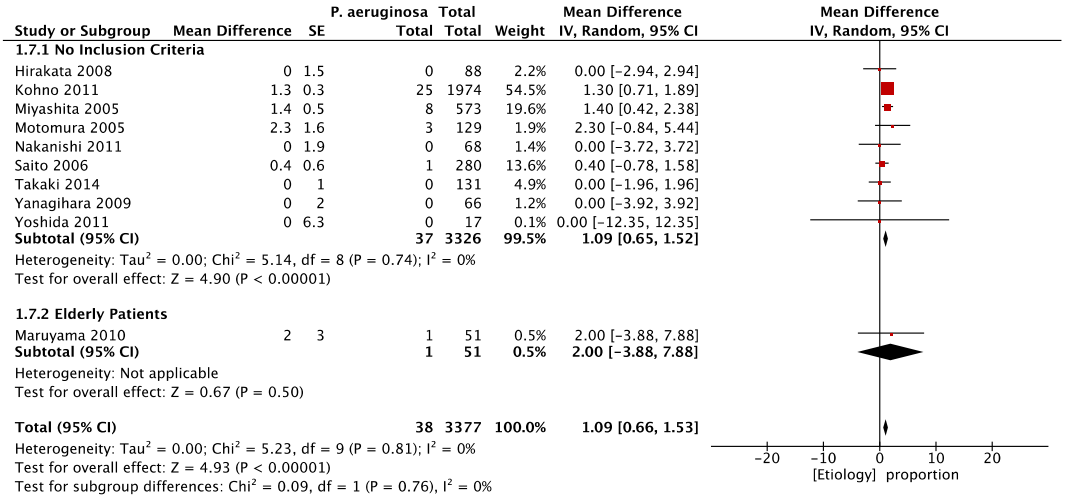


図 Suppl-2-9. Frequency of influenza virus isolated in CAP in both inpatients and outpatients.

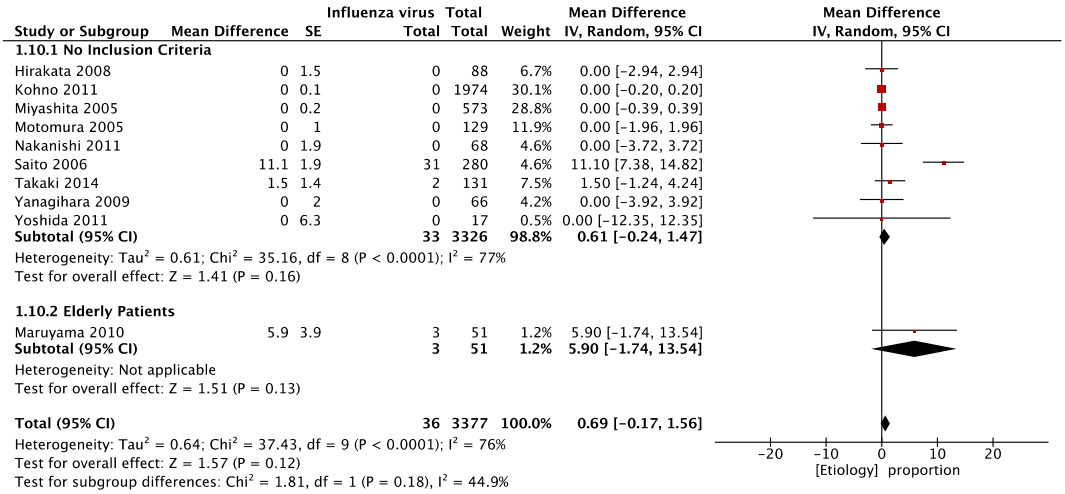


図 Suppl-2-10. Frequency of *L. pneumophila* isolated in CAP in both inpatients and outpatients.

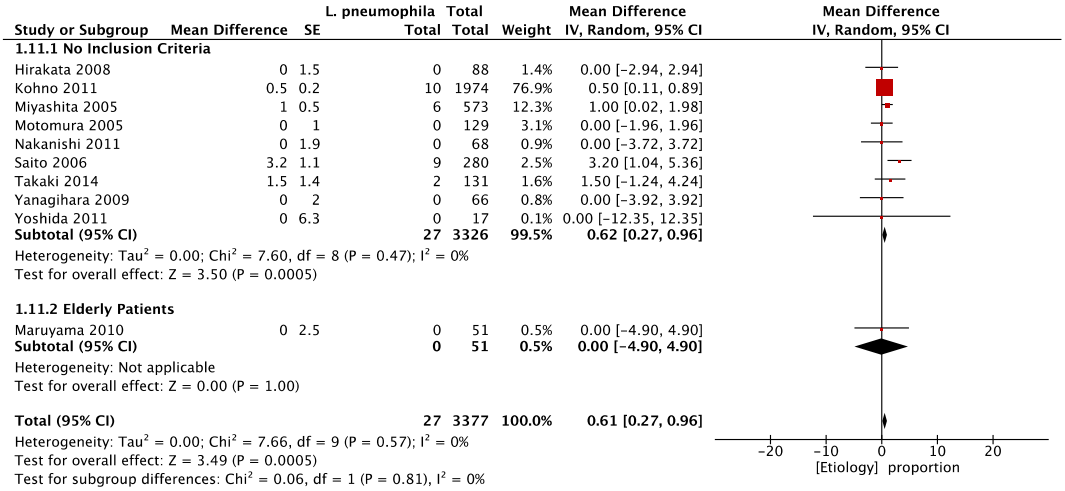


図 Suppl-3-1. Frequency of *S. pneumoniae* isolated in CAP requiring hospitalization.

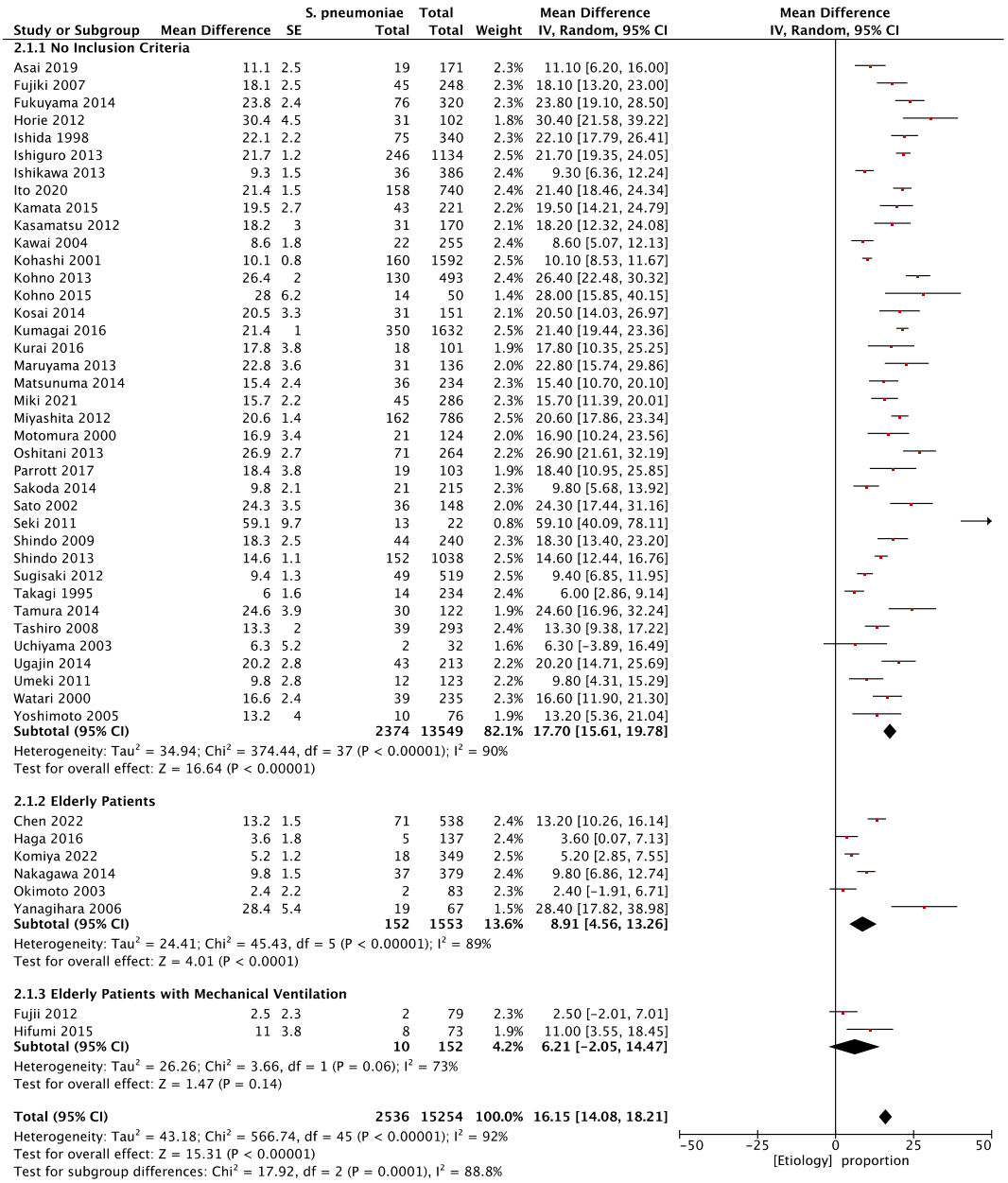


図 Suppl-3-2. Frequency of *H. influenzae* isolated in CAP requiring hospitalization.

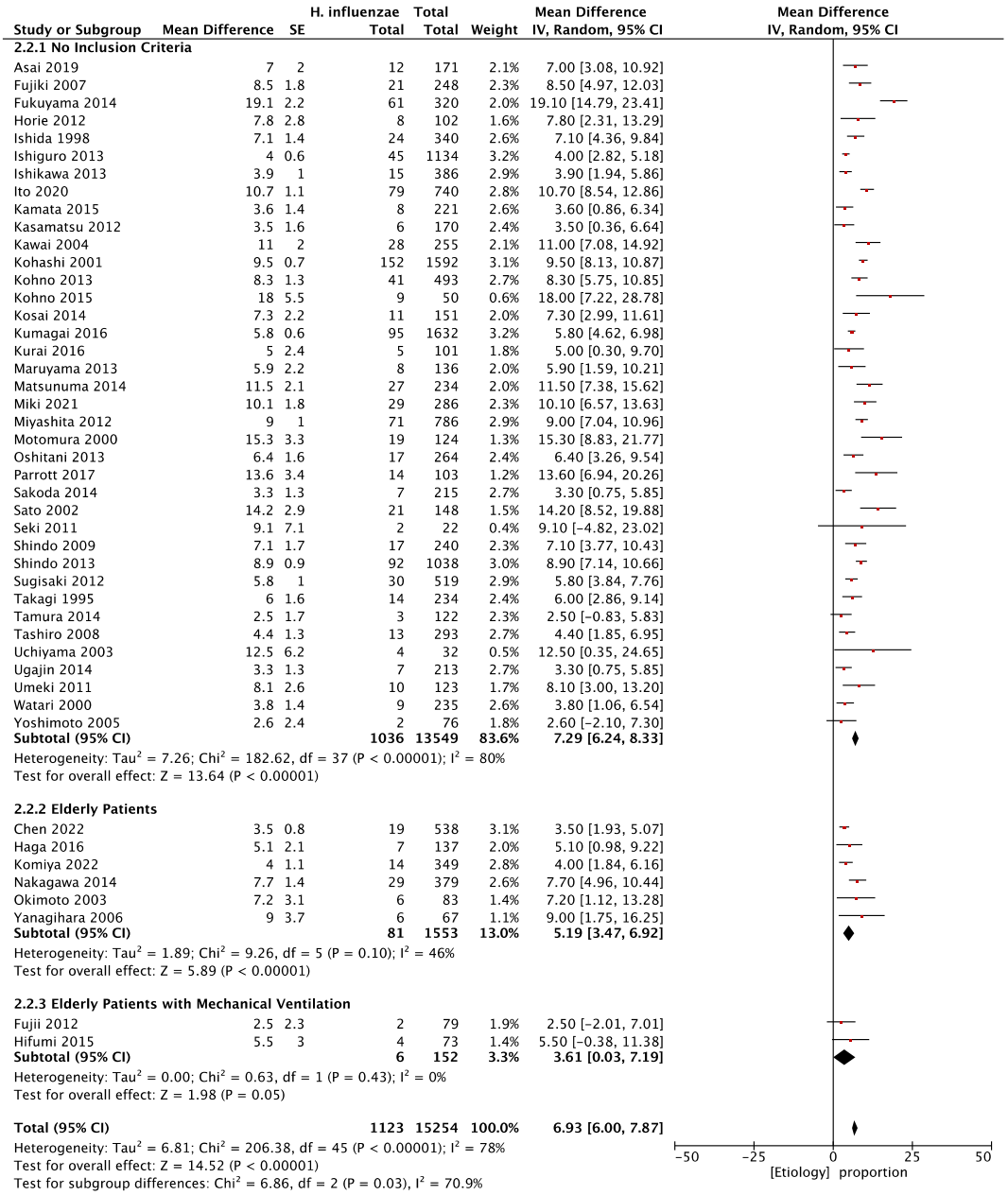


図 Suppl-3-3. Frequency of *S. aureus* isolated in CAP requiring hospitalization.

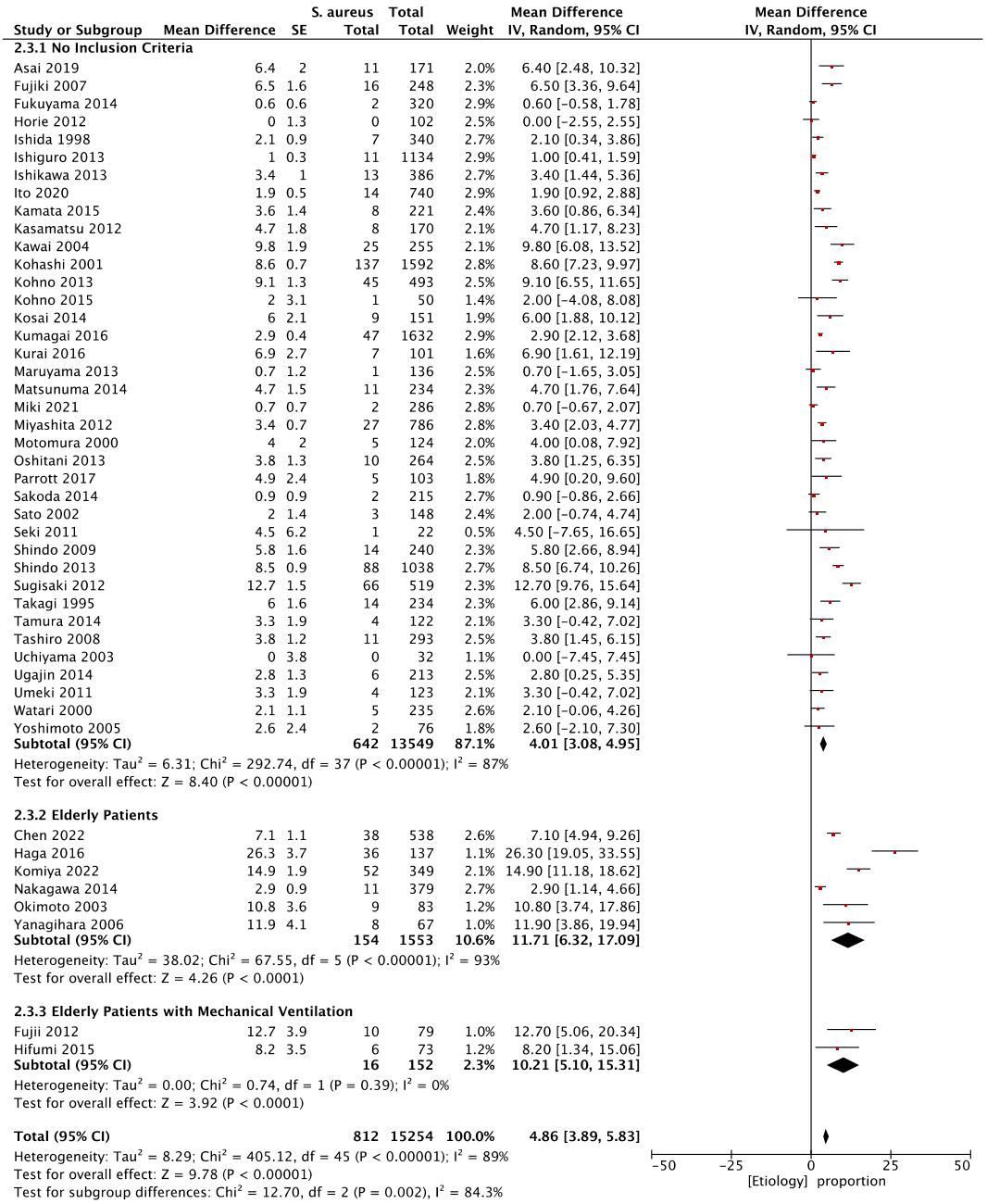


図 Suppl-3-4. Frequency of *M. pneumoniae* isolated in CAP requiring hospitalization.

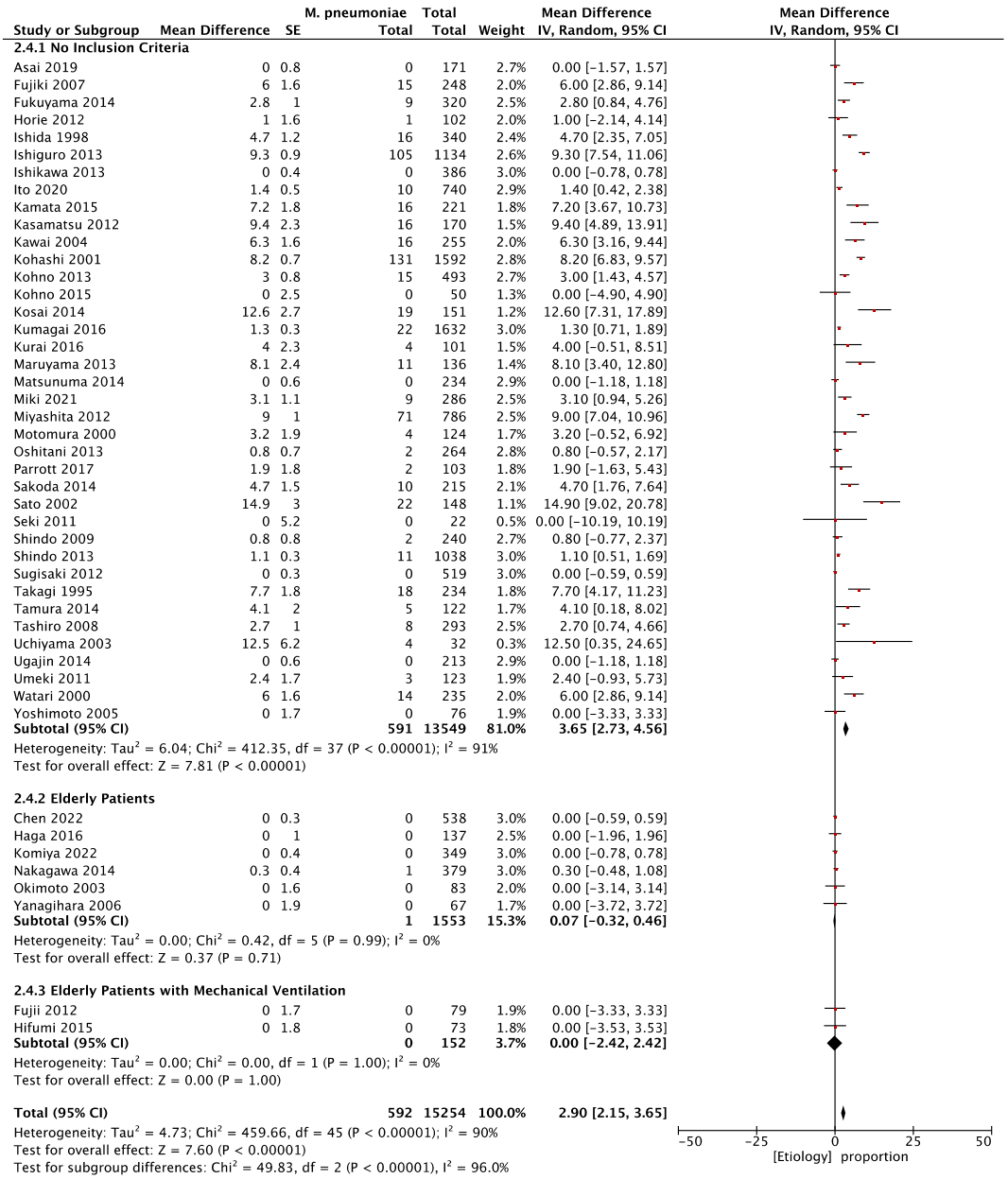


図 Suppl-3-5. Frequency of *K. pneumoniae* isolated in CAP requiring hospitalization.

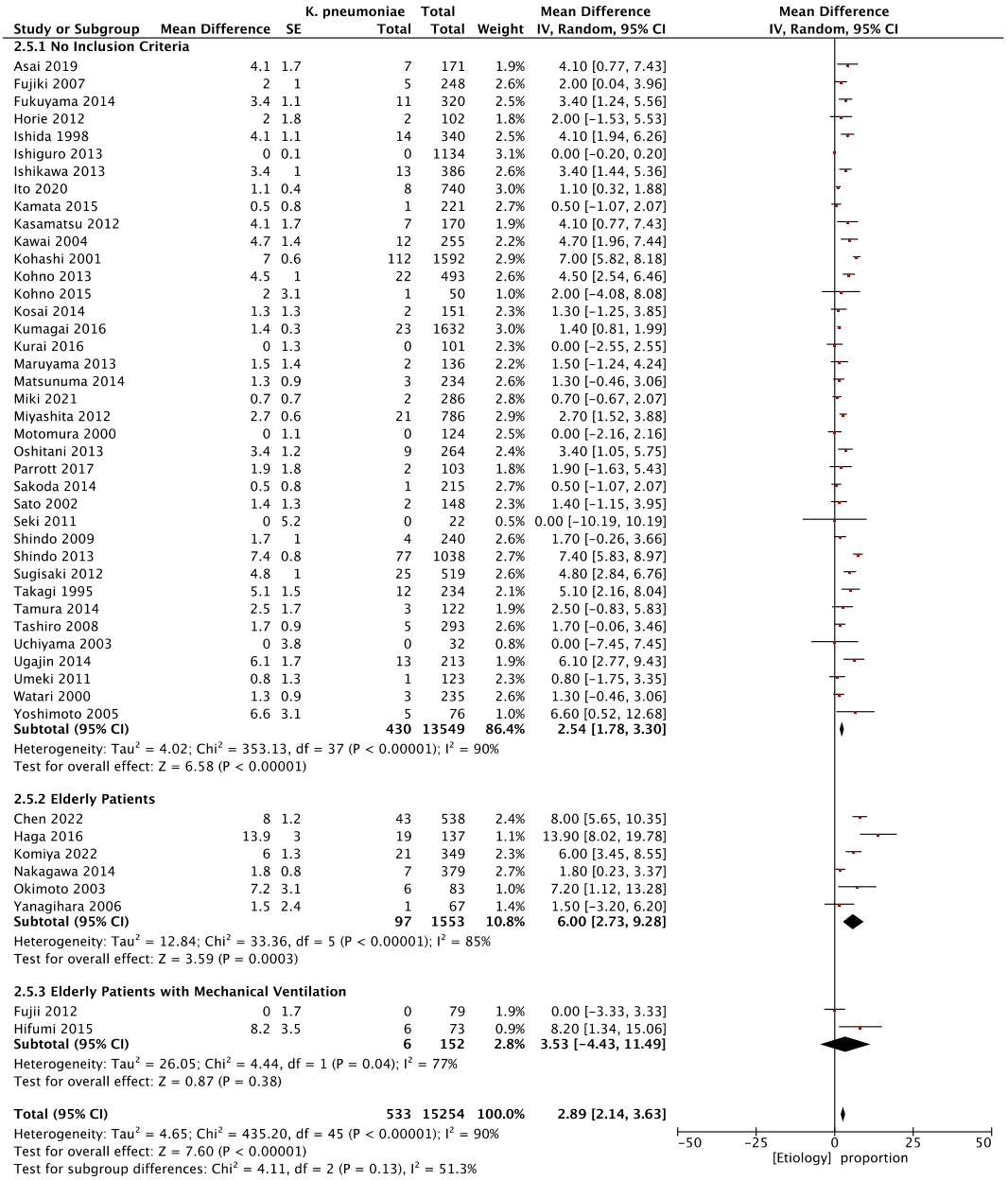


図 Suppl-3-6. Frequency of *P. aeruginosa* isolated in CAP requiring hospitalization.

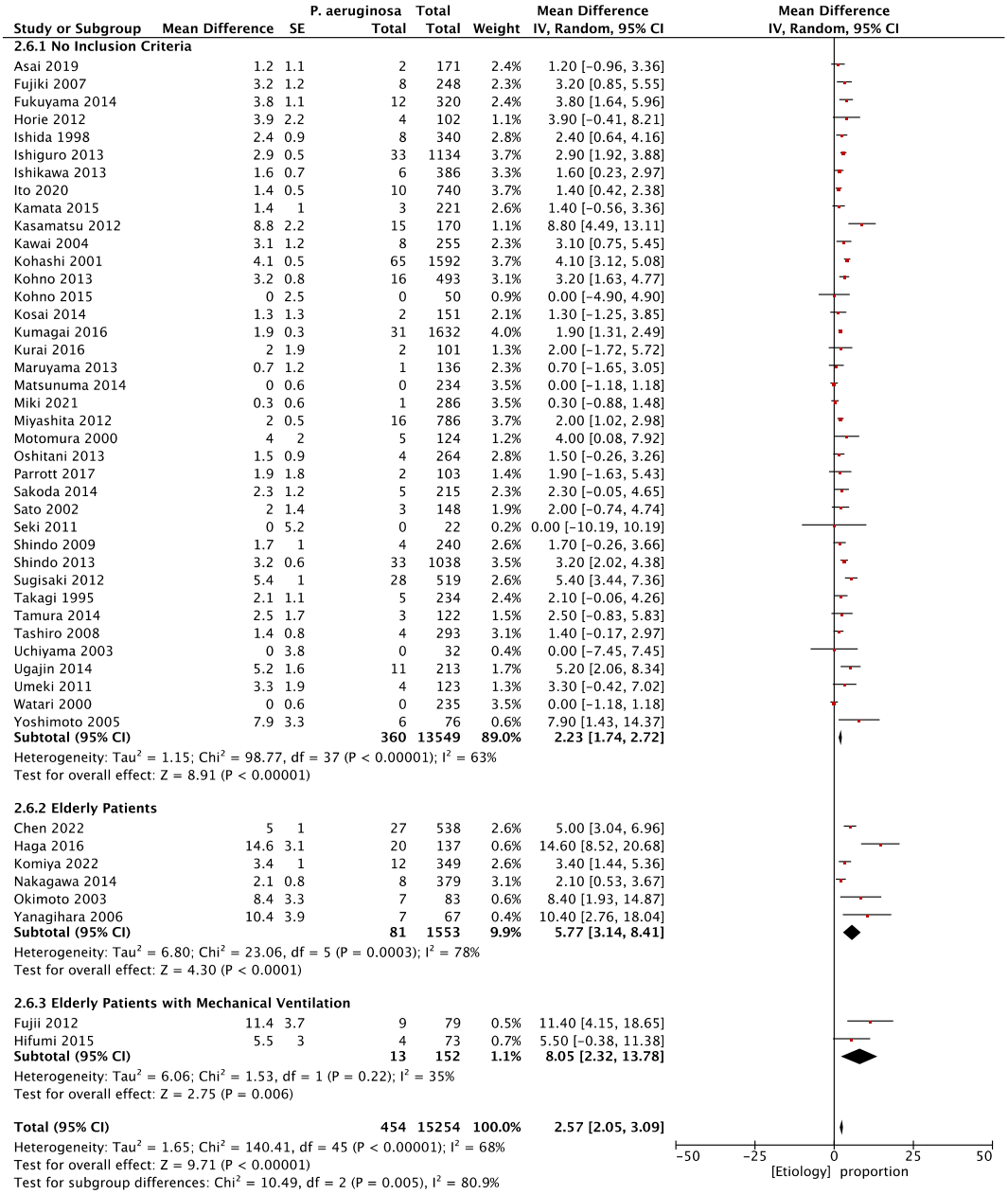


図 Suppl-3-7. Frequency of *M. catarrhalis* isolated in CAP requiring hospitalization.

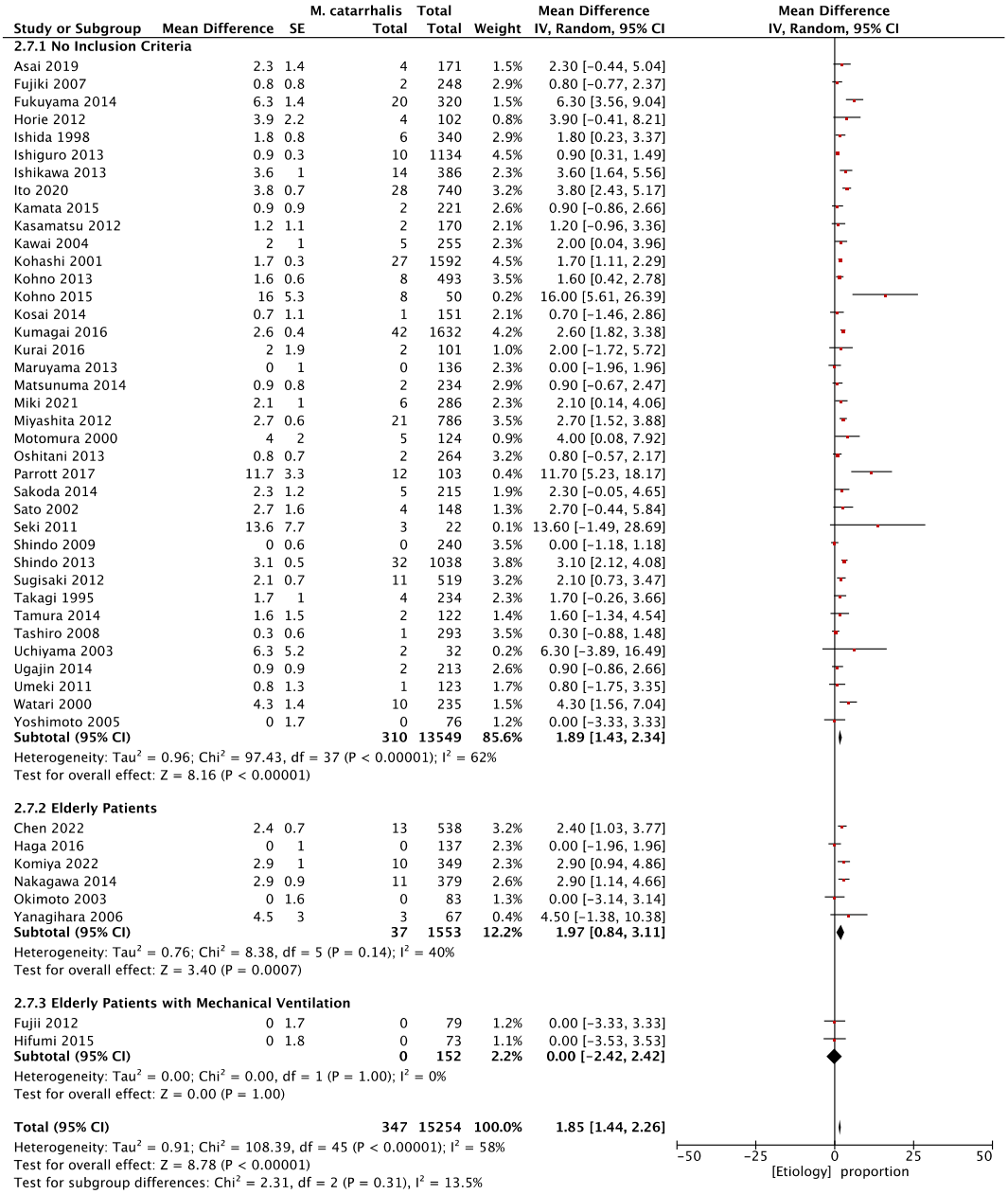


図 Suppl-3-8. Frequency of *C. pneumoniae* isolated in CAP requiring hospitalization.

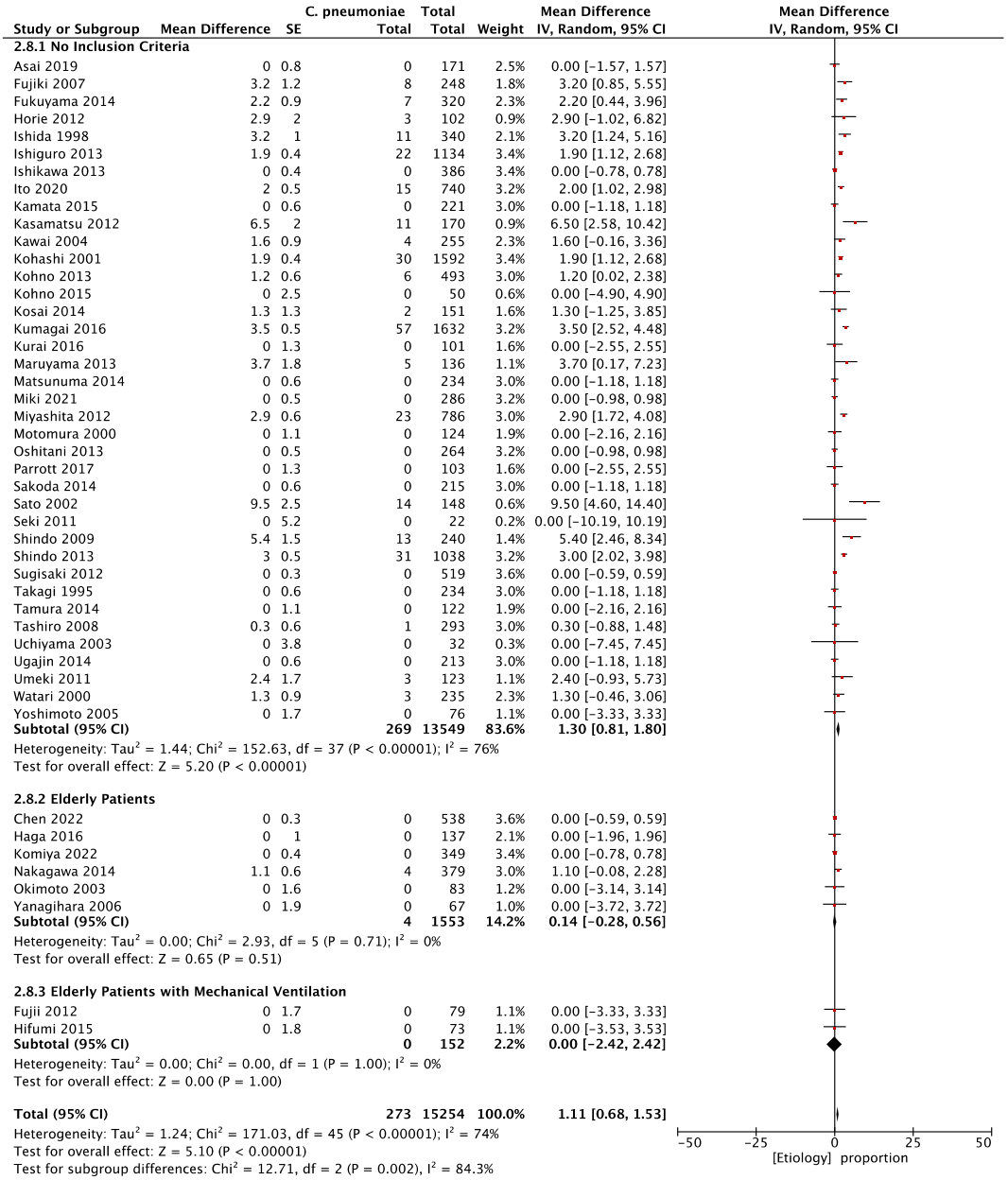


図 Suppl-3-9. Frequency of *L. pneumophila* isolated in CAP requiring hospitalization.

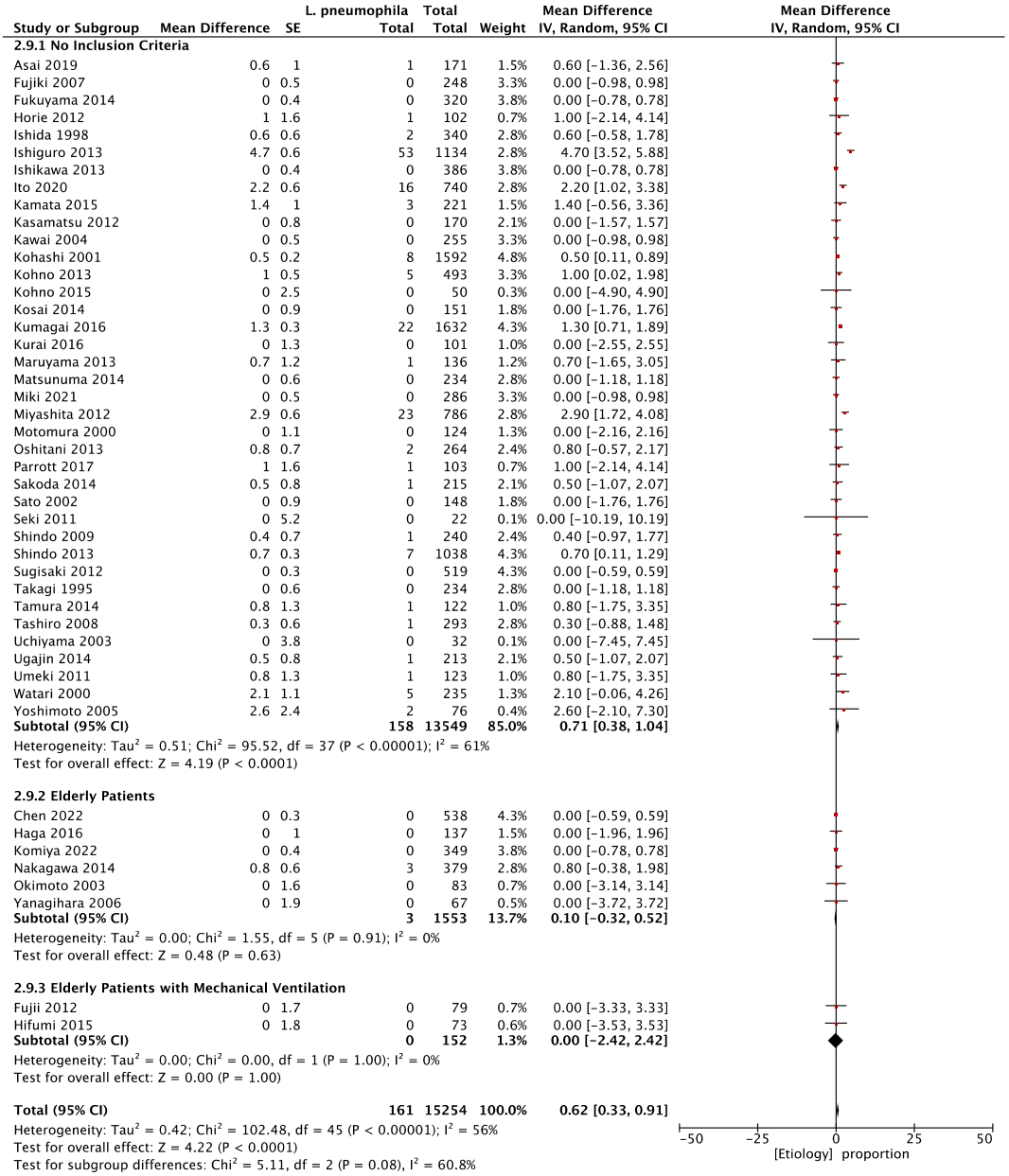


図 Suppl-3-10. Frequency of *E. coli* isolated in CAP requiring hospitalization.

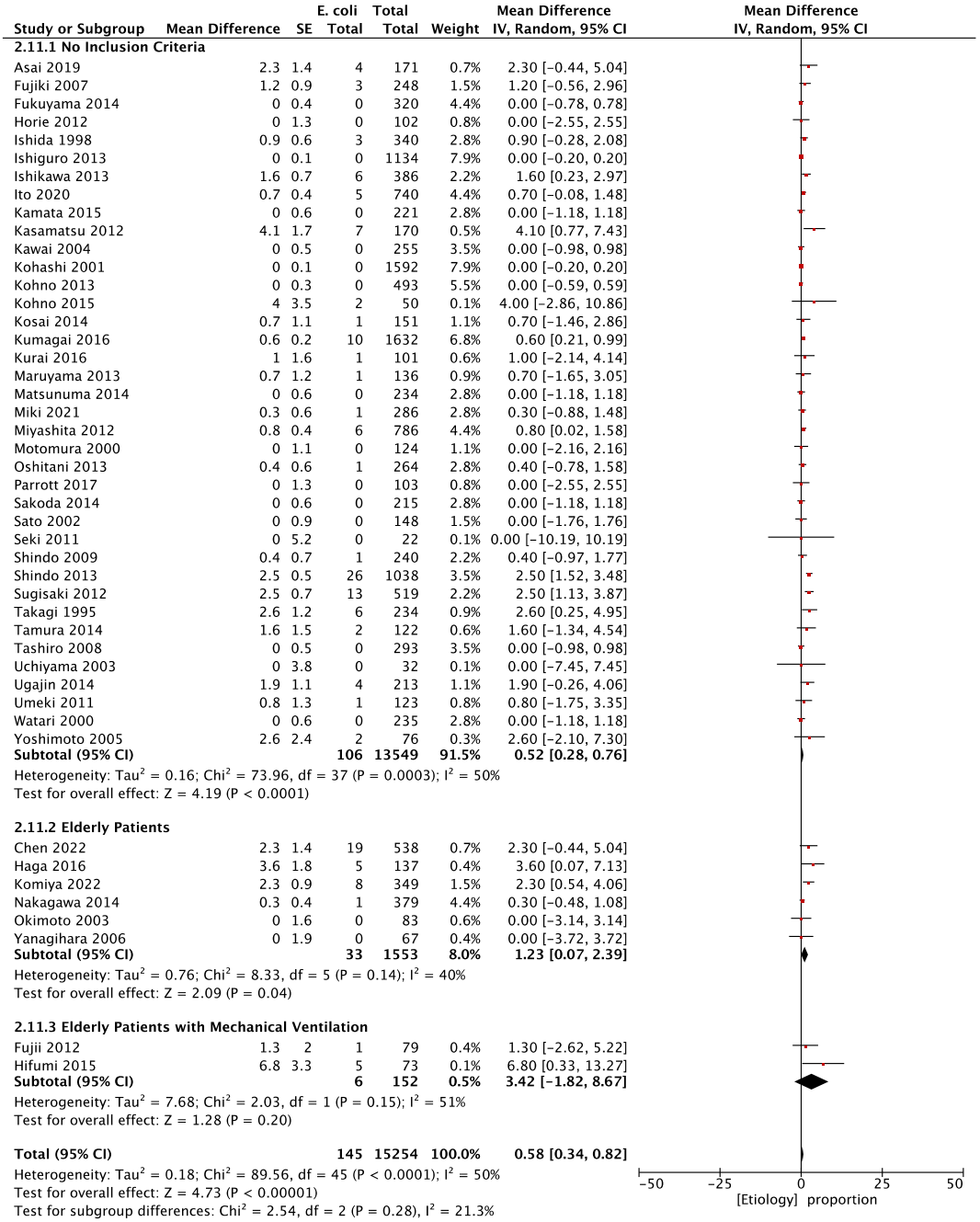


図 Suppl-4-1. Frequency of *S. pneumoniae* isolated in CAP using PCR to search for pathogenic microorganisms.

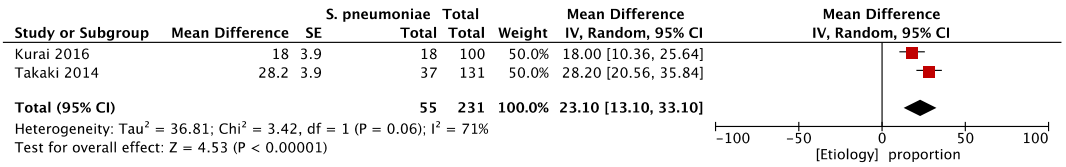


図 Suppl-4-2. Frequency of *H. influenzae* isolated in CAP using PCR to search for pathogenic microorganisms.

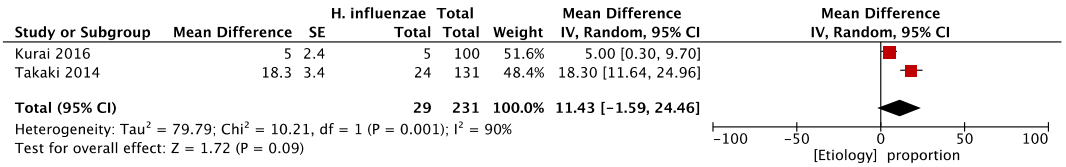


図 Suppl-4-3. Frequency of HEV/HRV isolated in CAP using PCR to search for pathogenic microorganisms.

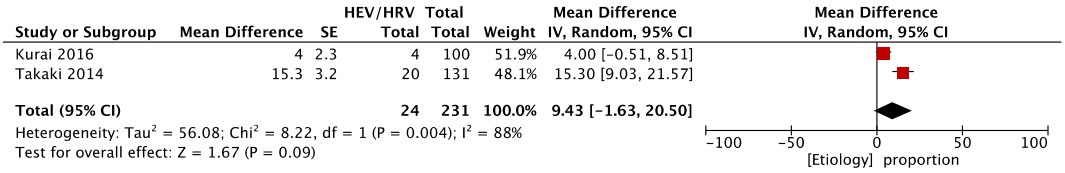


図 Suppl-4-4. Frequency of *M. pneumoniae* isolated in CAP using PCR to search for pathogenic microorganisms.

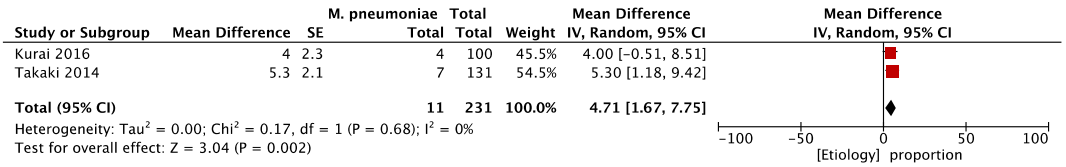


図 Suppl-4-5. Frequency of hMPV isolated in CAP using PCR to search for pathogenic microorganisms.

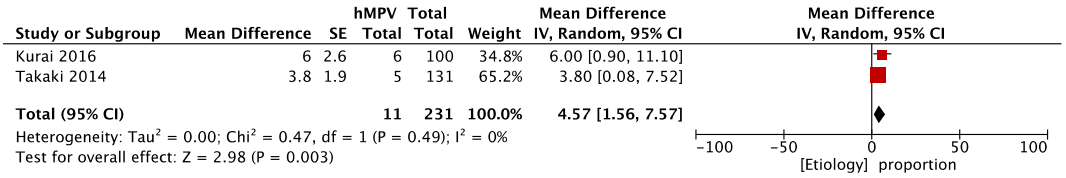


図 Suppl-4-6. Frequency of *S. aureus* isolated in CAP using PCR to search for pathogenic microorganisms.

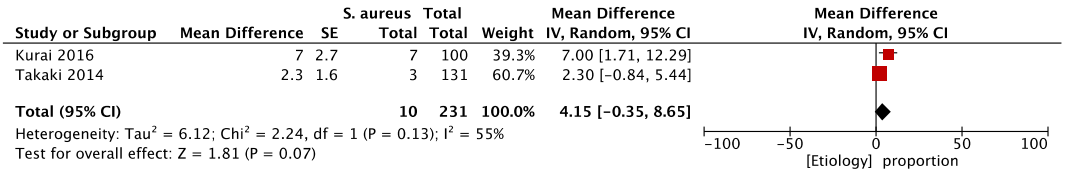


図 Suppl-4-7. Frequency of RSV isolated in CAP using PCR to search for pathogenic microorganisms.

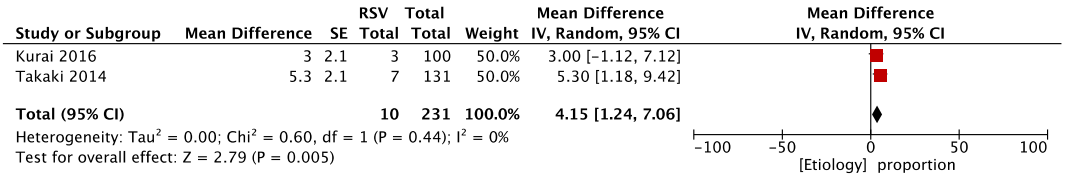


図 Suppl-4-8. Frequency of *M. catarrhalis* isolated in CAP using PCR to search for pathogenic microorganisms.

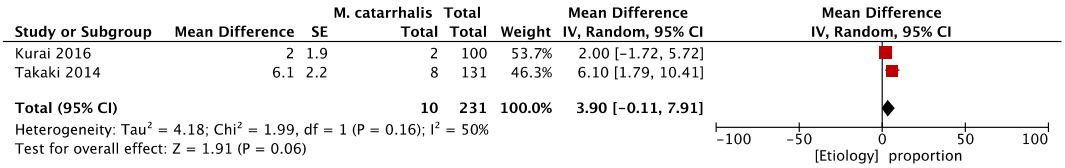
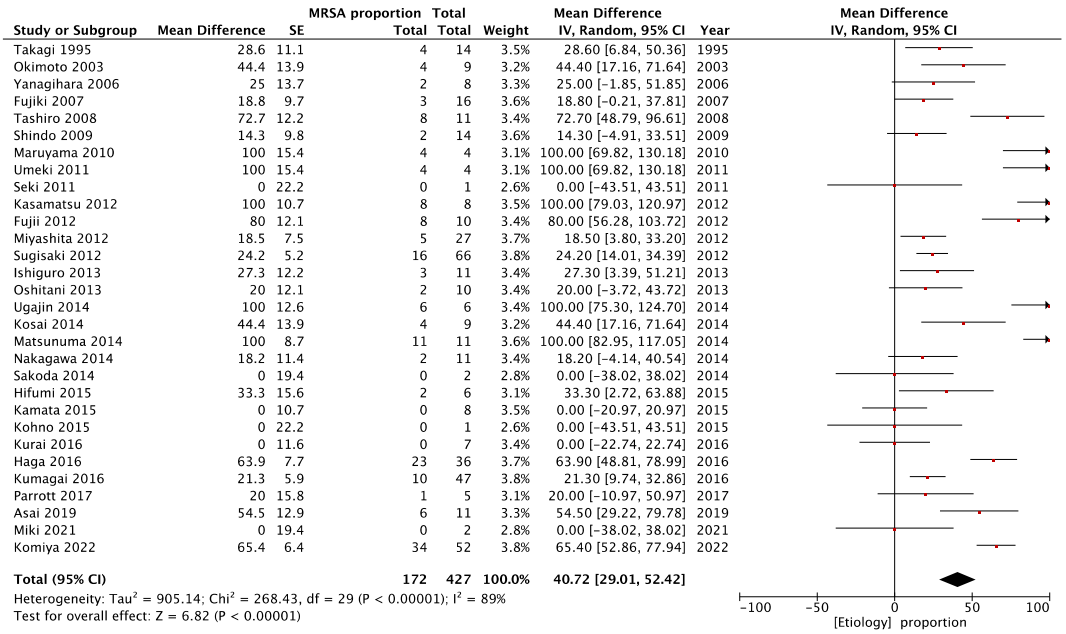


図 Suppl-5. Frequency of MRSA in CAP.



成人肺炎診療ガイドライン 2024　Online Supplement
SR2　市中肺炎における原因微生物

SR2 は Review Manager にて解析を行った。同ソフトの仕様により本来解析者の意図しない記載があるため留意されたい。
上段に[Mean Difference]の記載があるが、平均差ではなく起炎菌割合の解析を行っている。
上段に[Total]の表示が重複しているが左列が当該菌種の検出人数、右列に観察者総数を記している。[Test for overall effect]は本解析とは無関係の数字が提示されている。

SR3
CAP 治療における第一選択薬としてのニューキノロン

図 Suppl-1. 臨床的奏効率.

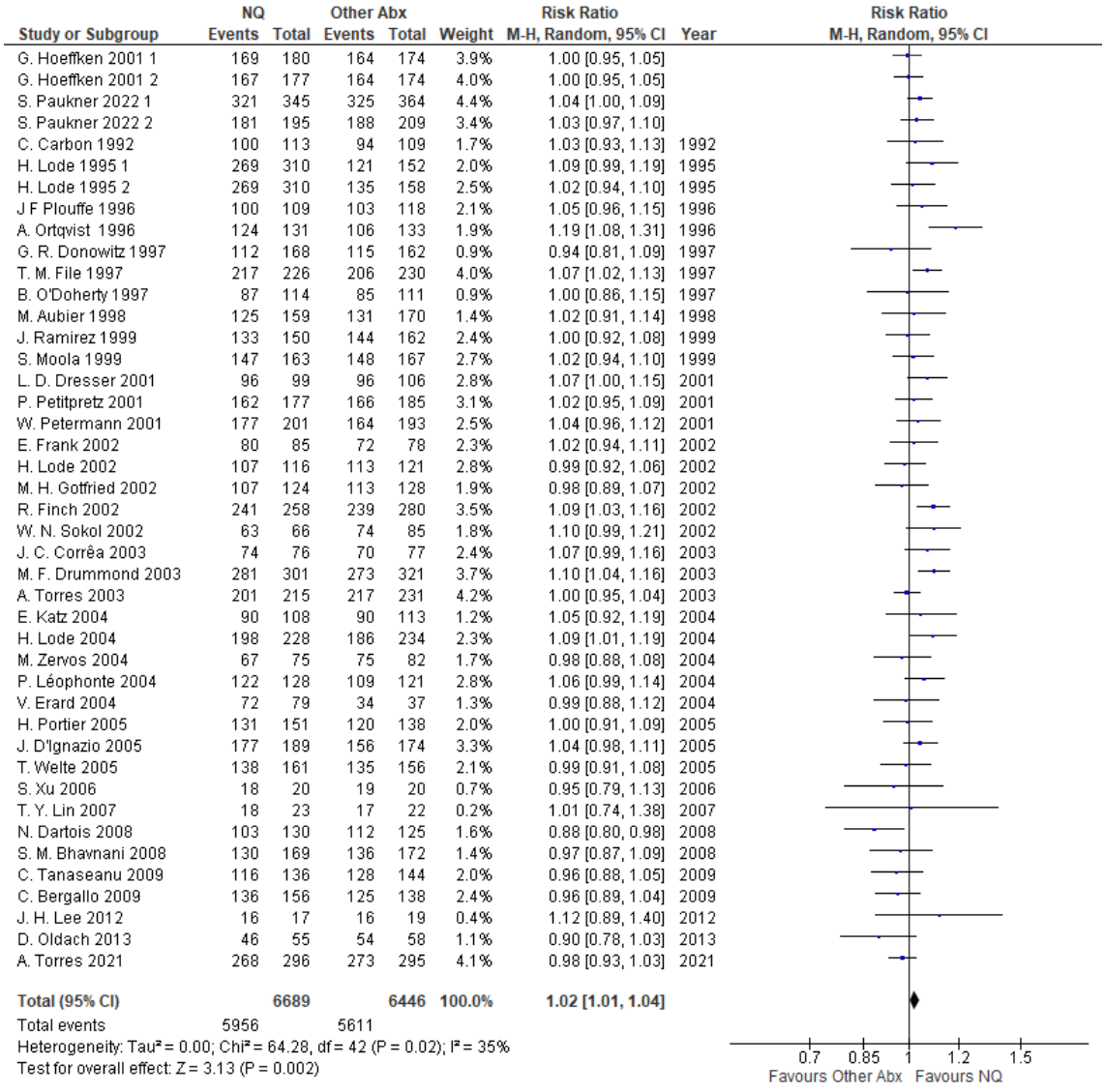


図 Suppl-2. 微生物学的奏効率.

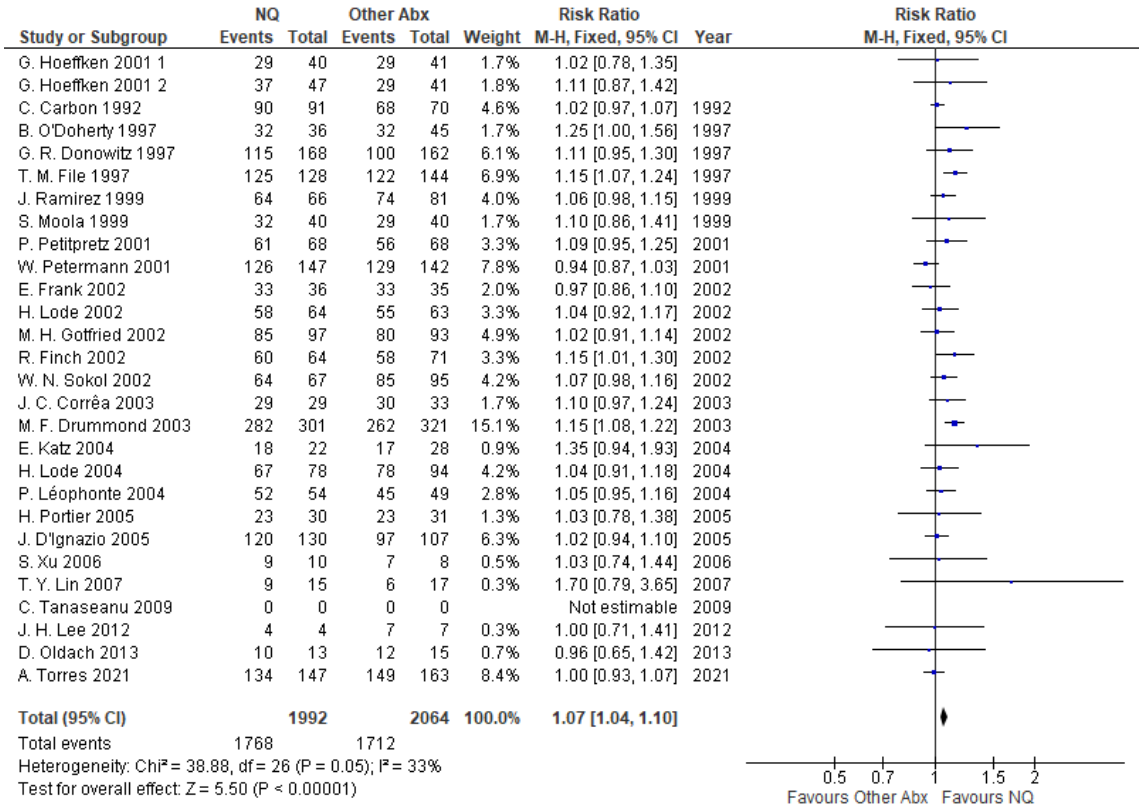


図 Suppl-3. 入院期間.

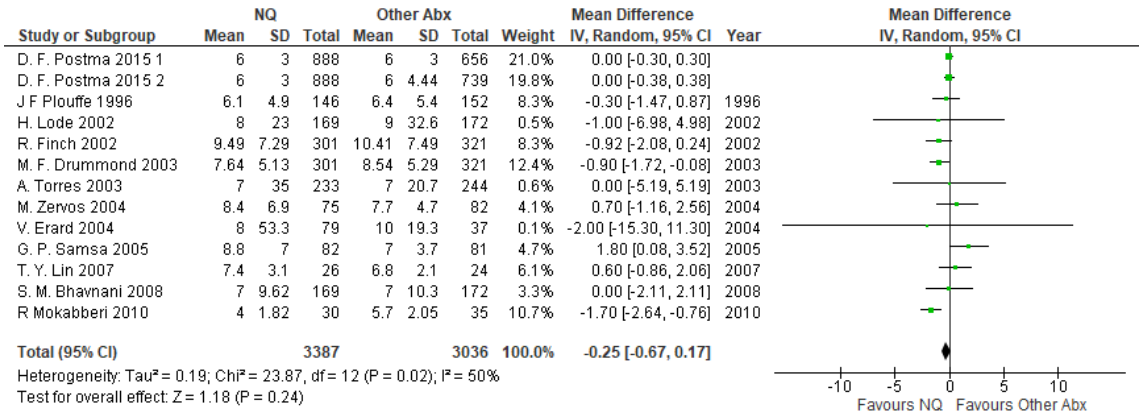


図 Suppl-4. 早期臨床的奏効率.

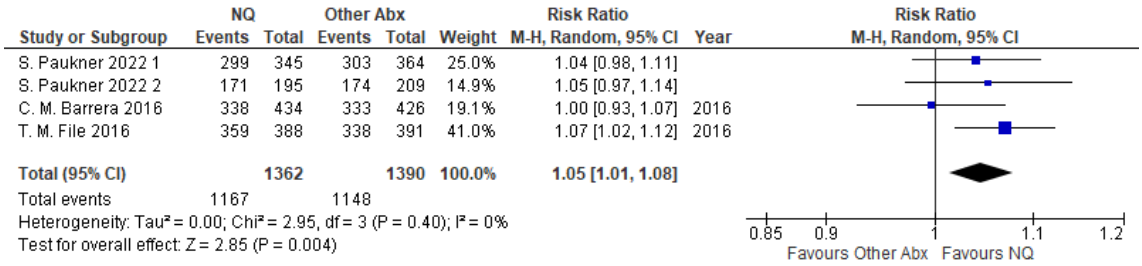


図 Suppl-5. 副作用発生率.

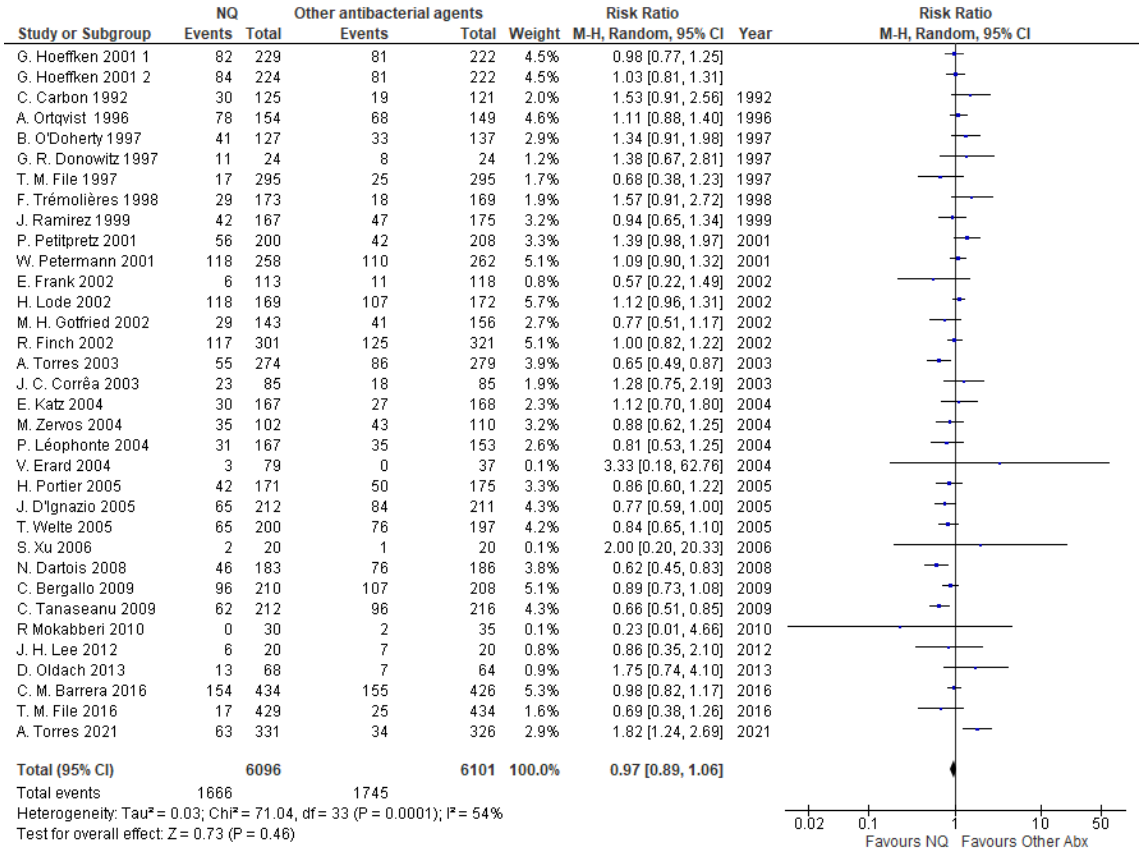
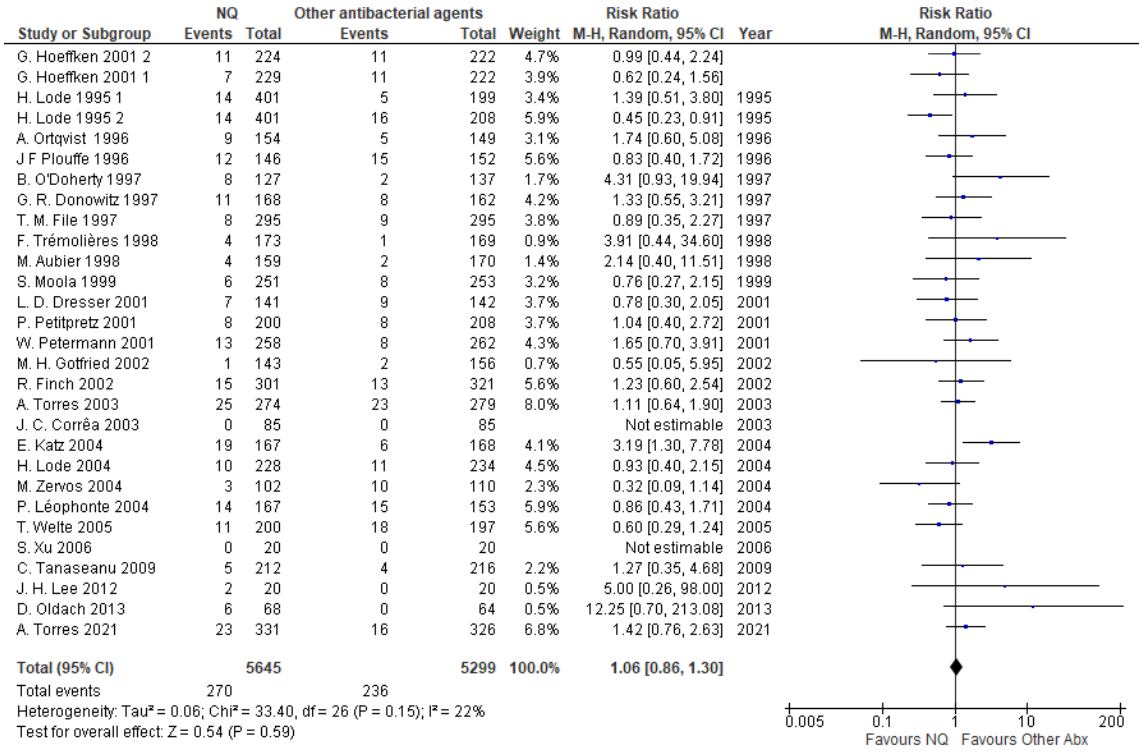


図 Suppl-6. 副作用による中断率.



SR4
NHCAP、HCAP の耐性菌 のリスク因子は何か？

図 Suppl-1. 年齢.

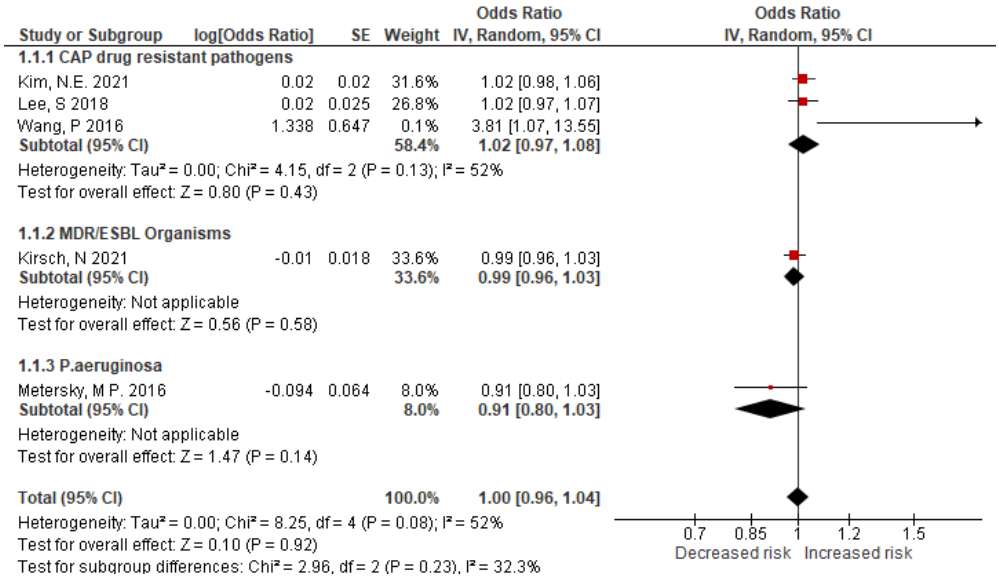


図 Suppl-2. 男性.

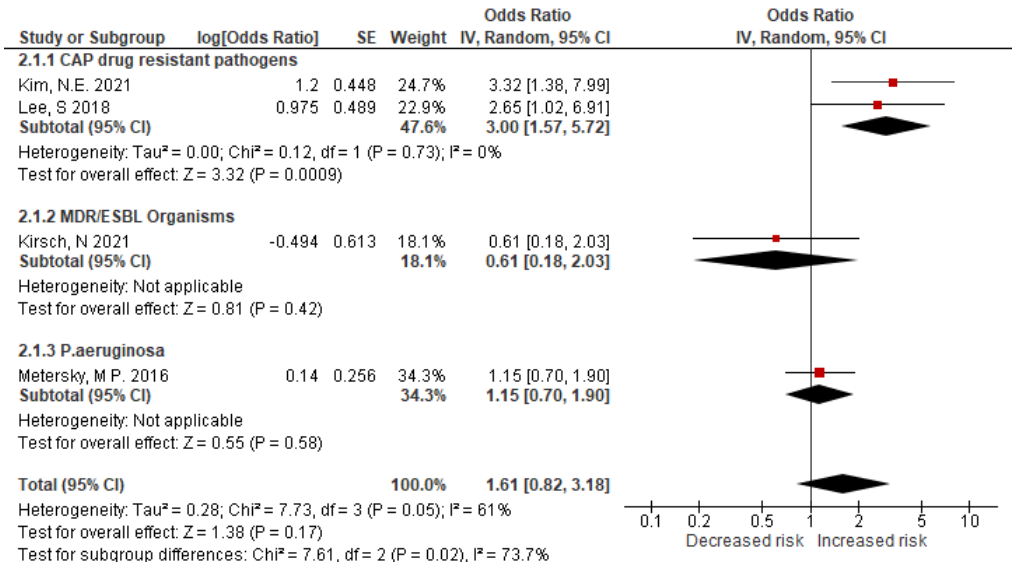


図 Suppl-3. 低 BMI.

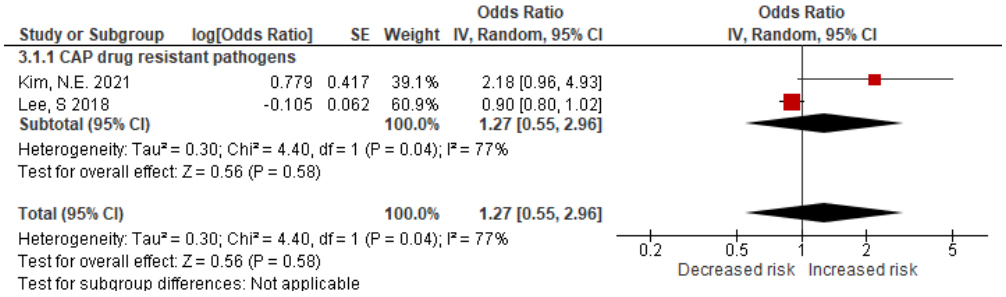


図 Suppl-4. PSI Class V.

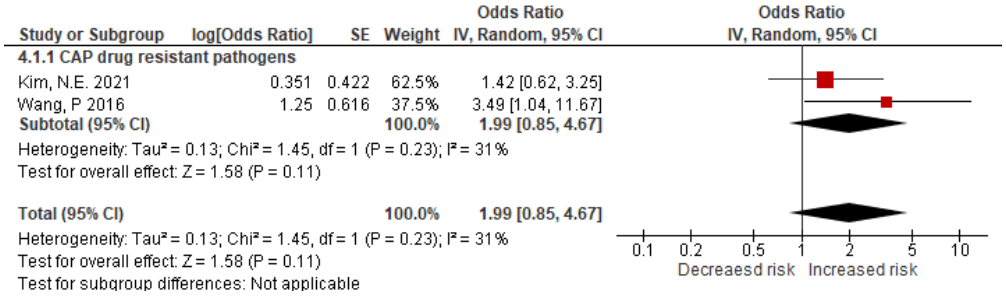
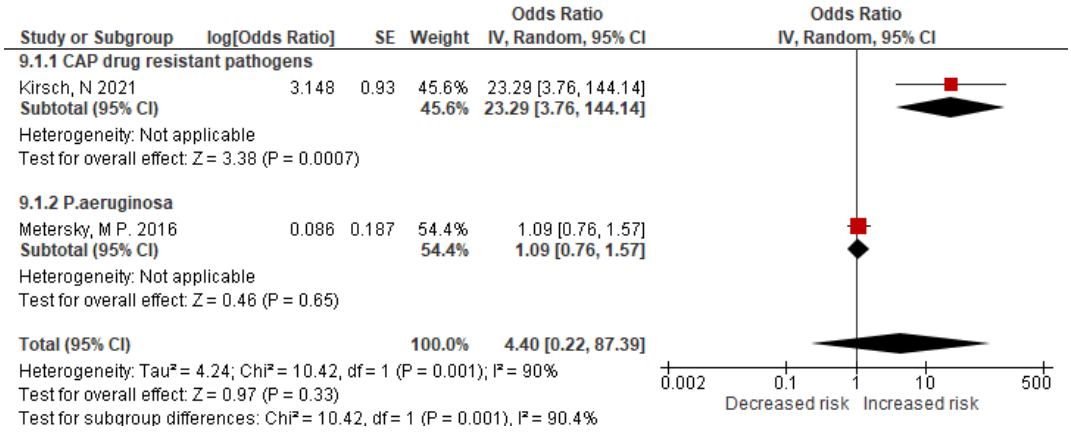


図 Suppl-5. 介護施設入所歴.



SR4　NHCAP、HCAP の耐性菌 のリスク因子は何か？

図 Suppl-6. 過去の耐性菌検出歴.

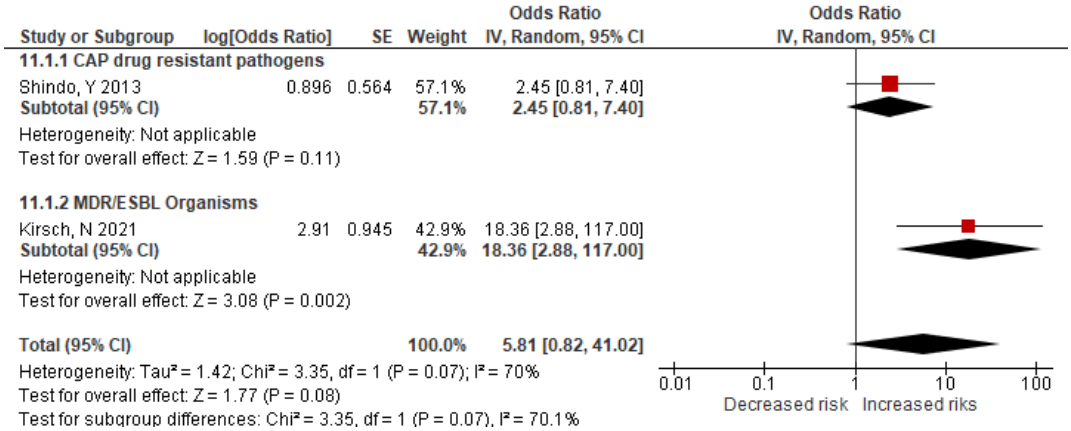
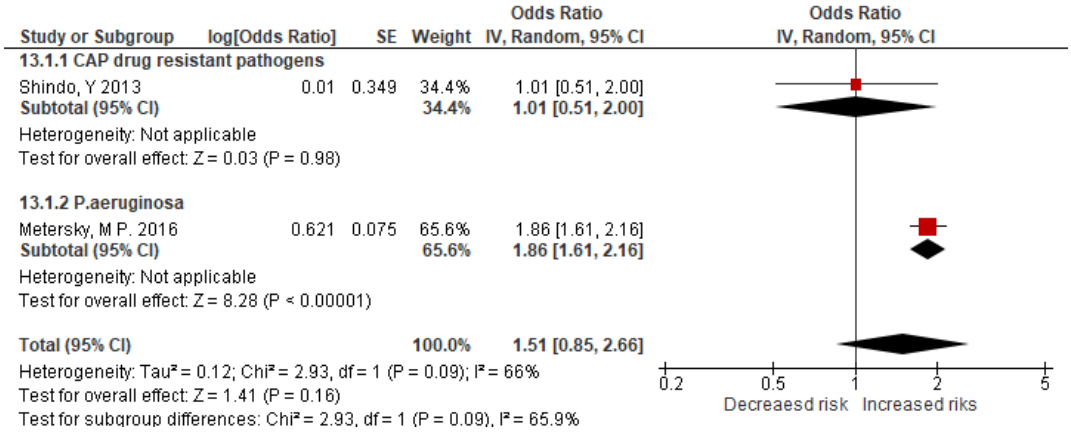


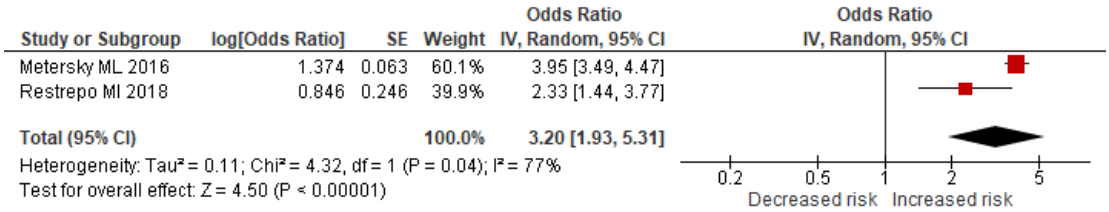
図 Suppl-7. 慢性呼吸器疾患.



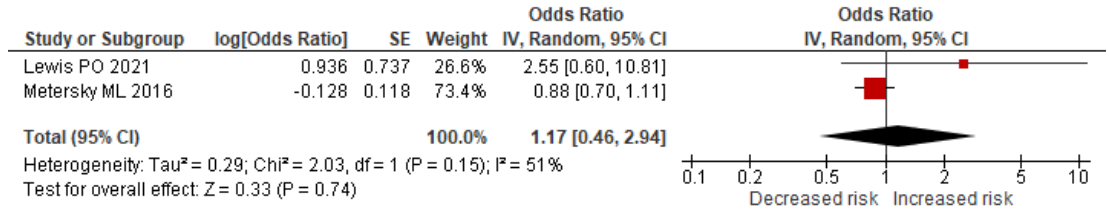
SR5
市中発症肺炎（CAP、HCAP、NHCAP を含めた肺炎群）耐性菌のリスク因子は何か？

図表 Suppl-1.　臨床的肺炎と判断された群での CAP drug resistant pathogens の因子ごとのメタ解析.

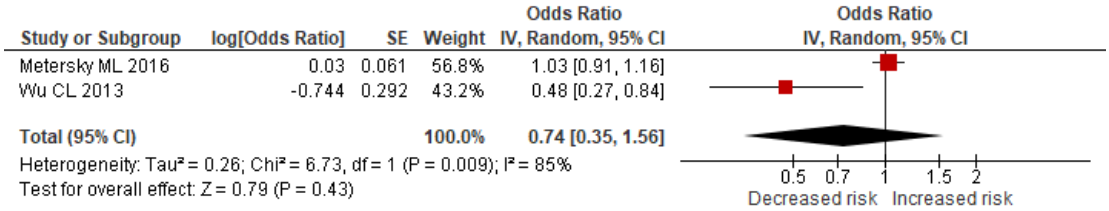
early induction of mechanical ventilation



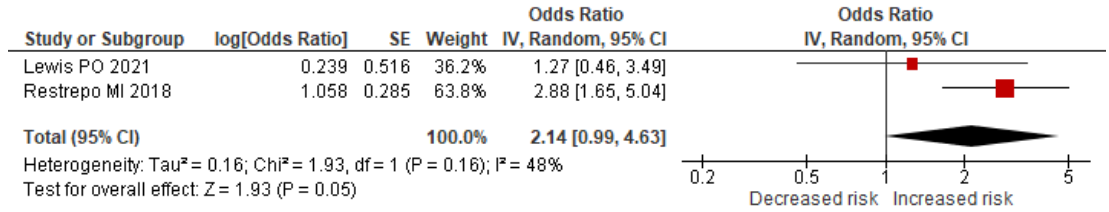
immunosuppression



chemotherapy

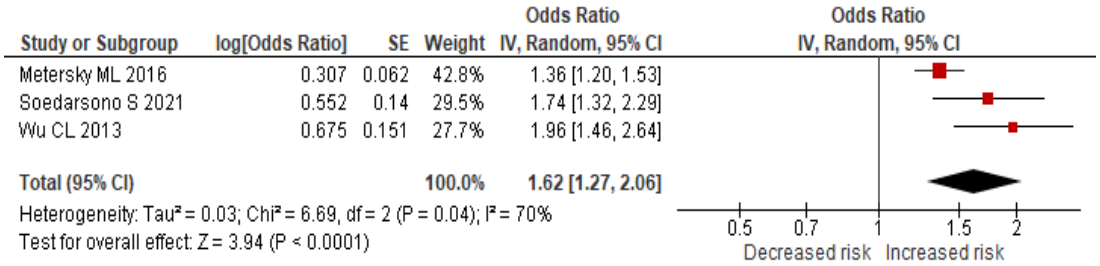


bronchiectasis

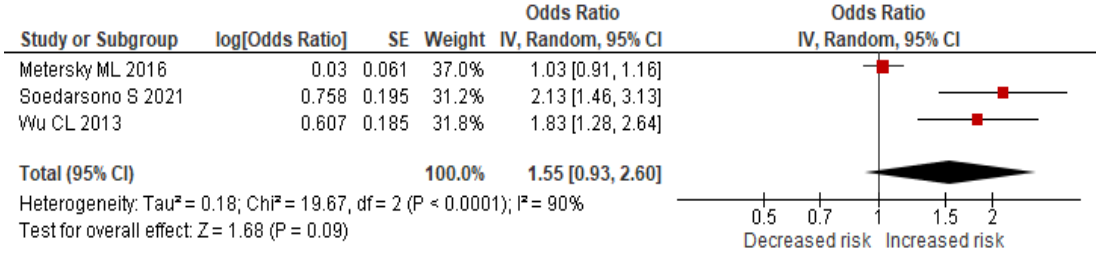


SR5　市中発症肺炎（CAP、HCAP、NHCAP を含めた肺炎群）耐性菌のリスク因子は何か？

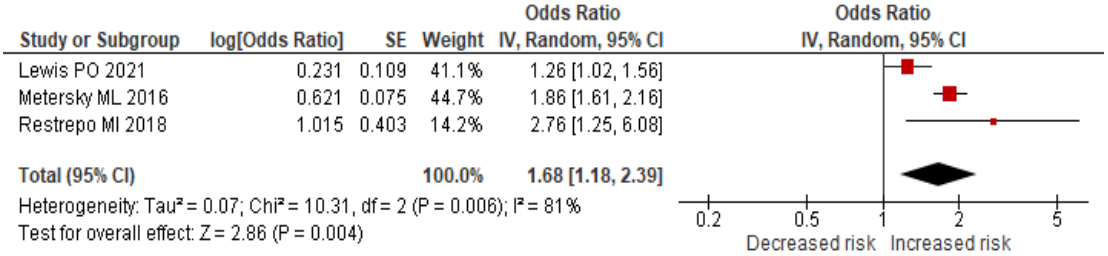
prior hospitalization



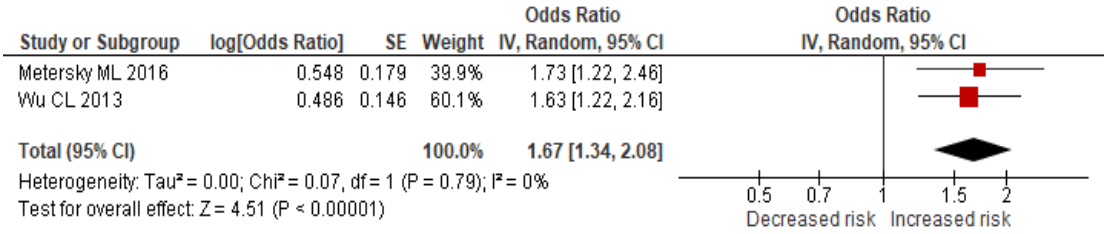
history of cancer



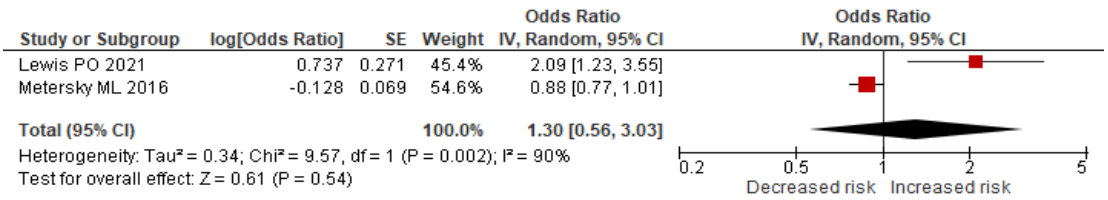
COPD



neurologic disorders

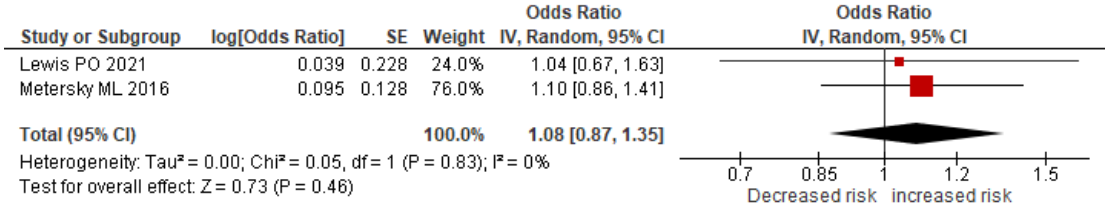


chronic renal disease

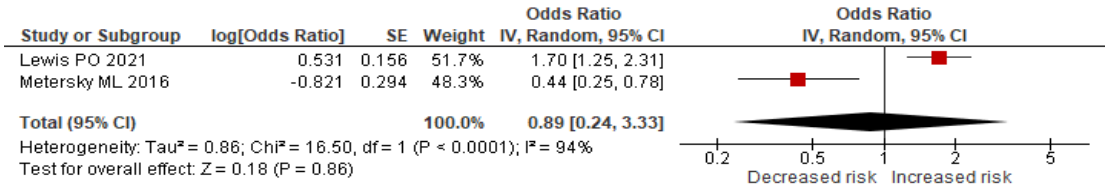


SR5　市中発症肺炎（CAP、HCAP、NHCAP を含めた肺炎群）耐性菌のリスク因子は何か？

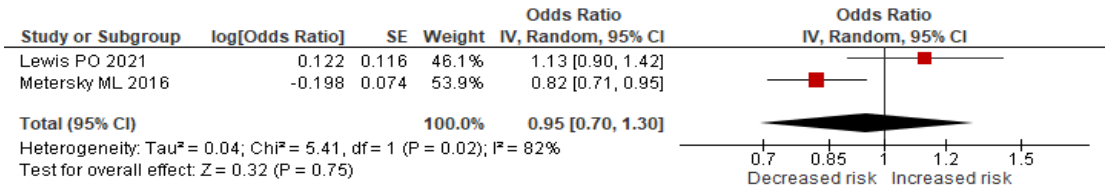
alcohol use



illicit substance use



diabetes mellitus

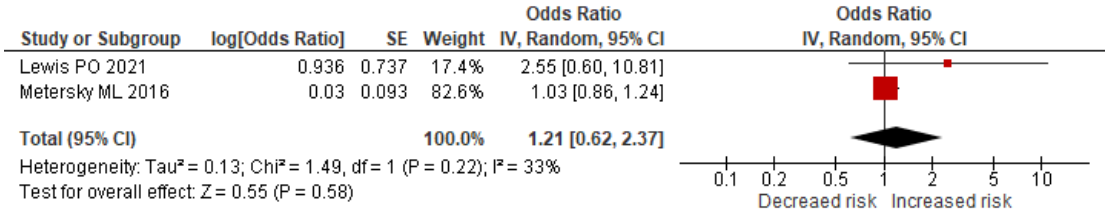


文献が 1 つだけの因子

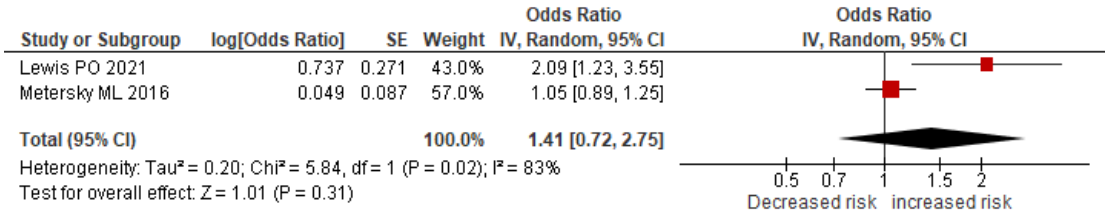
項目	Odds ratio (95% CI)
prior infection/colonization	16.1 (9.48-27.35)
tracheostomy	6.5 (2.61-16.19)
prior use of antibiotics	1.14 (1.00-1.51)
heart disease	1.744 (1.174-2.591)
prior influenza virus infection	2.34 (1.18-4.67)
inhaled corticosteroid	1.4 (1.23-1.61)
residence in a nursing home	1.09 (0.75-1.56)

図表 Suppl-2. 臨床的肺炎と判断された群での MRSA の因子ごとのメタ解析.

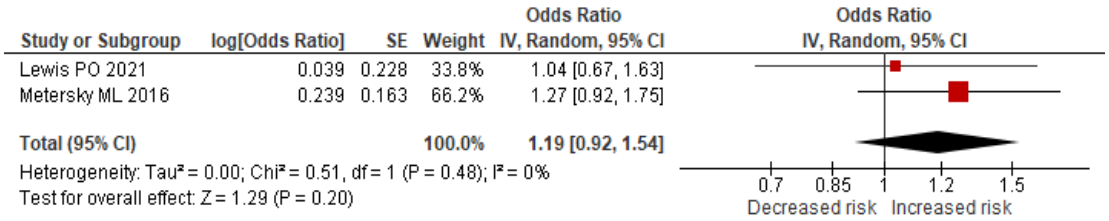
immunosuppression



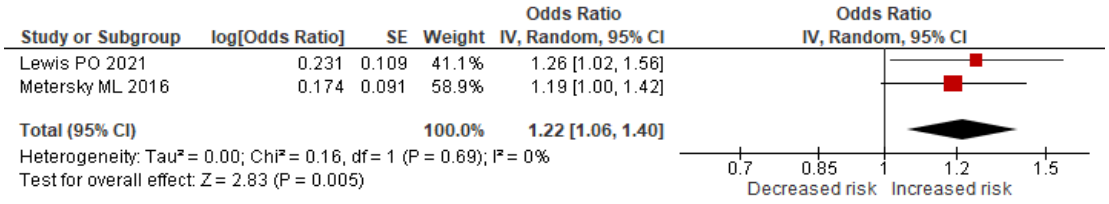
chronic renal disease



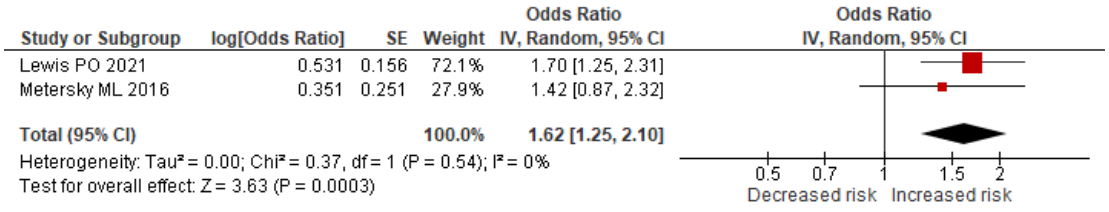
alcohol use



COPD

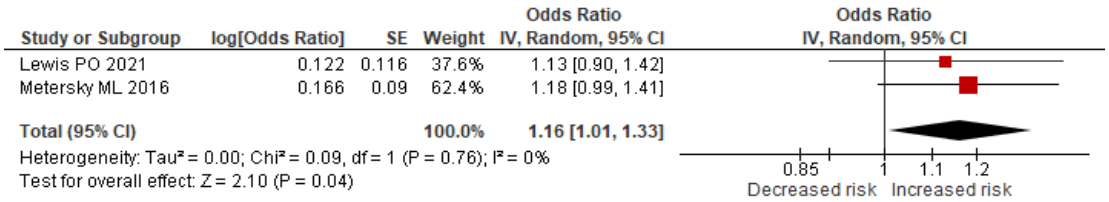


illicit substance use



SR5　市中発症肺炎 (CAP、HCAP、NHCAP を含めた肺炎群) 耐性菌のリスク因子は何か？

diabetes mellitus

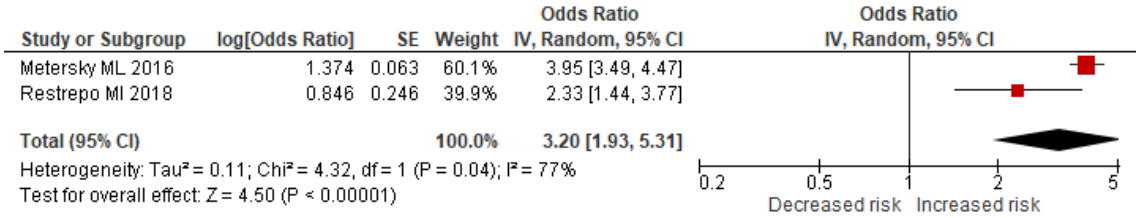


文献が 1 つだけの因子

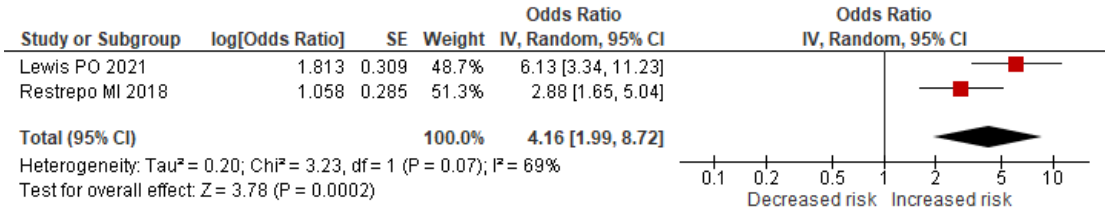
項目	Odds ratio (95% CI)
early induction of mechanical ventilation	3.8 (3.18-4.55)
prior hospitalization	1.62 (1.38-1.91)
prior use of antibiotics	1.3 (1.08-1.56)
history of cancer	1.03 (0.78-1.21)
chemotherapy	1.03 (0.78-1.21)
bronchiectasis	1.27 (0.46-3.48)
neurologic disorders	1.14 (0.67-1.93)
prior influenza virus infection	2.34 (1.18-4.67)
residence in a nursing home	1.96 (1.37-2.81)
inhaled corticosteroid	1.11 (0.91-1.34)

図表 Suppl-3. 臨床的肺炎と判断された群での緑膿菌の因子ごとのメタ解析.

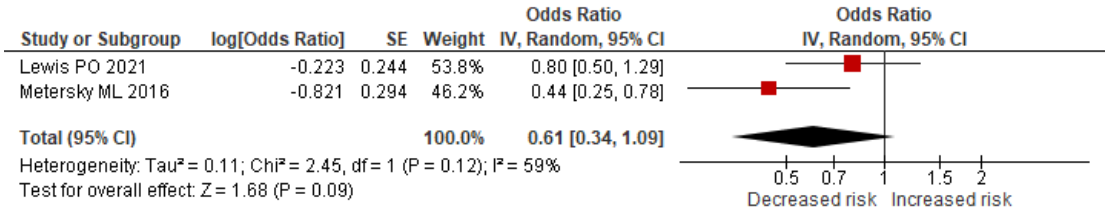
early induction of mechanical ventilation



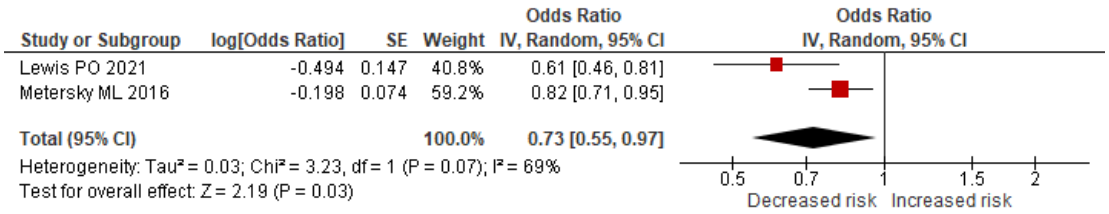
bronchiectasis



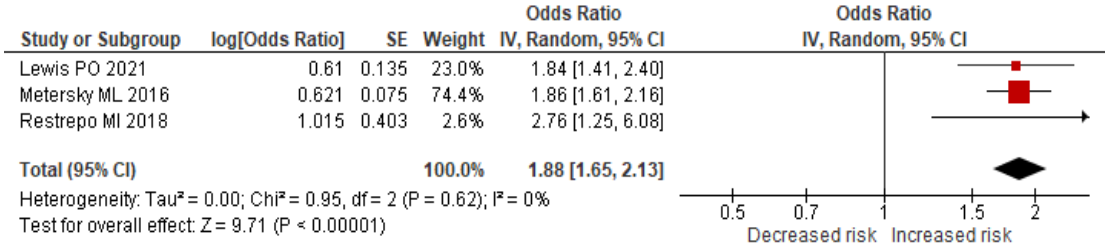
illicit substance use



diabetes mellitus

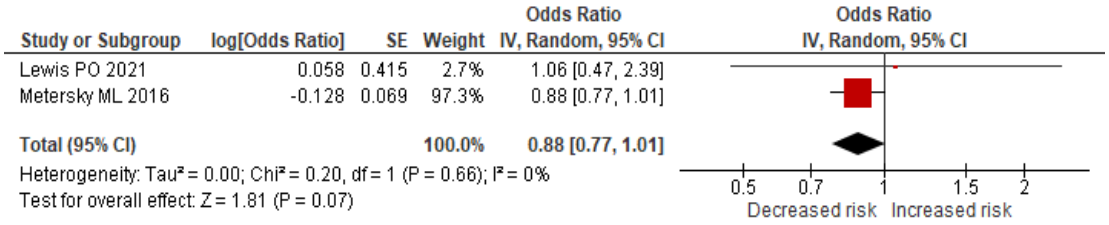


COPD

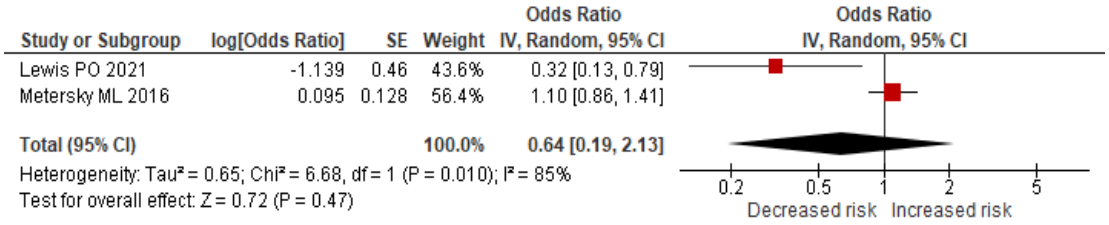


SR5　市中発症肺炎（CAP、HCAP、NHCAP を含めた肺炎群）耐性菌のリスク因子は何か？

chronic renal disease



alcohol use



文献が 1 つだけの因子

項目	Odds ratio (95% CI)
prior infection/colonization	16.1 (9.48-27.35)
tracheostomy	6.5 (2.61-16.19)
prior hospitalization	1.36 (1.21-1.54)
immunosuppression	1.39 (1.22-1.58)
prior use of antibiotics	1.14 (1.00-1.51)
history of cancer	1.03 (0.92-1.17)
chemotherapy	1.03 (0.92-1.17)
neurologic disorders	1.73 (1.22-2.46)
prior influenza virus infection	0.73 (0.23-2.32)
residence in a nursing home	1.09 (0.75-1.56)
inhaled corticosteroid	1.4 (1.23-1.61)

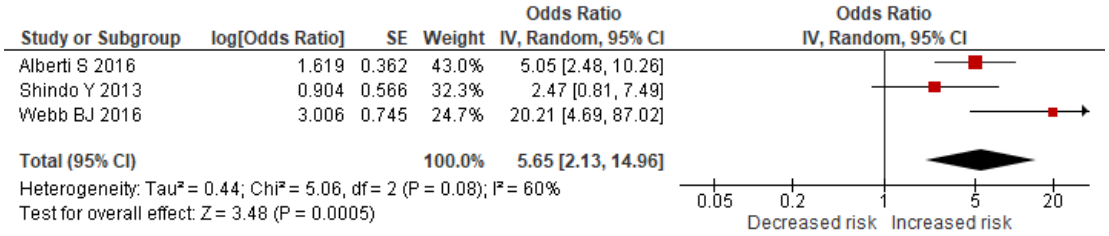
図表 Suppl-4. 臨床的肺炎と判断された群での MDR の因子ごとのメタ解析.

文献が 1 つだけの因子

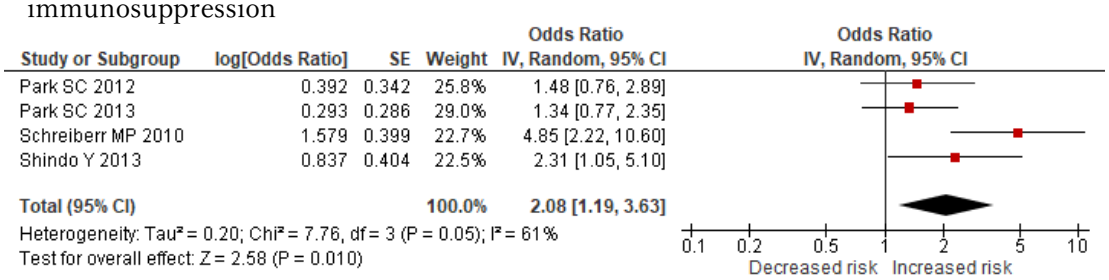
項目	Odds ratio (95% CI)
prior infection/colonization	12.34 (5.05-30.14)
early induction of mechanical ventilation	3.42 (1.47-7.97)
prior hospitalization	1.737 (1.32-2.286)
history of cancer	2.134 (1.455-3.131)
heart disease	1.744 (1.174-2.591)
COPD	2.69 (1.1-6.55)

図表 Suppl-5. 培養検査で検出菌を得た細菌性肺炎群での CAP drug resistant pathogens の因子ごとのメタ解析.

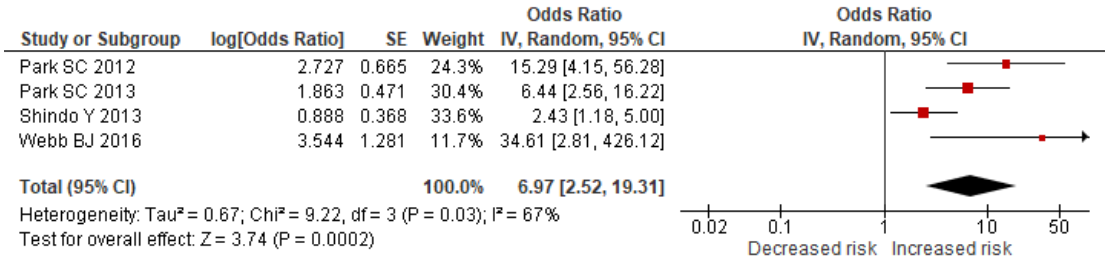
prior infection/colonization



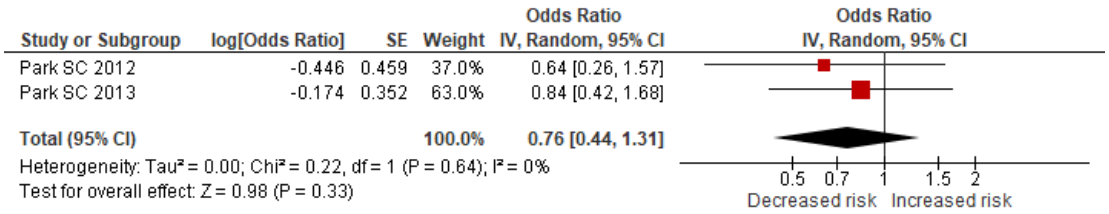
immunosuppression



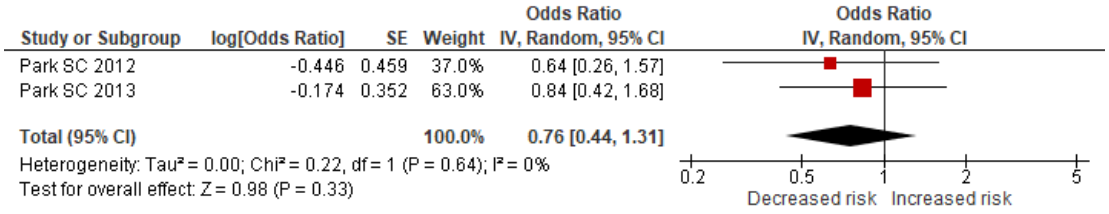
tube feeding



history of cancer

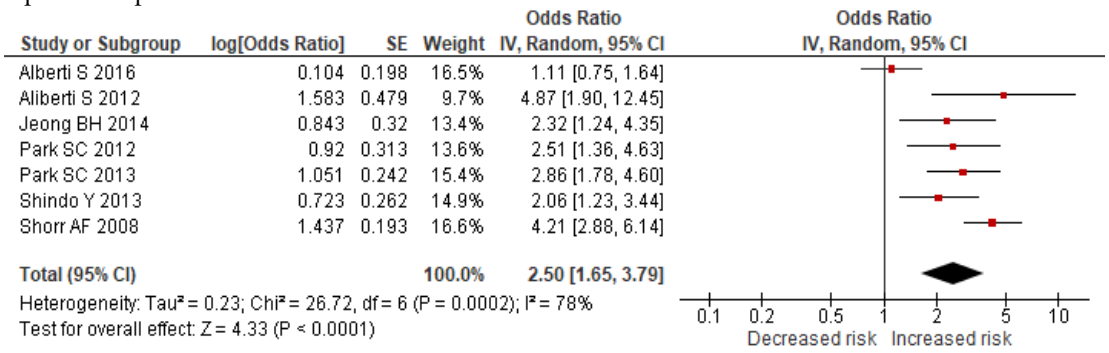


chemotherapy

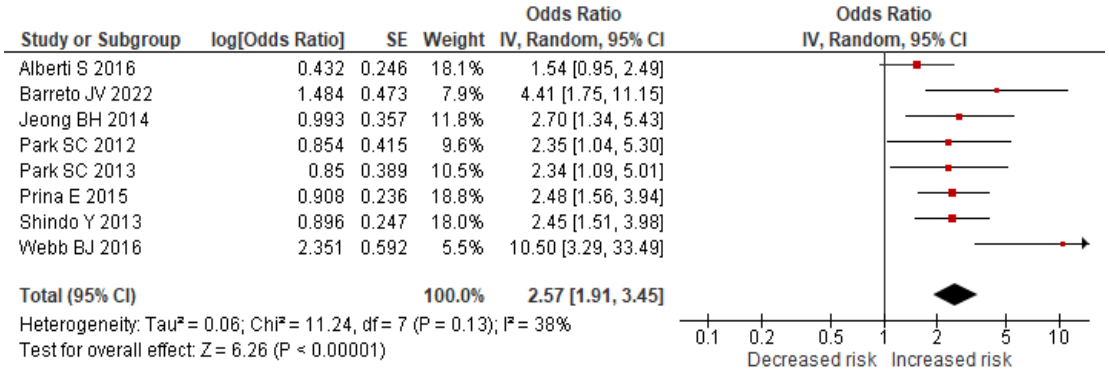


SR5　市中発症肺炎（CAP、HCAP、NHCAP を含めた肺炎群）耐性菌のリスク因子は何か？

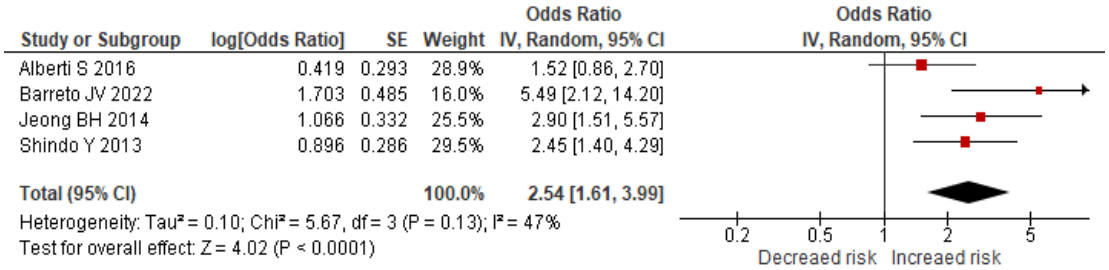
prior hospitalization



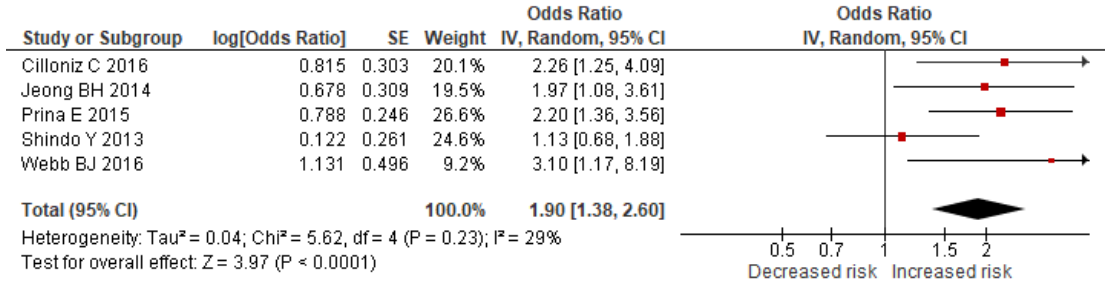
prior use of antibiotics



low ADL status

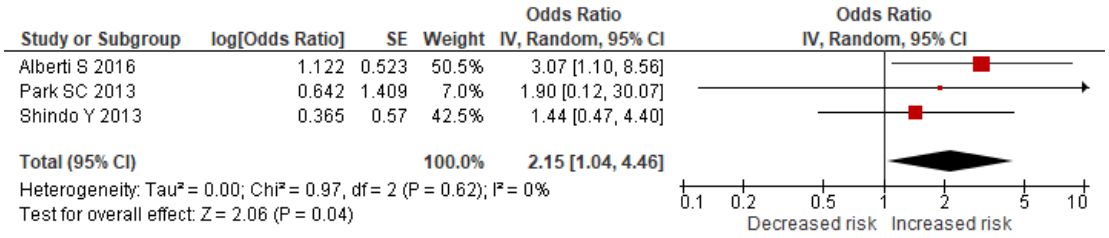


chronic lung disease

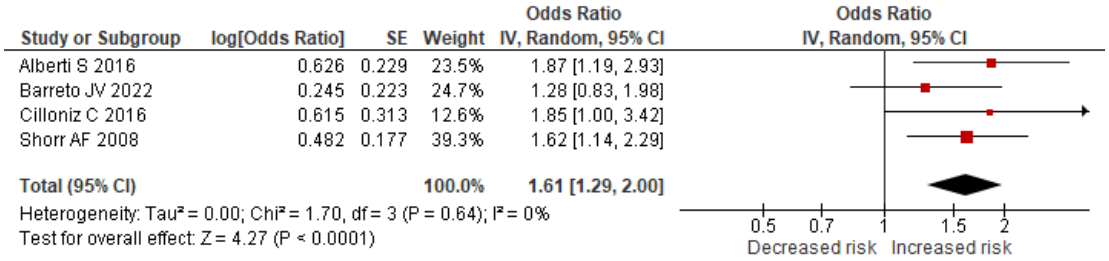


SR5　市中発症肺炎（CAP、HCAP、NHCAP を含めた肺炎群）耐性菌のリスク因子は何か？

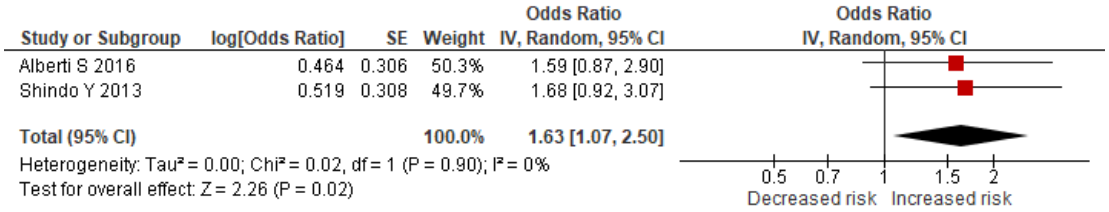
wound care



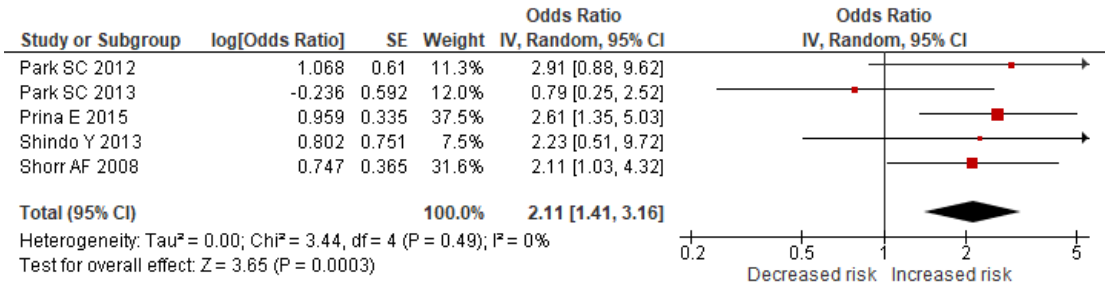
severity of disease



heart disease

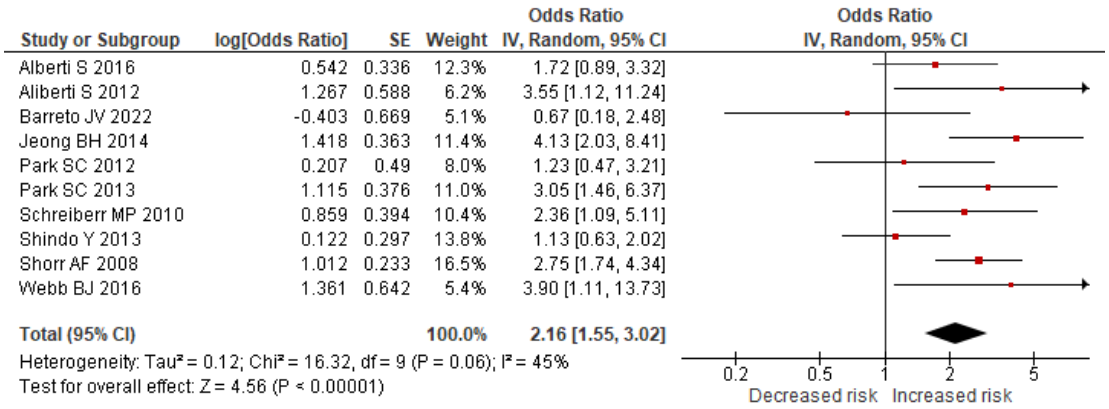


chronic renal disease



SR5　市中発症肺炎（CAP、HCAP、NHCAP を含めた肺炎群）耐性菌のリスク因子は何か？

residence in a nursing home



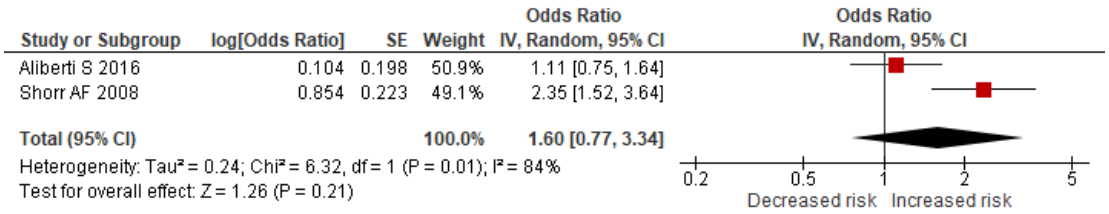
文献が 1 つだけの因子

項目	Odds ratio (95% CI)
use of gastric-acid suppressive agents	2.22 (1.39-3.57)
COPD	2 (0.91-4.41)
neurologic disorders	1.36 (0.8-2.29)
indwelling catheter	0.84 (0.4-1.8)
low albumin	1.3 (0.81-2.09)
Charlson’s Index	1.174 (0.994-1.387)

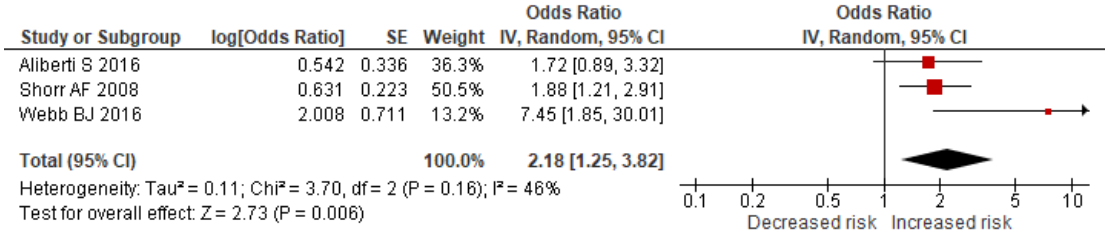
SR5　市中発症肺炎（CAP、HCAP、NHCAP を含めた肺炎群）耐性菌のリスク因子は何か？

図表 Suppl-6. 培養検査で検出菌を得た細菌性肺炎群での MRSA の因子ごとのメタ解析.

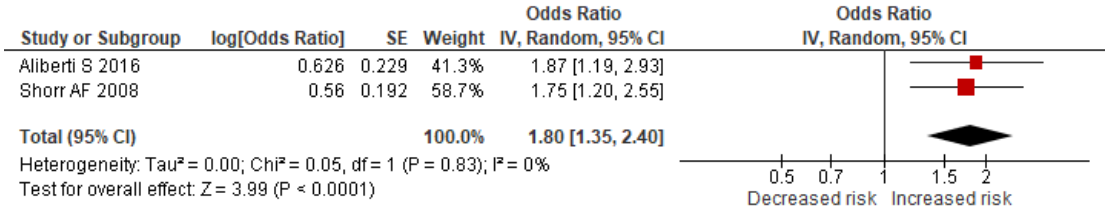
prior hospitalization



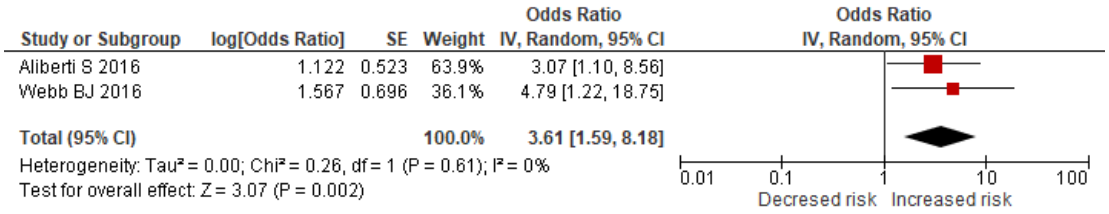
residence in a nursing home



severity of disease



wound care

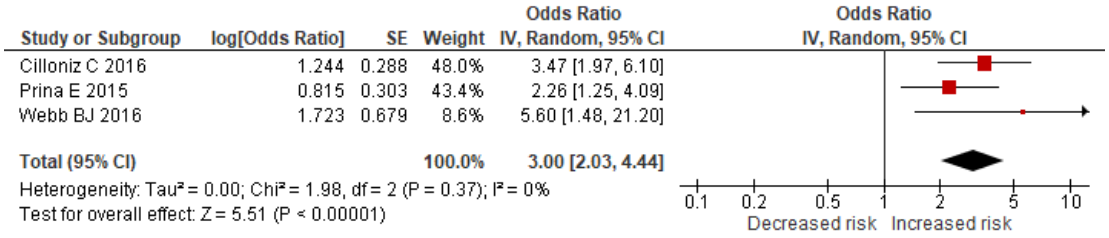


文献が 1 つだけの因子

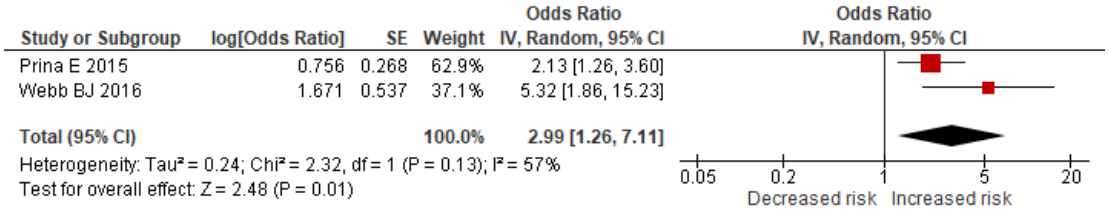
項目	Odds ratio (95% CI)
prior infection/colonization	5.05 (2.48-10.26)
prior use of antibiotics	1.54 (0.95-2.49)
low ADL status	1.52 (0.86-2.71)
heart disease	1.59 (0.87-2.89)

図表 Suppl-7. 培養検査で検出菌を得た細菌性肺炎群での耐性グラム陰性桿菌の因子ごとのメタ解析.

chronic lung disease



prior use of antibiotics



文献が 1 つだけの因子

項目	Odds ratio (95% CI)
prior infection/colonization	5.24 (1.56-17.66)
tube feeding	12.93 (2.28-73.37)
respiratory failure	2.36 (1.28-4.36)
prior influenza virus infection	0.39 (0.21-0.72)
severity of disease	1.85 (1.00-3.41)
inhaled corticosteroid	3.47 (1.97-6.09)

図表 Suppl-8. 培養検査で検出菌を得た細菌性肺炎群での MDR の因子ごとのメタ解析.

文献が 1 つだけの因子

項目	Odds ratio (95% CI)
prior hospitalization	4.87 (1.9-12.4)
prior use of antibiotics	3.32 (1.07-10.31)
residence in a nursing home	3.55 (1.12-11.24)

SR6
NHCAP における原因微生物

図 Suppl-1. *Streptococcus pneumoniae.*

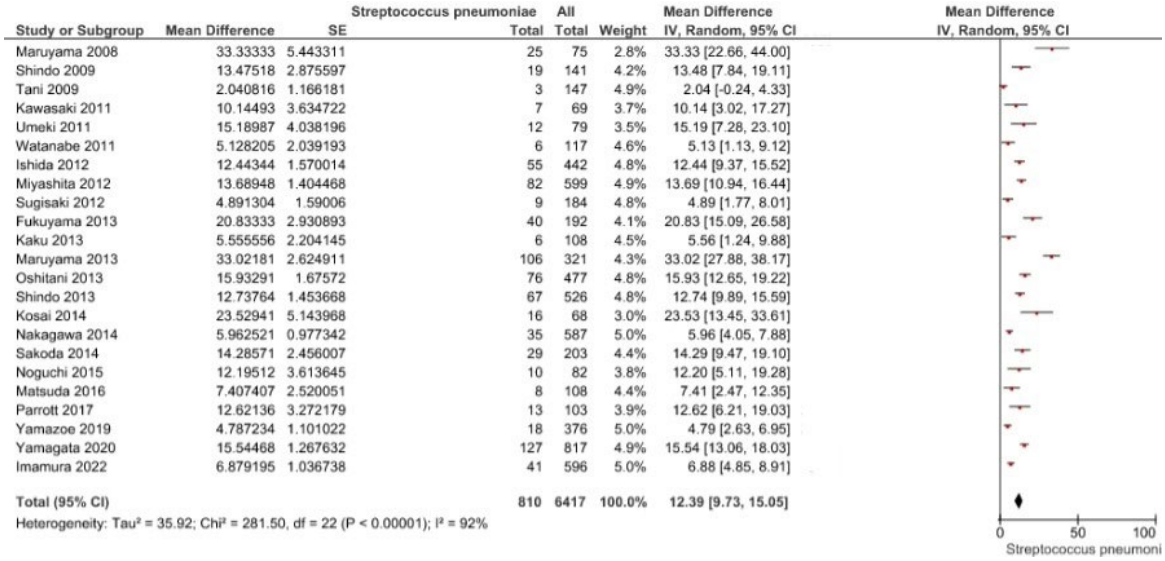


図 Suppl-2. *Klebsiella pneumoniae.*

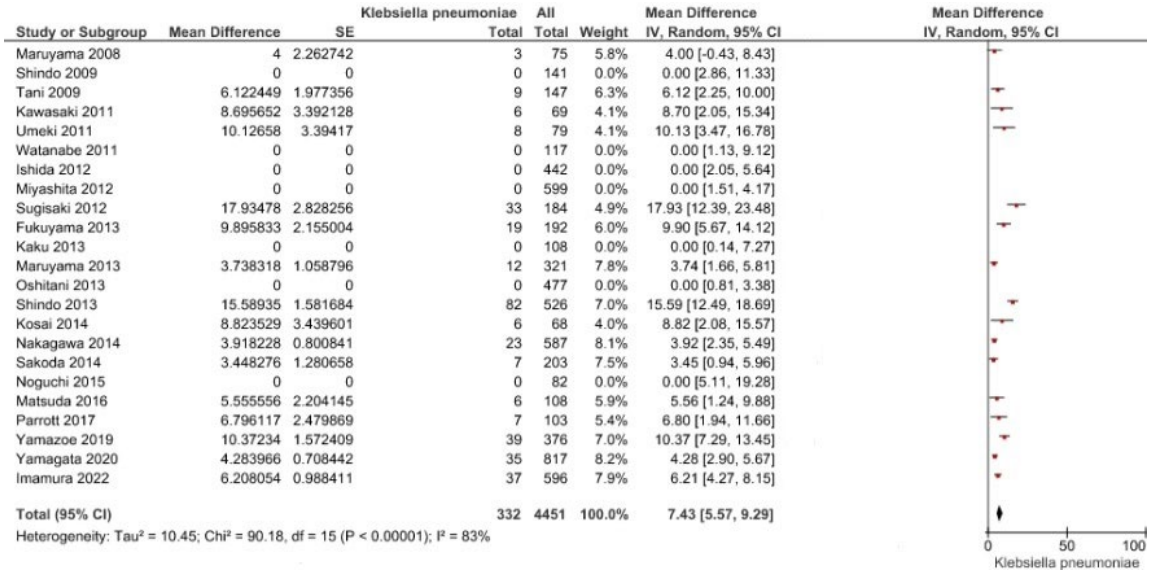


図 Suppl-3. MRSA.

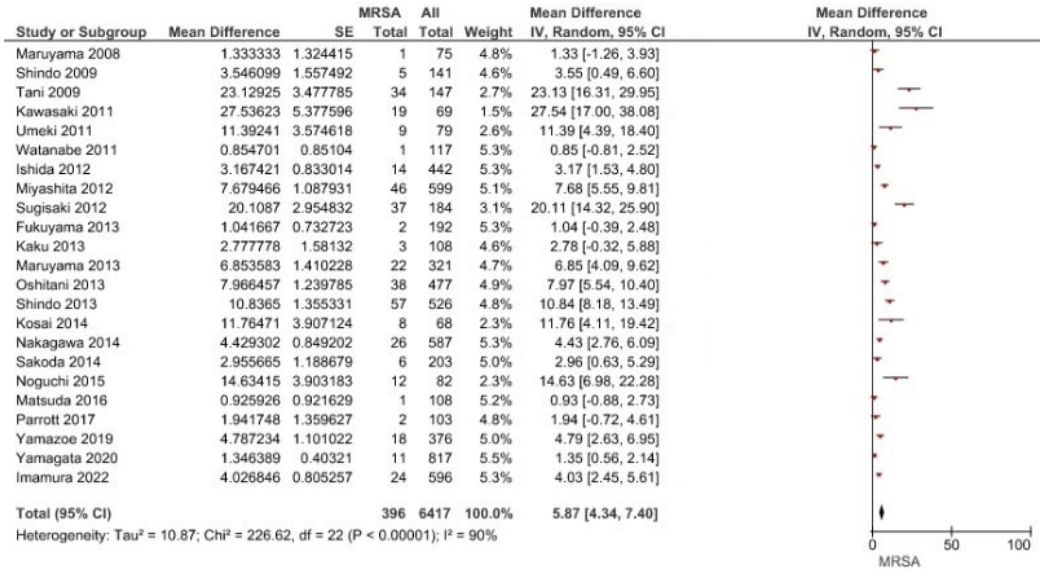


図 Suppl-4. *Pseudomonas aeruginosa.*

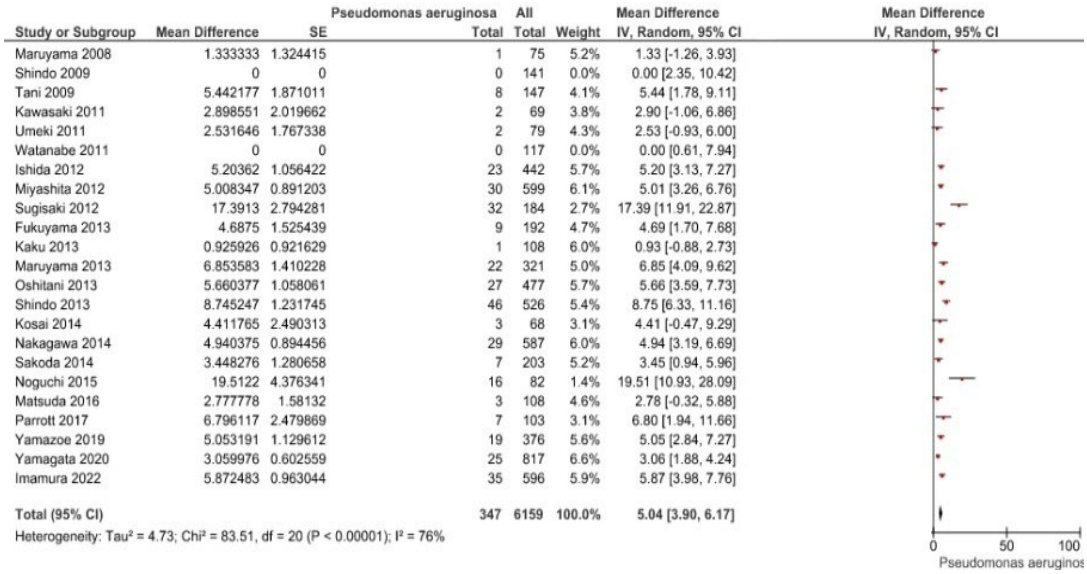


図 Suppl-5. *Haemophilus influenzae.*

Study or Subgroup	Mean Difference	SE	Haemophilus influenzae Total	All Total	Weight	Mean Difference IV, Random, 95% CI
Maruyama 2008	0	0	0	75	0.0%	0.00 [-1.26, 3.93]
Shindo 2009	2.836879	1.398175	4	141	5.0%	2.84 [0.10, 5.58]
Tani 2009	2.721088	1.341906	4	147	5.2%	2.72 [0.09, 5.35]
Kawasaki 2011	7.246377	3.121055	5	69	1.9%	7.25 [1.13, 13.36]
Umeki 2011	2.531646	1.767338	2	79	4.0%	2.53 [-0.93, 6.00]
Watanabe 2011	0	0	0	117	0.0%	0.00 [0.61, 7.94]
Ishida 2012	3.61991	0.888447	16	442	6.6%	3.62 [1.88, 5.36]
Miyashita 2012	6.343907	0.99594	38	599	6.3%	6.34 [4.39, 8.30]
Sugisaki 2012	7.065217	1.889048	13	184	3.7%	7.07 [3.36, 10.77]
Fukuyama 2013	19.27083	2.846524	37	192	2.2%	19.27 [13.69, 24.85]
Kaku 2013	3.703704	1.817235	4	108	3.9%	3.70 [0.14, 7.27]
Maruyama 2013	3.426791	1.015359	11	321	6.2%	3.43 [1.44, 5.42]
Oshitani 2013	3.354298	0.82439	16	477	6.8%	3.35 [1.74, 4.97]
Shindo 2013	4.942966	0.945133	26	526	6.4%	4.94 [3.09, 6.80]
Kosai 2014	4.411765	2.490313	3	68	2.6%	4.41 [-0.47, 9.29]
Nakagawa 2014	3.407155	0.748772	20	587	7.1%	3.41 [1.94, 4.87]
Sakoda 2014	2.955665	1.188679	6	203	5.6%	2.96 [0.63, 5.29]
Noguchi 2015	10.97561	3.451929	9	82	1.6%	10.98 [4.21, 17.74]
Matsuda 2016	4.62963	2.021939	5	108	3.5%	4.63 [0.67, 8.59]
Parrott 2017	7.76699	2.637248	8	103	2.4%	7.77 [2.60, 12.94]
Yamazoe 2019	4.787234	1.101022	18	376	5.9%	4.79 [2.63, 6.95]
Yamagata 2020	5.875153	0.822717	48	817	6.8%	5.88 [4.26, 7.49]
Imamura 2022	6.543624	1.012956	39	596	6.2%	6.54 [4.56, 8.53]
Total (95% CI)			**332**	**6225**	**100.0%**	**4.89 [3.93, 5.84]**

Heterogeneity: Tau² = 2.81; Chi² = 57.58, df = 20 (P < 0.0001); I² = 65%

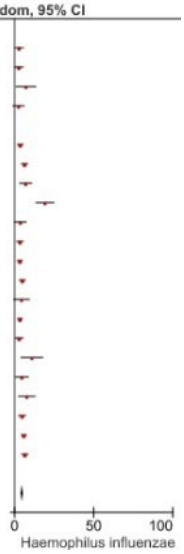


図 Suppl-6. MSSA.

Study or Subgroup	Mean Difference	SE	MSSA Total	All Total	Weight	Mean Difference IV, Random, 95% CI
Maruyama 2008	2.666667	1.860307	2	75	3.9%	2.67 [-0.98, 6.31]
Shindo 2009	6.382979	2.058636	9	141	3.5%	6.38 [2.35, 10.42]
Tani 2009	3.401361	1.495041	5	147	4.5%	3.40 [0.47, 6.33]
Kawasaki 2011	10.14493	3.634722	7	69	1.8%	10.14 [3.02, 17.27]
Umeki 2011	3.797468	2.150437	3	79	3.4%	3.80 [-0.42, 8.01]
Watanabe 2011	4.273504	1.869886	5	117	3.8%	4.27 [0.61, 7.94]
Ishida 2012	4.298643	0.964747	19	442	5.5%	4.30 [2.41, 6.19]
Miyashita 2012	6.176962	0.983623	37	599	5.4%	6.18 [4.25, 8.10]
Sugisaki 2012	10.86957	2.294617	20	184	3.2%	10.87 [6.37, 15.37]
Fukuyama 2013	1.5625	0.895034	3	192	5.6%	1.56 [-0.19, 3.32]
Kaku 2013	5.555556	2.204145	6	108	3.3%	5.56 [1.24, 9.88]
Maruyama 2013	4.672897	1.17801	15	321	5.1%	4.67 [2.36, 6.98]
Oshitani 2013	4.821803	0.980876	23	477	5.4%	4.82 [2.90, 6.74]
Shindo 2013	9.885932	1.301404	52	526	4.8%	9.89 [7.34, 12.44]
Kosai 2014	2.941176	2.048913	2	68	3.6%	2.94 [-1.07, 6.96]
Nakagawa 2014	3.06644	0.711599	18	587	5.9%	3.07 [1.67, 4.46]
Sakoda 2014	3.448276	1.280658	7	203	4.9%	3.45 [0.94, 5.96]
Noguchi 2015	13.41463	3.763611	11	82	1.7%	13.41 [6.04, 20.79]
Matsuda 2016	3.703704	1.817235	4	108	3.9%	3.70 [0.14, 7.27]
Parrott 2017	2.912621	1.656932	3	103	4.2%	2.91 [-0.33, 6.16]
Yamazoe 2019	7.978723	1.397388	30	376	4.7%	7.98 [5.24, 10.72]
Yamagata 2020	5.263158	0.781217	43	817	5.8%	5.26 [3.73, 6.79]
Imamura 2022	1.174497	0.441303	7	596	6.2%	1.17 [0.31, 2.04]
Total (95% CI)			**331**	**6417**	**100.0%**	**4.82 [3.69, 5.96]**

Heterogeneity: Tau² = 5.19; Chi² = 106.73, df = 22 (P < 0.00001); I² = 79%

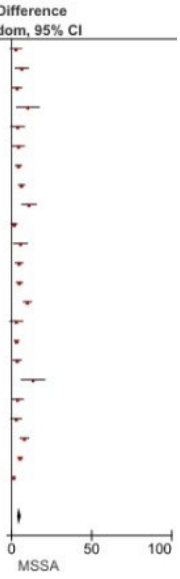


図 Suppl-7. *Streptococci* other than *Streptococcus pneumoniae.*

Study or Subgroup	Mean Difference	SE	Streptococci other than Streptococcus pneumoniae Total	All Total	Weight	Mean Difference IV, Random, 95% CI
Maruyama 2008	0	0	0	75	0.0%	0.00 [-0.98, 6.31]
Shindo 2009	7.092199	2.161758	10	141	4.4%	7.09 [2.86, 11.33]
Tani 2009	4.081633	1.631959	6	147	5.6%	4.08 [0.88, 7.28]
Kawasaki 2011	5.797101	2.813281	4	69	3.3%	5.80 [0.28, 11.31]
Umeki 2011	3.797468	2.150437	3	79	4.4%	3.80 [-0.42, 8.01]
Watanabe 2011	5.128205	2.039193	6	117	4.7%	5.13 [1.13, 9.12]
Ishida 2012	3.846154	0.914714	17	442	7.5%	3.85 [2.05, 5.64]
Miyashita 2012	0	0	0	599	0.0%	0.00 [1.51, 4.17]
Sugisaki 2012	14.13043	2.567961	26	184	3.7%	14.13 [9.10, 19.16]
Fukuyama 2013	6.25	1.746928	12	192	5.3%	6.25 [2.83, 9.67]
Kaku 2013	0	0	0	108	0.0%	0.00 [0.14, 7.27]
Maruyama 2013	4.672897	1.17801	15	321	6.8%	4.67 [2.36, 6.98]
Oshitani 2013	2.096436	0.655965	10	477	8.1%	2.10 [0.81, 3.38]
Shindo 2013	5.893536	1.026845	31	526	7.2%	5.89 [3.88, 7.91]
Kosai 2014	0	0	0	68		Not estimable
Nakagawa 2014	0.340716	0.240511	2	587	8.7%	0.34 [-0.13, 0.81]
Sakoda 2014	0	0	0	203	0.0%	0.00 [0.33, 4.60]
Noguchi 2015	12.19512	3.613645	10	82	2.3%	12.20 [5.11, 19.28]
Matsuda 2016	3.703704	1.817235	4	108	5.2%	3.70 [0.14, 7.27]
Parrott 2017	1.941748	1.359627	2	103	6.3%	1.94 [-0.72, 4.61]
Yamazoe 2019	1.06383	0.529078	4	376	8.3%	1.06 [0.03, 2.10]
Yamagata 2020	2.44798	0.540644	20	817	8.3%	2.45 [1.39, 3.51]
Imamura 2022	0	0	0	596	0.0%	0.00 [1.01, 3.35]
Total (95% CI)			**182**	**4768**	**100.0%**	**4.11 [2.85, 5.37]**

Heterogeneity: Tau² = 4.69; Chi² = 117.63, df = 16 (P < 0.00001); I² = 86%

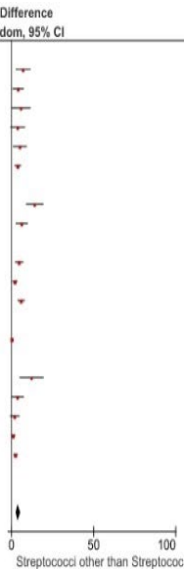


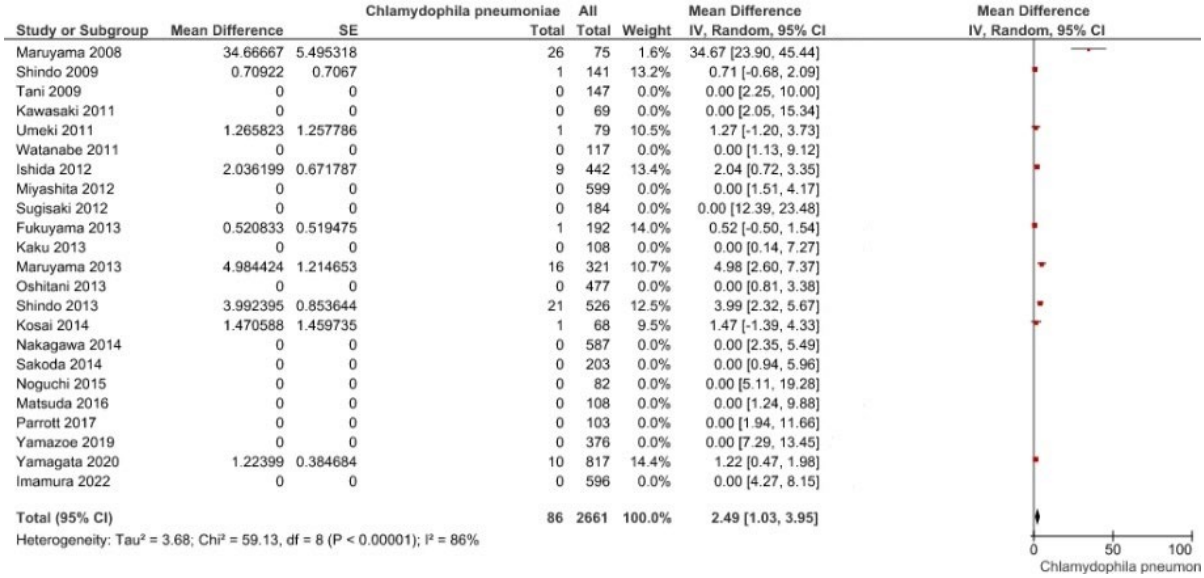
図 Suppl-8. *Escherichia coli.*

Study or Subgroup	Mean Difference	SE	Escherichia coli Total	All Total	Weight	Mean Difference IV, Random, 95% CI
Maruyama 2008	0	0	0	75	0.0%	0.00 [-1.26, 3.93]
Shindo 2009	3.546099	1.557492	5	141	3.3%	3.55 [0.49, 6.60]
Tani 2009	2.040816	1.166181	3	147	4.6%	2.04 [-0.24, 4.33]
Kawasaki 2011	4.347826	2.455042	3	69	1.7%	4.35 [-0.46, 9.16]
Umeki 2011	1.265823	1.257786	1	79	4.3%	1.27 [-1.20, 3.73]
Watanabe 2011	3.418803	1.679927	4	117	3.0%	3.42 [0.13, 6.71]
Ishida 2012	2.714932	0.773021	12	442	6.5%	2.71 [1.20, 4.23]
Miyashita 2012	3.338898	0.73403	20	599	6.7%	3.34 [1.90, 4.78]
Sugisaki 2012	4.891304	1.59006	9	184	3.2%	4.89 [1.77, 8.01]
Fukuyama 2013	1.041667	0.732723	2	192	6.7%	1.04 [-0.39, 2.48]
Kaku 2013	2.777778	1.58132	3	108	3.2%	2.78 [-0.32, 5.88]
Maruyama 2013	2.180685	0.815185	7	321	6.3%	2.18 [0.58, 3.78]
Oshitani 2013	3.354298	0.82439	16	477	6.2%	3.35 [1.74, 4.97]
Shindo 2013	4.18251	0.872867	22	526	6.0%	4.18 [2.47, 5.89]
Kosai 2014	2.941176	2.048913	2	68	2.2%	2.94 [-1.07, 6.96]
Nakagawa 2014	2.555366	0.651308	15	587	7.1%	2.56 [1.28, 3.83]
Sakoda 2014	0.985222	0.693217	2	203	6.9%	0.99 [-0.37, 2.34]
Noguchi 2015	3.658537	2.073258	3	82	2.2%	3.66 [-0.40, 7.72]
Matsuda 2016	0	0	0	108	0.0%	0.00 [0.67, 8.59]
Parrott 2017	3.883495	1.90367	4	103	2.5%	3.88 [0.15, 7.61]
Yamazoe 2019	6.648936	1.284819	25	376	4.2%	6.65 [4.13, 9.17]
Yamagata 2020	1.958384	0.484778	16	817	8.0%	1.96 [1.01, 2.91]
Imamura 2022	6.711409	1.024939	40	596	5.2%	6.71 [4.70, 8.72]
Total (95% CI)			**214**	**6234**	**100.0%**	**3.03 [2.34, 3.71]**

Heterogeneity: Tau² = 1.29; Chi² = 48.13, df = 20 (P = 0.0004); I² = 58%

成人肺炎診療ガイドライン 2024　Online Supplement
SR6　NHCAP における原因微生物

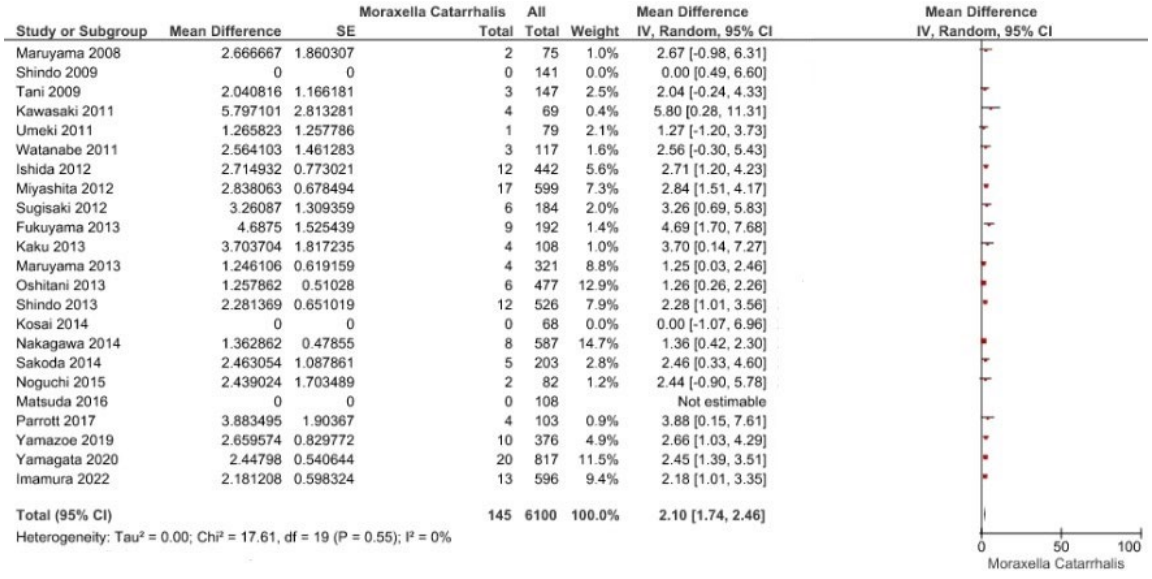
図 Suppl-9. *Chlamydophila pneumoniae.*



Study or Subgroup	Mean Difference	SE	Chlamydophila pneumoniae Total	All Total	Weight	Mean Difference IV, Random, 95% CI
Maruyama 2008	34.66667	5.495318	26	75	1.6%	34.67 [23.90, 45.44]
Shindo 2009	0.70922	0.7067	1	141	13.2%	0.71 [-0.68, 2.09]
Tani 2009	0	0	0	147	0.0%	0.00 [2.25, 10.00]
Kawasaki 2011	0	0	0	69	0.0%	0.00 [2.05, 15.34]
Umeki 2011	1.265823	1.257786	1	79	10.5%	1.27 [-1.20, 3.73]
Watanabe 2011	0	0	0	117	0.0%	0.00 [1.13, 9.12]
Ishida 2012	2.036199	0.671787	9	442	13.4%	2.04 [0.72, 3.35]
Miyashita 2012	0	0	0	599	0.0%	0.00 [1.51, 4.17]
Sugisaki 2012	0	0	0	184	0.0%	0.00 [12.39, 23.48]
Fukuyama 2013	0.520833	0.519475	1	192	14.0%	0.52 [-0.50, 1.54]
Kaku 2013	0	0	0	108	0.0%	0.00 [0.14, 7.27]
Maruyama 2013	4.984424	1.214653	16	321	10.7%	4.98 [2.60, 7.37]
Oshitani 2013	0	0	0	477	0.0%	0.00 [0.81, 3.38]
Shindo 2013	3.992395	0.853644	21	526	12.5%	3.99 [2.32, 5.67]
Kosai 2014	1.470588	1.459735	1	68	9.5%	1.47 [-1.39, 4.33]
Nakagawa 2014	0	0	0	587	0.0%	0.00 [2.35, 5.49]
Sakoda 2014	0	0	0	203	0.0%	0.00 [0.94, 5.96]
Noguchi 2015	0	0	0	82	0.0%	0.00 [5.11, 19.28]
Matsuda 2016	0	0	0	108	0.0%	0.00 [1.24, 9.88]
Parrott 2017	0	0	0	103	0.0%	0.00 [1.94, 11.66]
Yamazoe 2019	0	0	0	376	0.0%	0.00 [7.29, 13.45]
Yamagata 2020	1.22399	0.384684	10	817	14.4%	1.22 [0.47, 1.98]
Imamura 2022	0	0	0	596	0.0%	0.00 [4.27, 8.15]
Total (95% CI)			**86**	**2661**	**100.0%**	**2.49 [1.03, 3.95]**

Heterogeneity: Tau² = 3.68; Chi² = 59.13, df = 8 (P < 0.00001); I² = 86%

図 Suppl-10. *Moraxella catarrhalis.*



Study or Subgroup	Mean Difference	SE	Moraxella Catarrhalis Total	All Total	Weight	Mean Difference IV, Random, 95% CI
Maruyama 2008	2.666667	1.860307	2	75	1.0%	2.67 [-0.98, 6.31]
Shindo 2009	0	0	0	141	0.0%	0.00 [0.49, 6.60]
Tani 2009	2.040816	1.166181	3	147	2.5%	2.04 [-0.24, 4.33]
Kawasaki 2011	5.797101	2.813281	4	69	0.4%	5.80 [0.28, 11.31]
Umeki 2011	1.265823	1.257786	1	79	2.1%	1.27 [-1.20, 3.73]
Watanabe 2011	2.564103	1.461283	3	117	1.6%	2.56 [-0.30, 5.43]
Ishida 2012	2.714932	0.773021	12	442	5.6%	2.71 [1.20, 4.23]
Miyashita 2012	2.838063	0.678494	17	599	7.3%	2.84 [1.51, 4.17]
Sugisaki 2012	3.26087	1.309359	6	184	2.0%	3.26 [0.69, 5.83]
Fukuyama 2013	4.6875	1.525439	9	192	1.4%	4.69 [1.70, 7.68]
Kaku 2013	3.703704	1.817235	4	108	1.0%	3.70 [0.14, 7.27]
Maruyama 2013	1.246106	0.619159	4	321	8.8%	1.25 [0.03, 2.46]
Oshitani 2013	1.257862	0.51028	6	477	12.9%	1.26 [0.26, 2.26]
Shindo 2013	2.281369	0.651019	12	526	7.9%	2.28 [1.01, 3.56]
Kosai 2014	0	0	0	68	0.0%	0.00 [-1.07, 6.96]
Nakagawa 2014	1.362862	0.47855	8	587	14.7%	1.36 [0.42, 2.30]
Sakoda 2014	2.463054	1.087861	5	203	2.8%	2.46 [0.33, 4.60]
Noguchi 2015	2.439024	1.703489	2	82	1.2%	2.44 [-0.90, 5.78]
Matsuda 2016	0	0	0	108		Not estimable
Parrott 2017	3.883495	1.90367	4	103	0.9%	3.88 [0.15, 7.61]
Yamazoe 2019	2.659574	0.829772	10	376	4.9%	2.66 [1.03, 4.29]
Yamagata 2020	2.44798	0.540644	20	817	11.5%	2.45 [1.39, 3.51]
Imamura 2022	2.181208	0.598324	13	596	9.4%	2.18 [1.01, 3.35]
Total (95% CI)			**145**	**6100**	**100.0%**	**2.10 [1.74, 2.46]**

Heterogeneity: Tau² = 0.00; Chi² = 17.61, df = 19 (P = 0.55); I² = 0%

SR6 は Review Manager にて解析を行った。同ソフトの仕様により本来解析者の意図しない記載があるため留意されたい。
上段に[Mean Difference]の記載があるが、平均差ではなく起炎菌割合の解析を行っている。
上段に[Total]の表示が重複しているが左列が当該菌種の検出人数、右列に観察者総数を記している。

SR 7
院内肺炎における原因微生物（日本）

図 Suppl-1. MRSA.

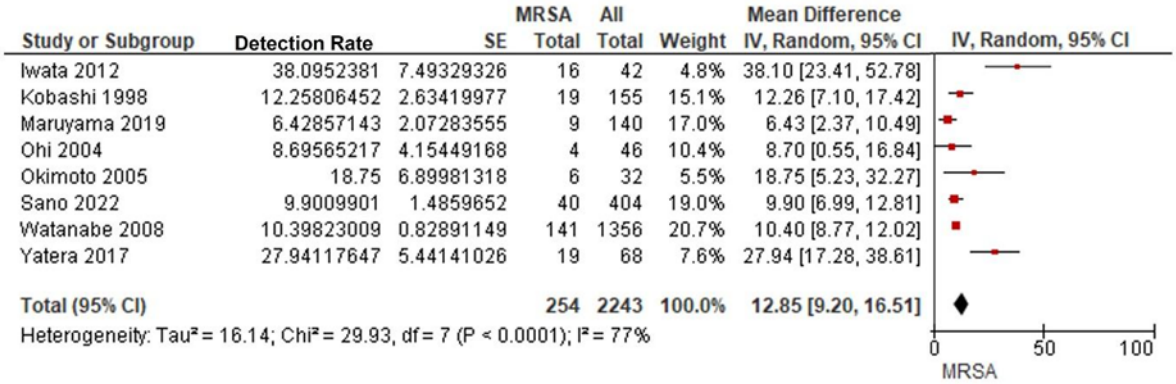


図 Suppl-2. *P. aeruginosa.*

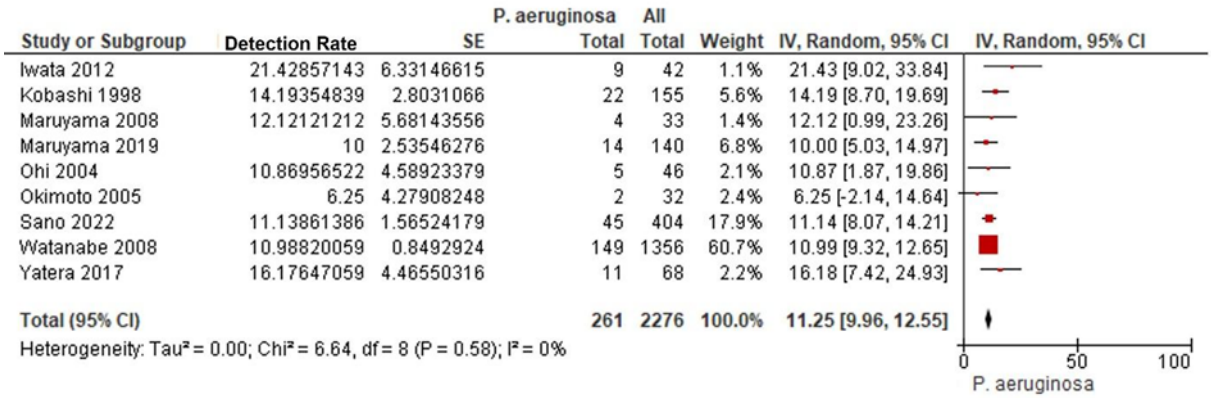


図 Suppl-3. MSSA.

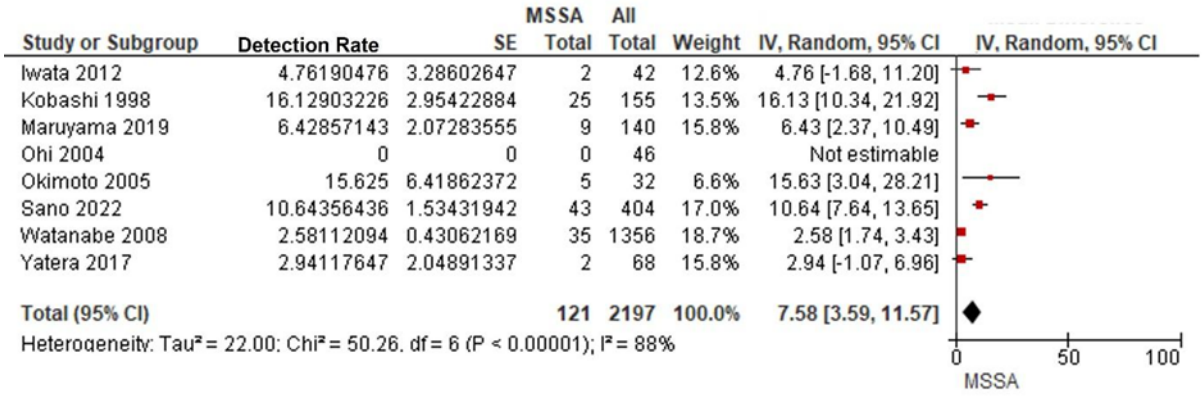


図 Suppl-4. *K. pneumoniae.*

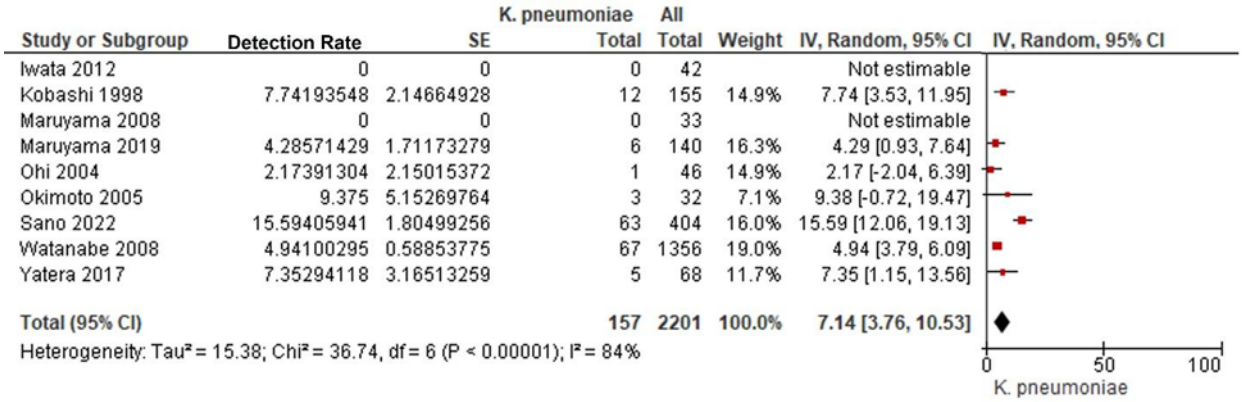


図 Suppl-5. *Enterobacter* sp.

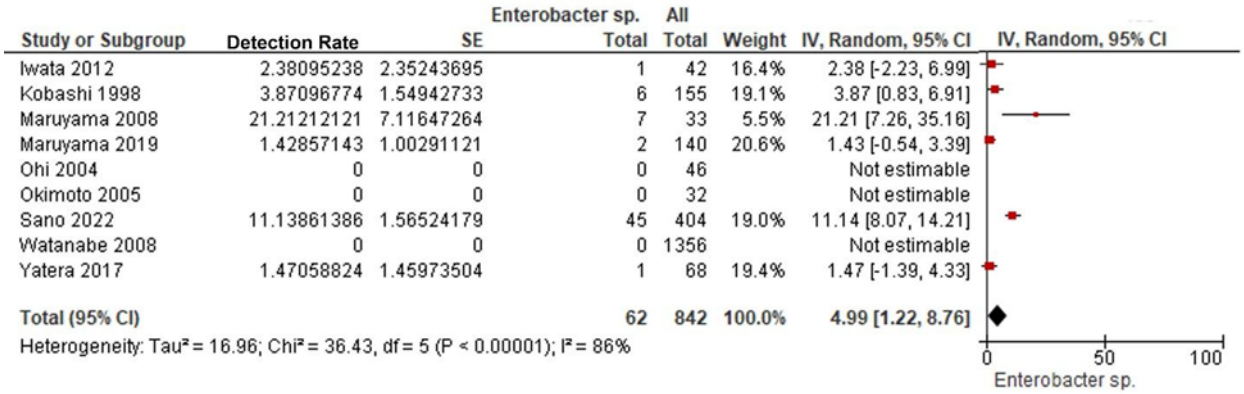


図 Suppl-6. *S. maltophilia.*

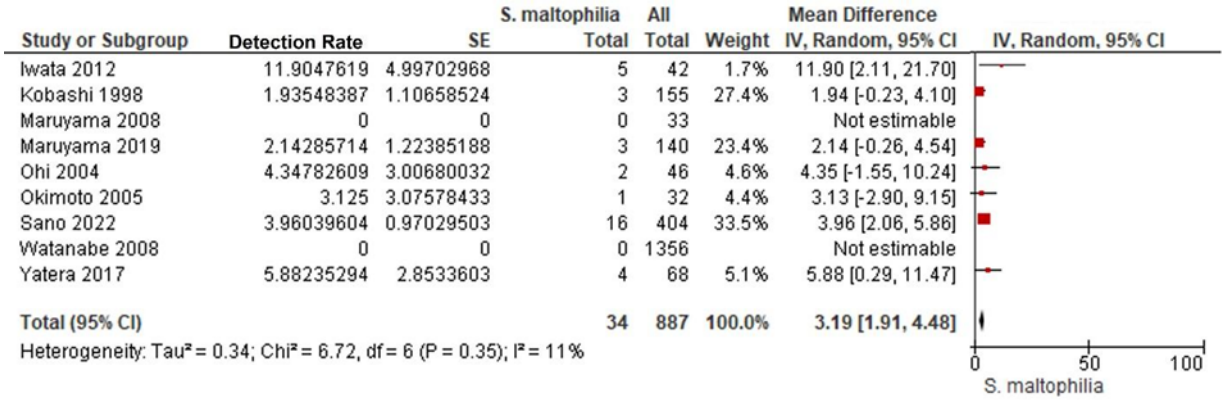


図 Suppl-7. *S. pneumoniae.*

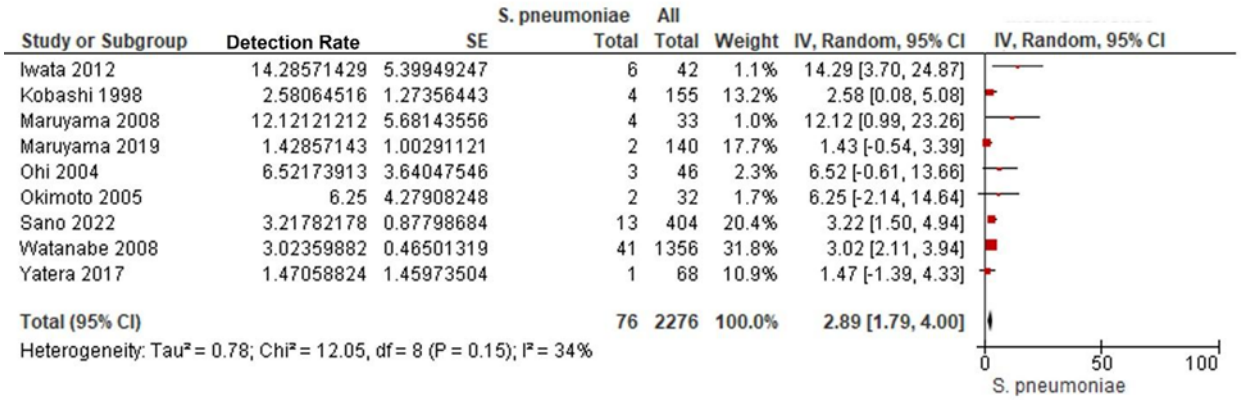


図 Suppl-8. *Acinetobacter sp.*

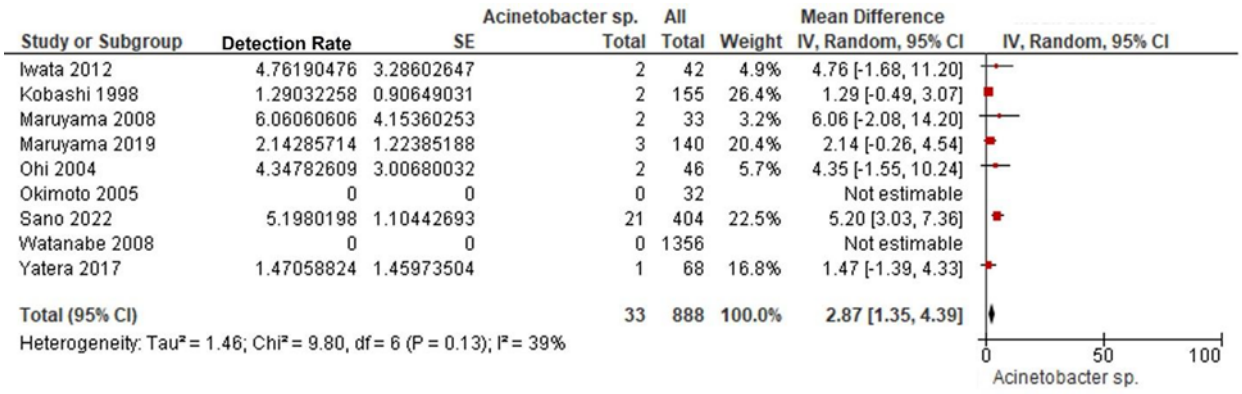


図 Suppl-9. *S. marcescens.*

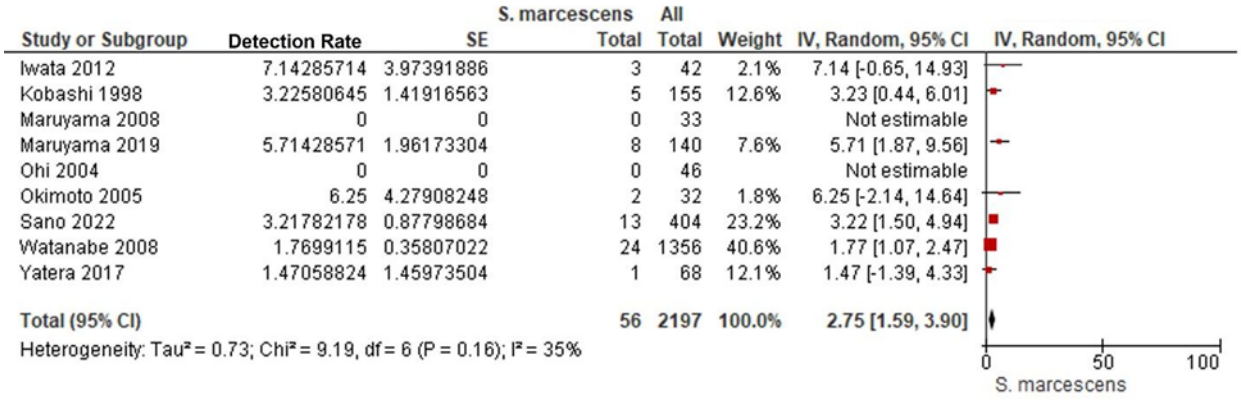
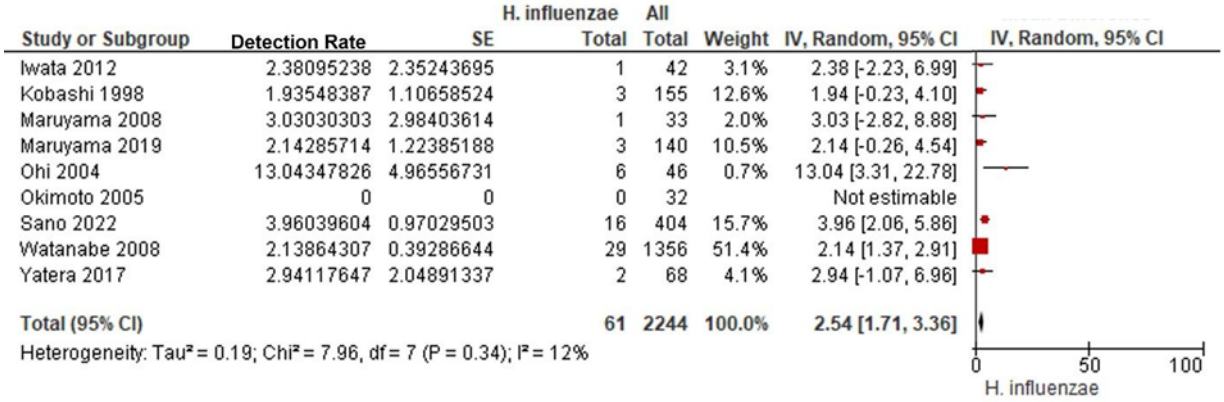


図 Suppl-10. *H. influenzae.*



SR10
HAP+VAP における耐性菌のリスク因子は何か？

図 Suppl-1. ICU での発症　培養陽性（耐性菌全体）.

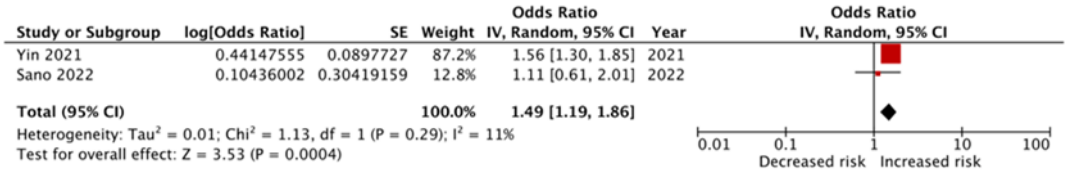


図 Suppl-2. ICU での発症　培養陽性（MDR）.

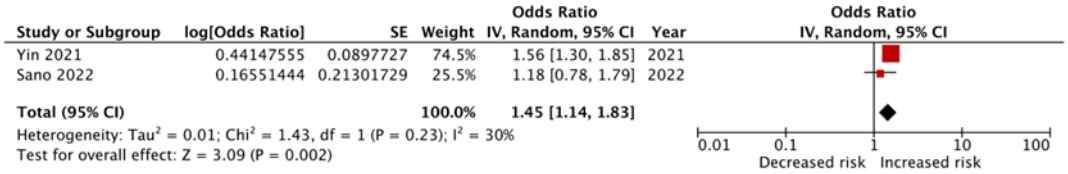


図 Suppl-3. ICU での発症　臨床診断（耐性菌全体）.

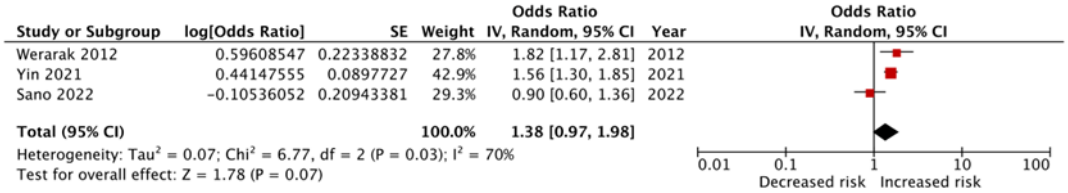


図 Suppl-4. 敗血症/敗血症性ショック　培養陽性（耐性菌全体）.

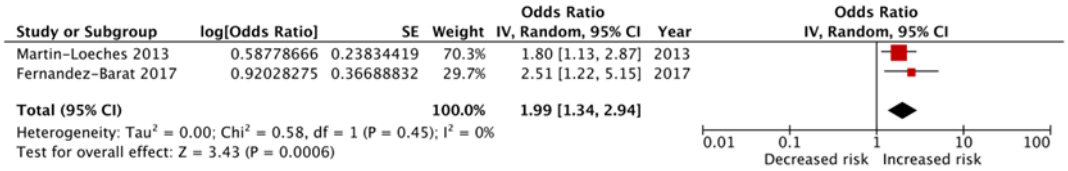


図 Suppl-5. 最近の抗菌薬使用歴　培養陽性（耐性菌全体）.

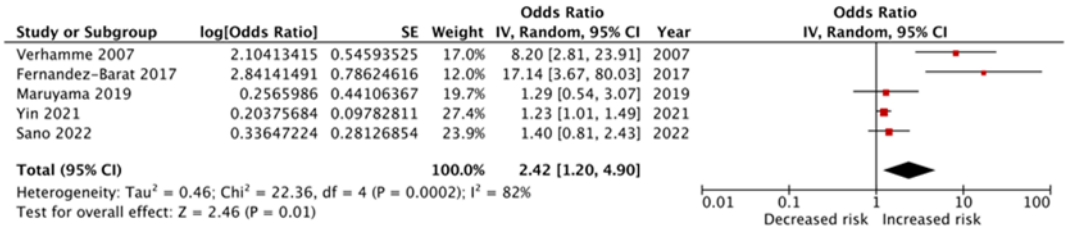


図 Suppl-6. 最近の抗菌薬使用歴　培養陽性（MRSA）.

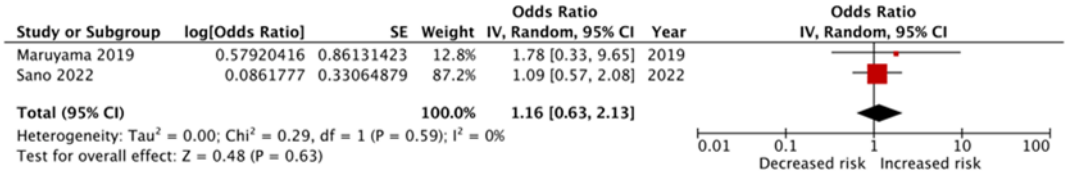


図 Suppl-7. 最近の抗菌薬使用歴　培養陽性（MDR）.

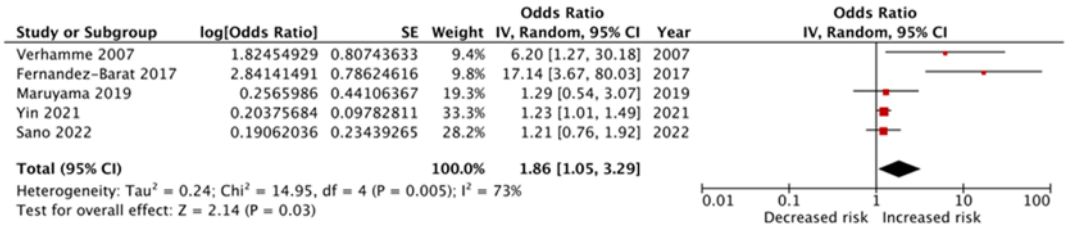


図 Suppl-8. 最近の抗菌薬使用歴　臨床診断（耐性菌全体）.

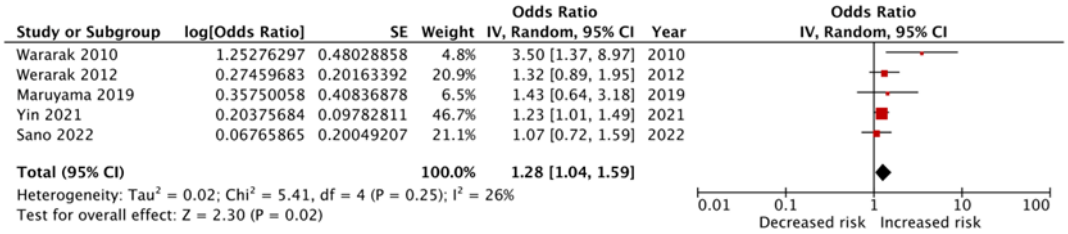


図 Suppl-9. 活動性の低下、歩行困難　培養陽性（耐性菌全体）.

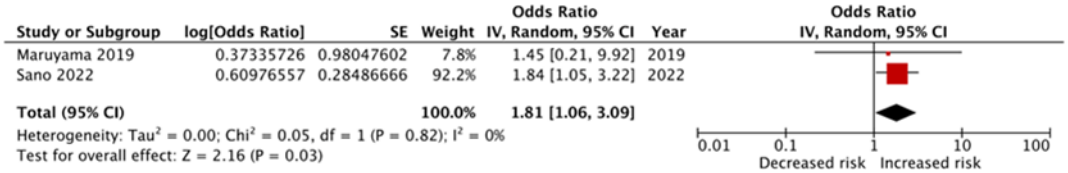


図 Suppl-10. 活動性の低下、歩行困難　培養陽性（MDR）.

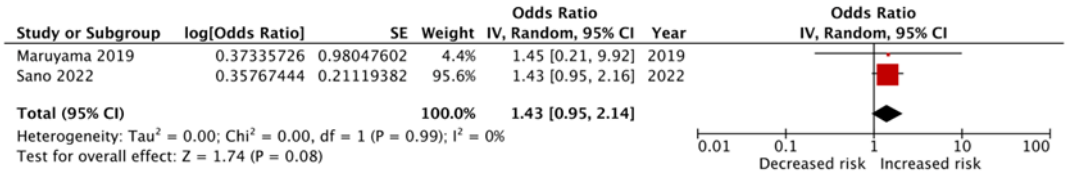


図 Suppl-11. 活動性の低下、歩行困難　臨床診断（耐性菌全体）.

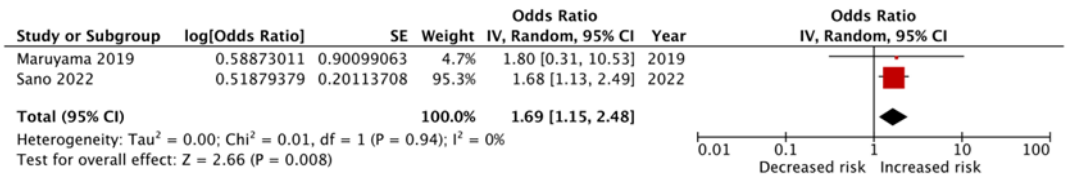


図 Suppl-12. 慢性腎疾患（透析を含む）　培養陽性（耐性菌全体）.

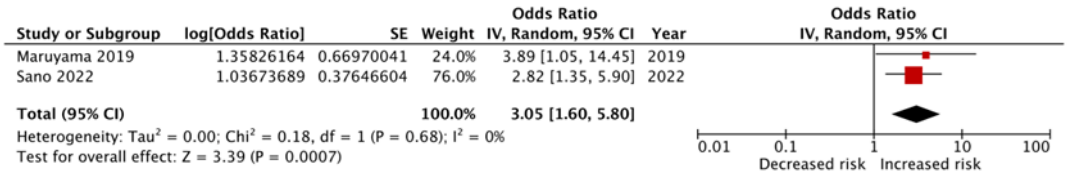


図 Suppl-13. 慢性腎疾患（透析を含む）　培養陽性（MRSA）.

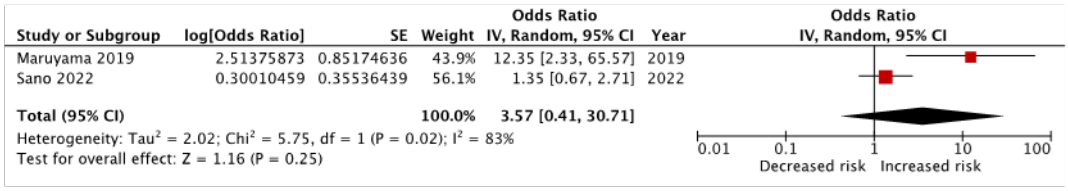


図 Suppl-14. 慢性腎疾患（透析を含む）　培養陽性（MDR）.

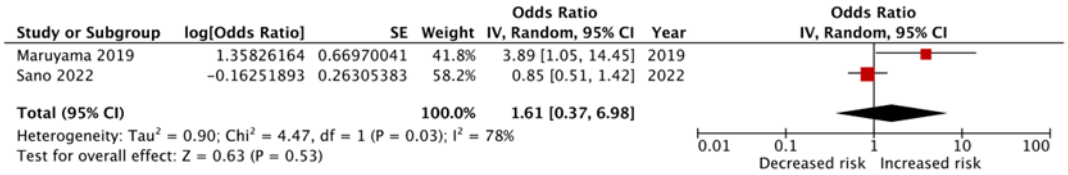
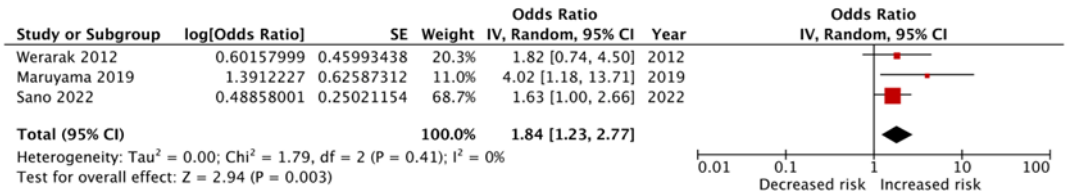


図 Suppl-15. 慢性腎疾患（透析を含む）　臨床診断（耐性菌全体）.



SR13
入院を要する高齢者市中肺炎（重症例を除く）の予後因子は何か？

図 Suppl-1-1. (Demographic) One-year increase of age.

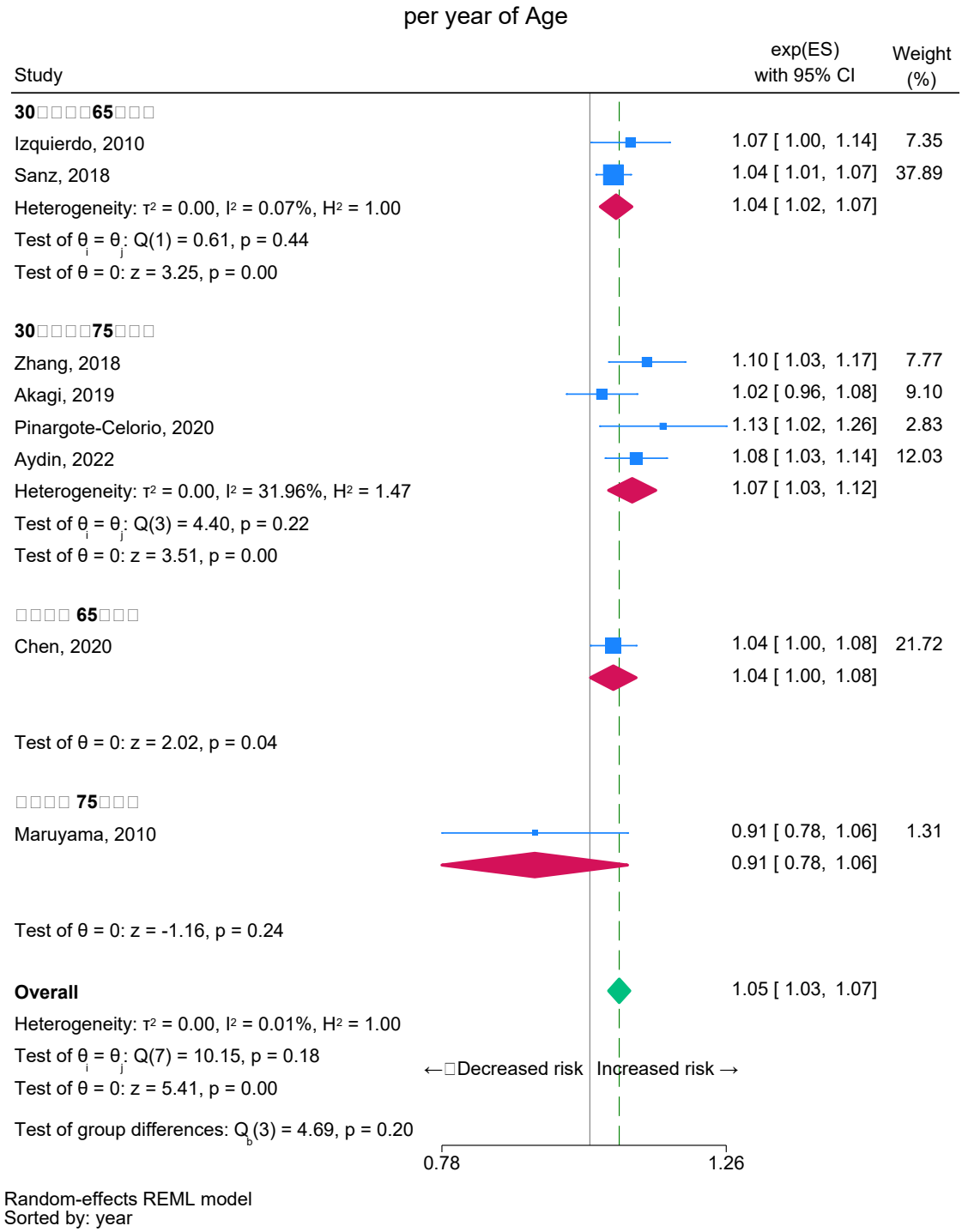


図 Suppl-1-2. (Demographic) Male gender.

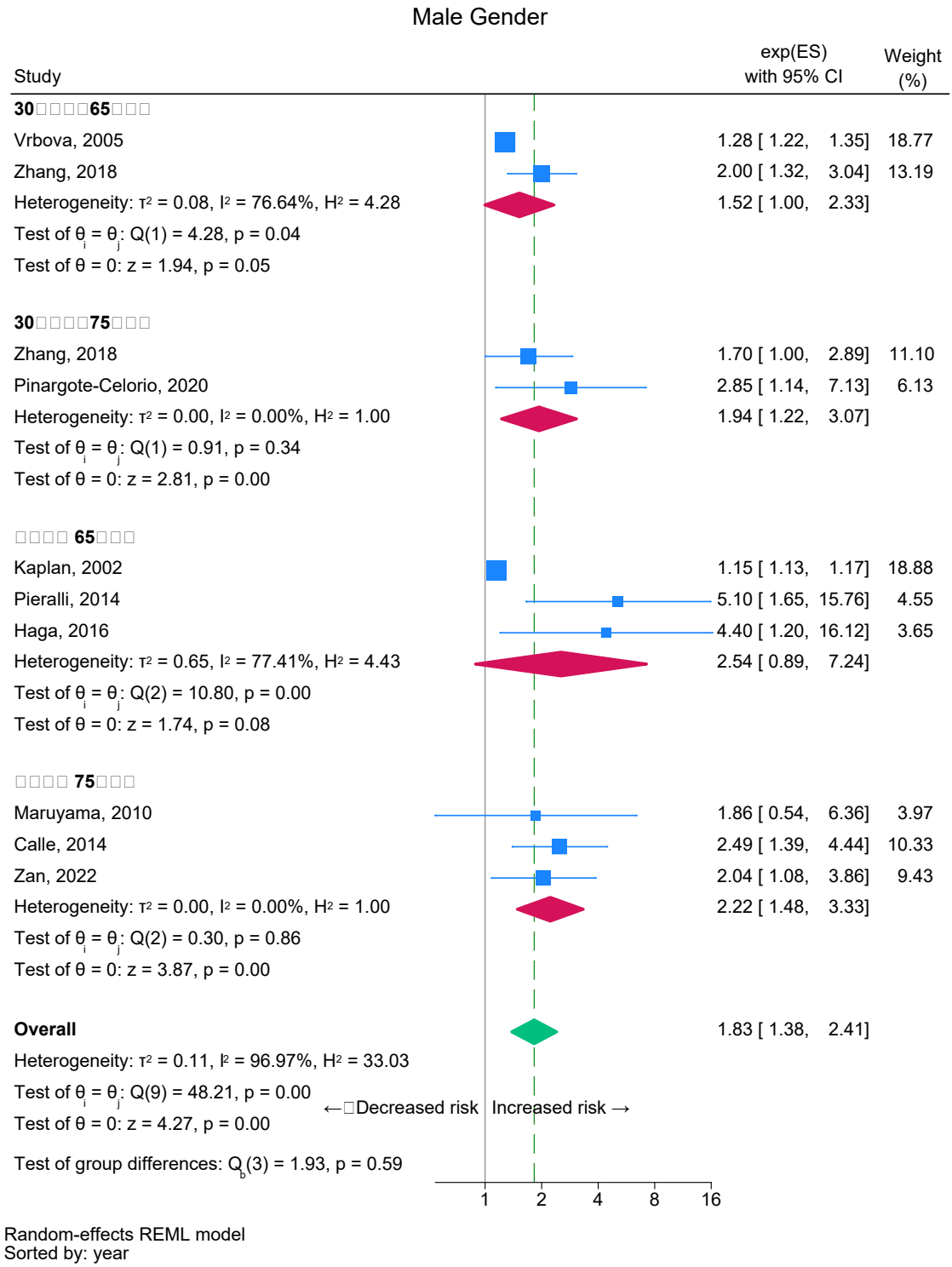
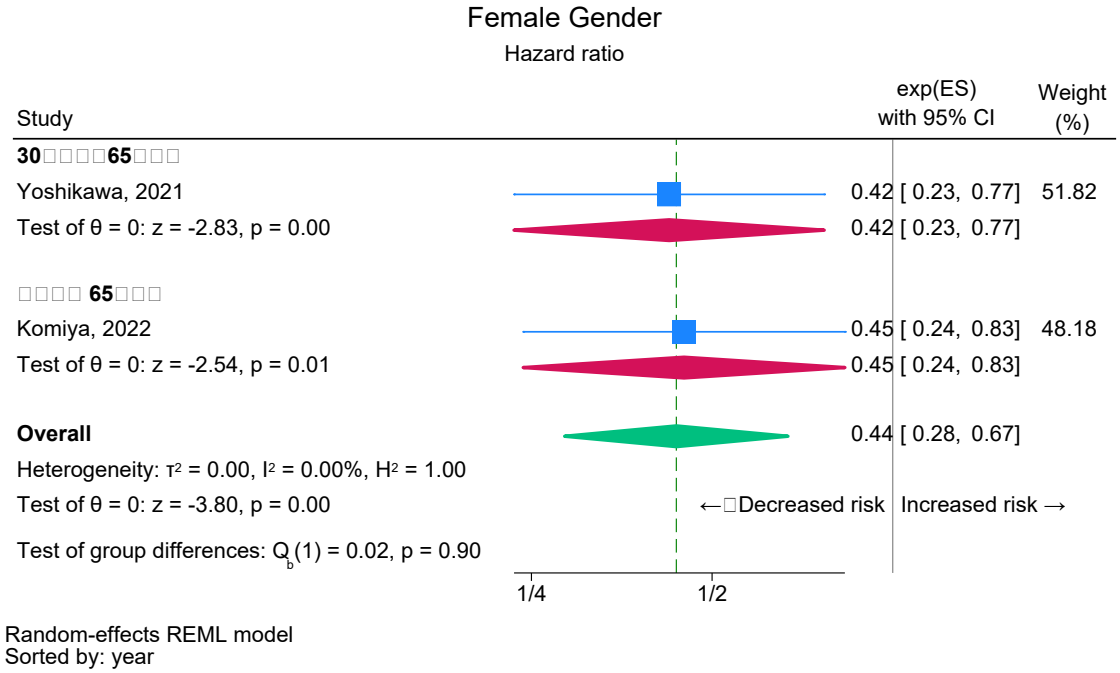
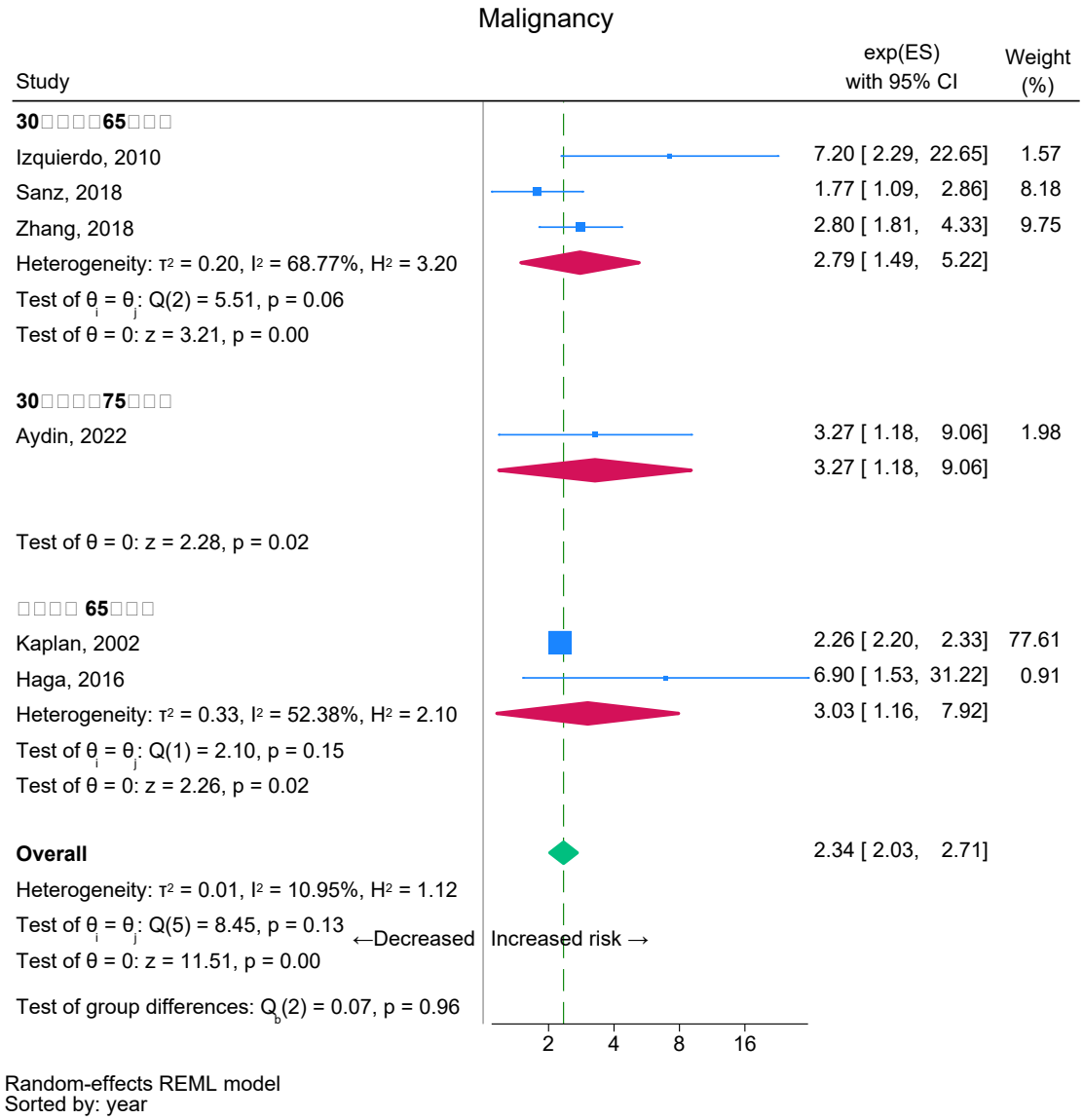


図 Suppl-1-3. (Demographic) Female Gender

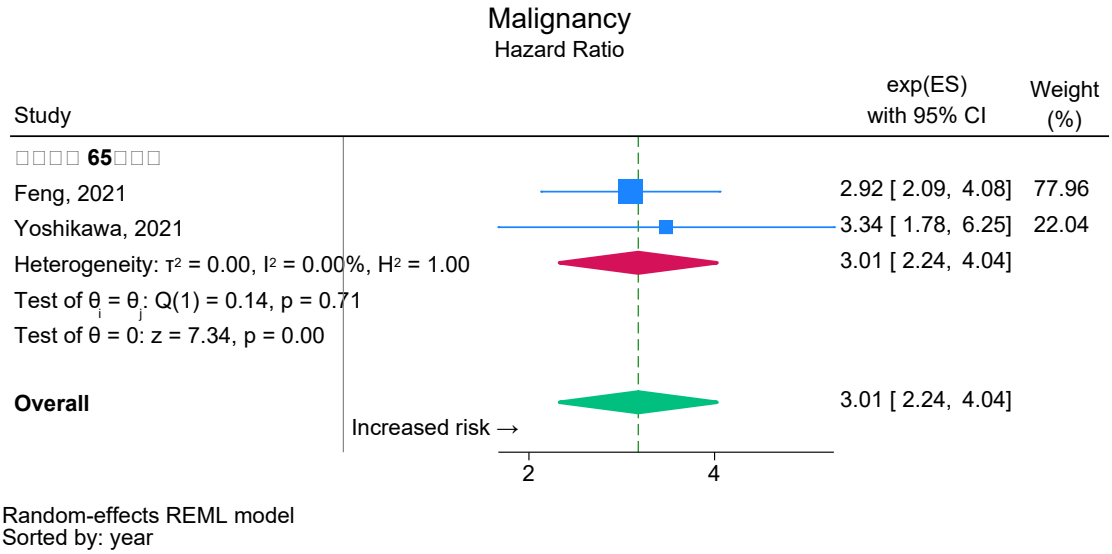


Random-effects REML model
Sorted by: year

図 Suppl2-1. (Comorbidity) Malignancy.

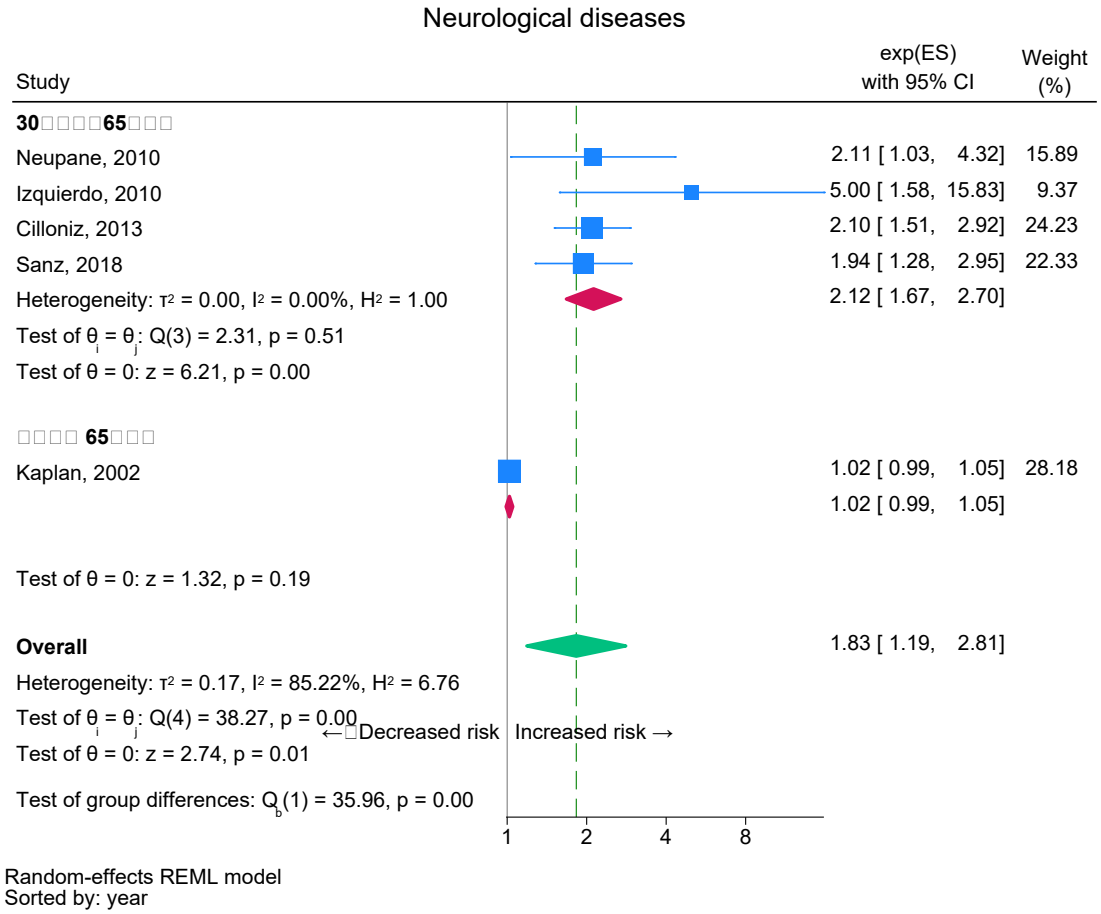


SR13　入院を要する高齢者市中肺炎（重症例を除く）の予後因子は何か？



Random-effects REML model
Sorted by: year

図 Suppl2-2. (Comorbidity) Neurological disease.



Dementia, Cerebrovascular disease を含んだ Neurological diseases で解析した。

図 Suppl2-3. (Comorbidity) Renal disease.

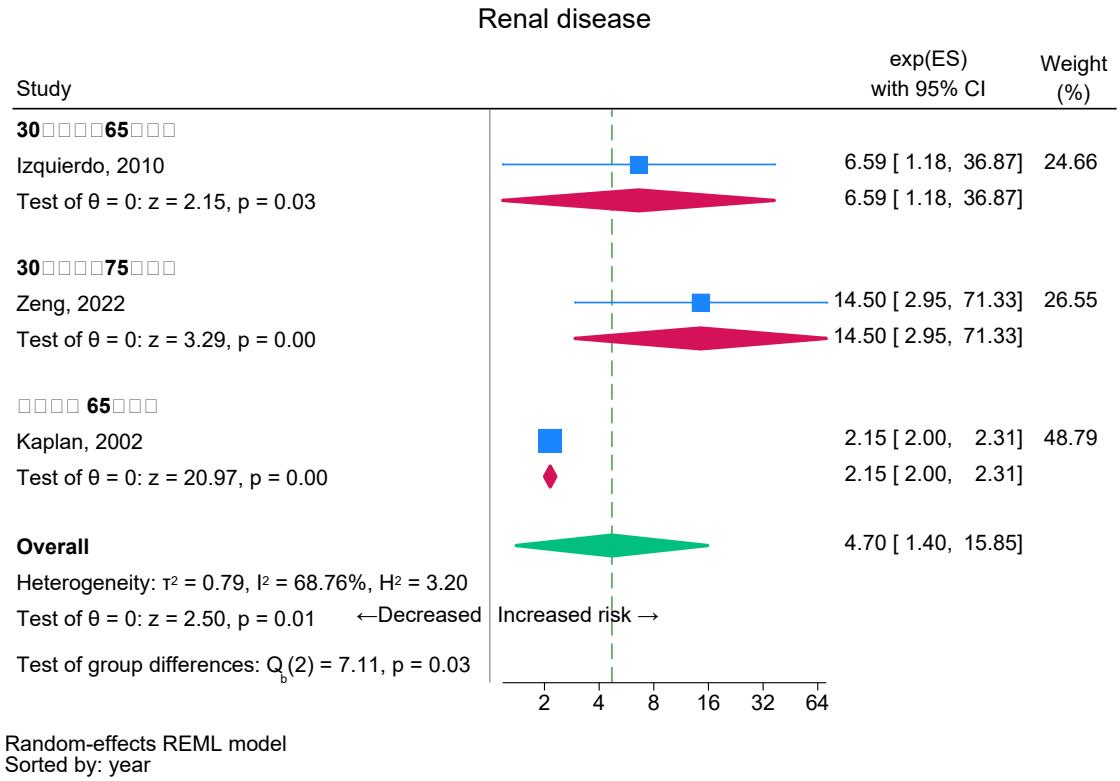


図 Suppl2-4. (Comorbidity) COPD.

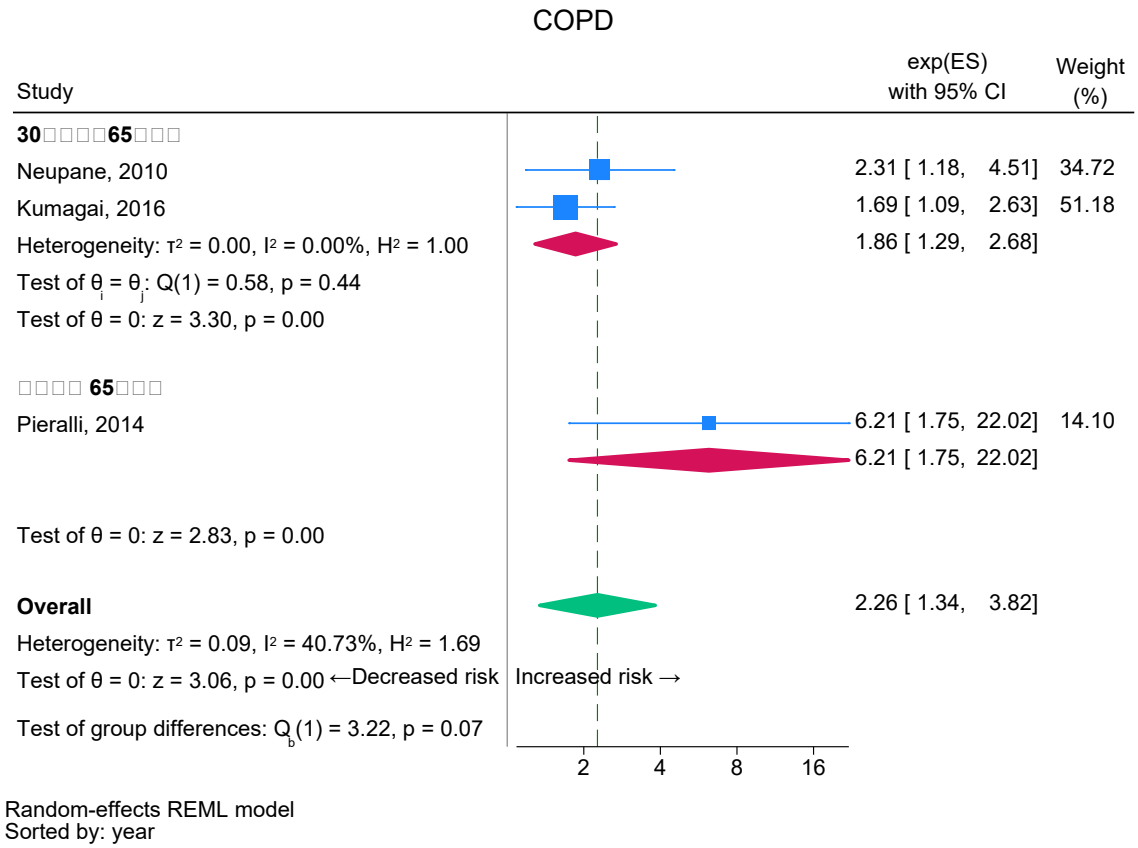


図 Suppl2-5. (Comorbidity) Heart disease.

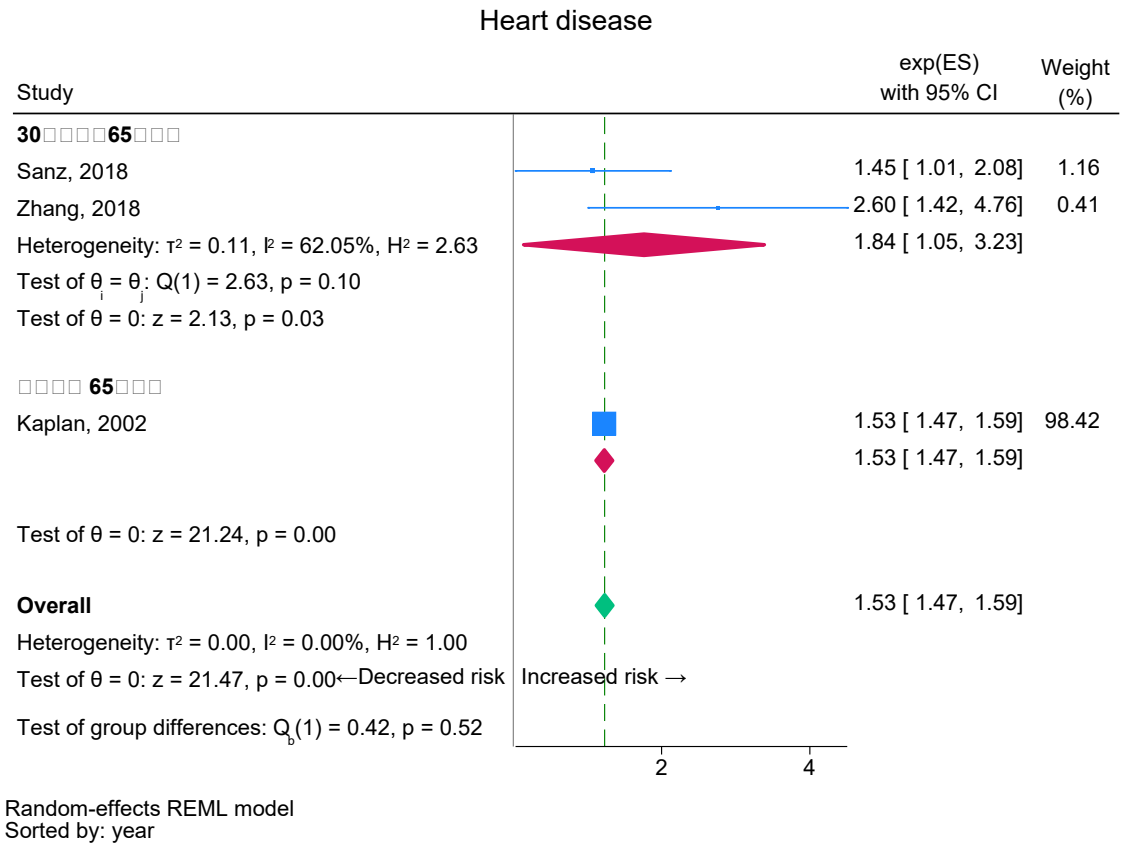
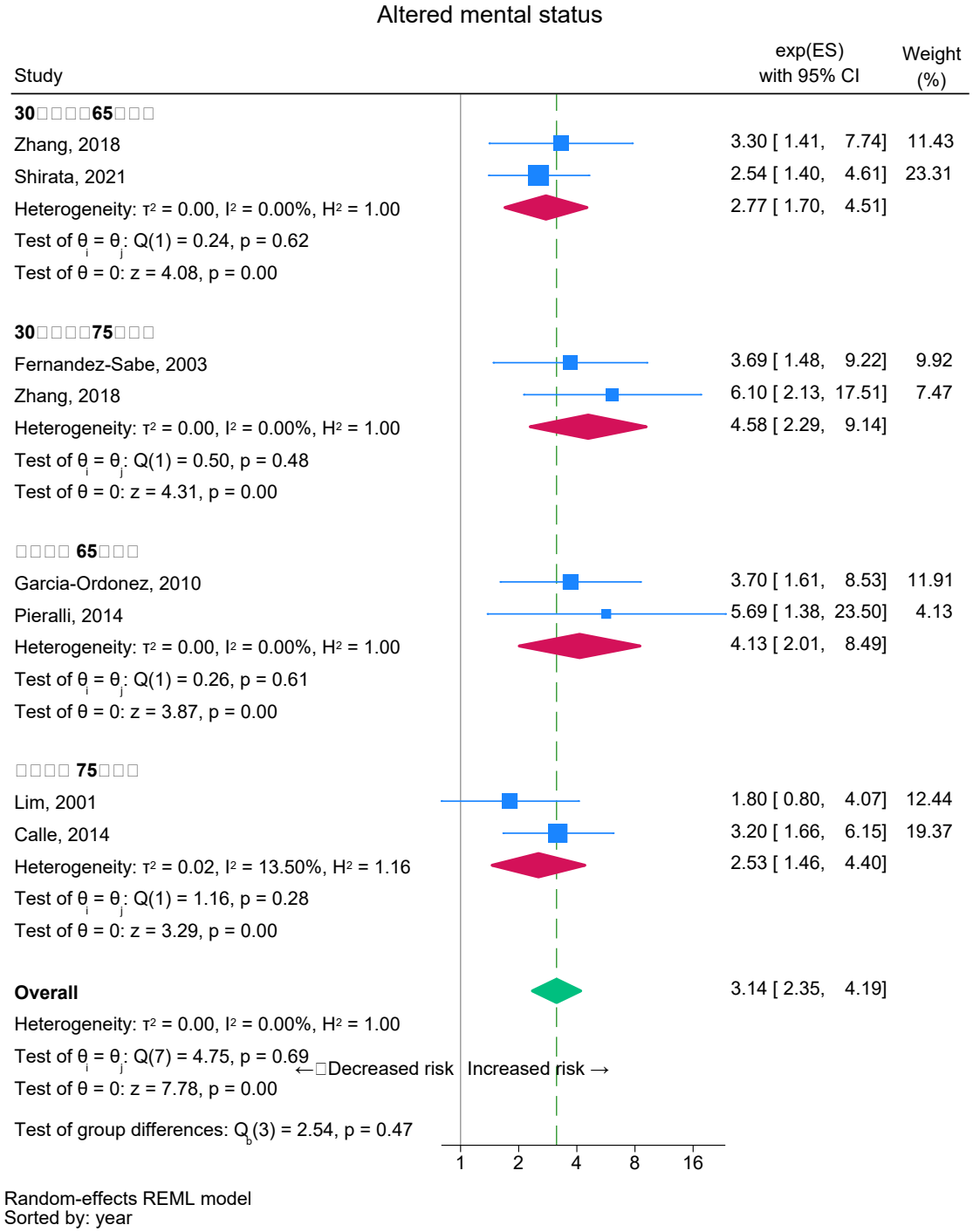
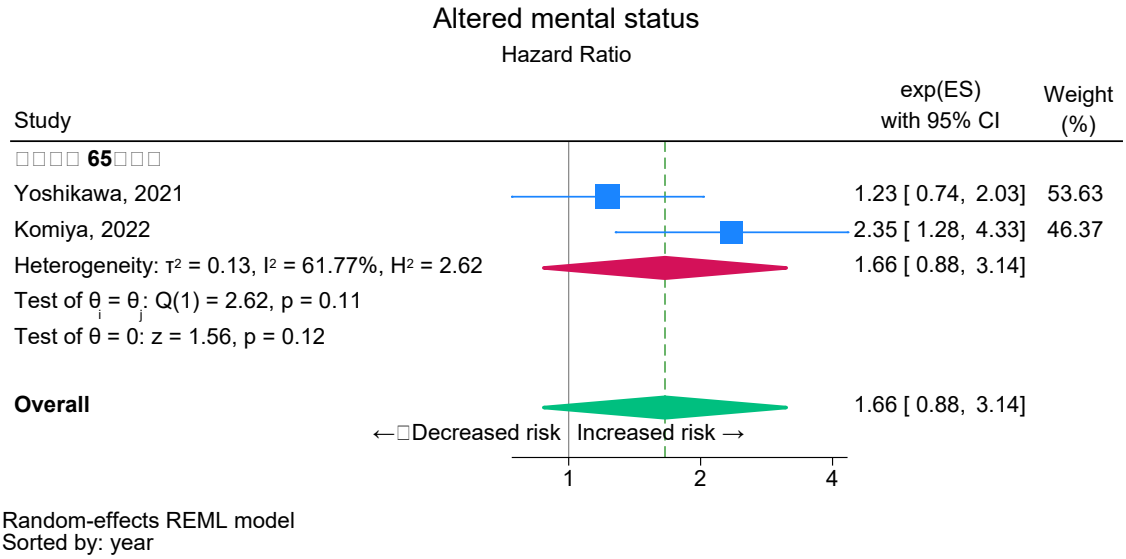


図 Suppl3-1. (Severity/clinical condition) Altered mental status/confusion/delirium.

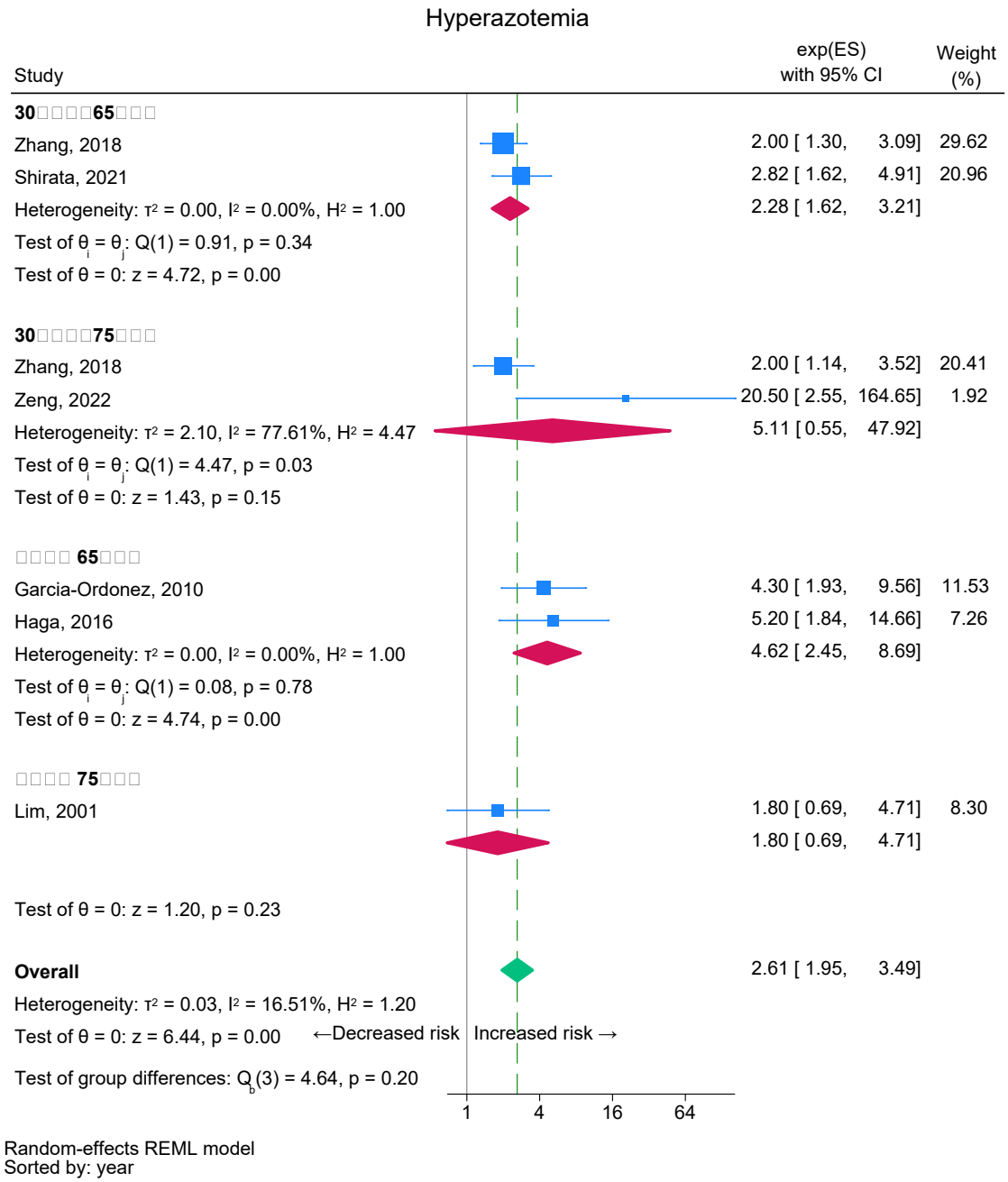


Note: #22 Zhang, et al.'s study reported 65-84 year-old and ≧85 year-old groups separately.



Random-effects REML model
Sorted by: year

図 Suppl3-2. (Severity/clinical condition) Hyperazotemia.



Random-effects REML model
Sorted by: year

図 Suppl3-3. (Severity/clinical condition) 1-mg/dL increase of BUN.

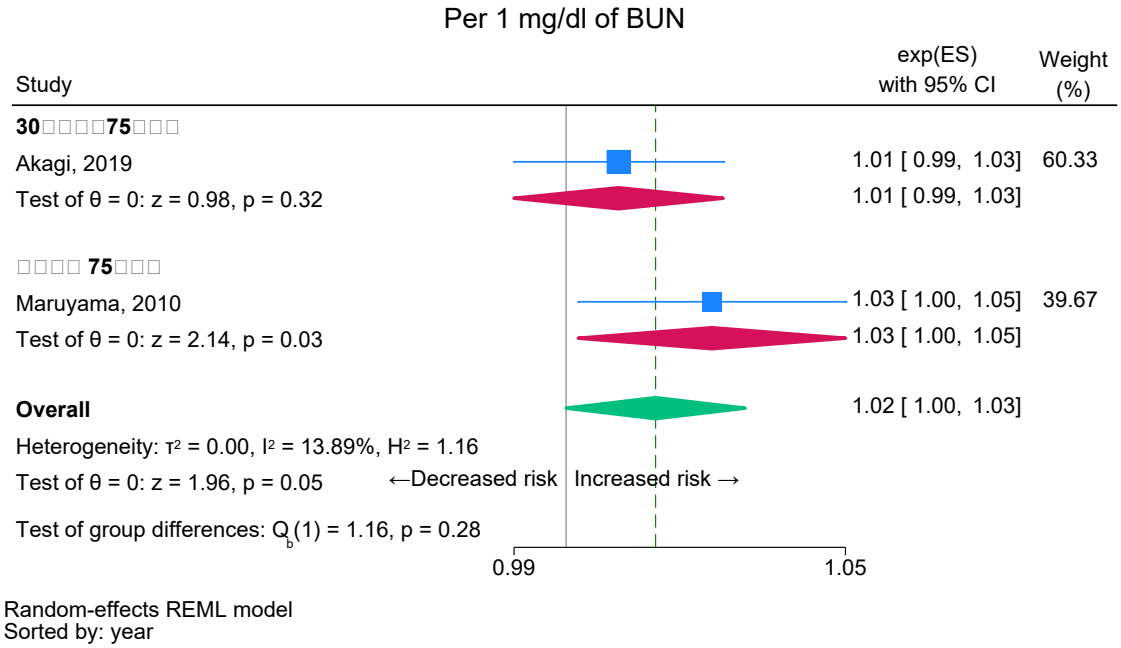


図 Suppl3-4. (Severity/clinical condition) Multiple lobe involvement/bilateral infiltration.

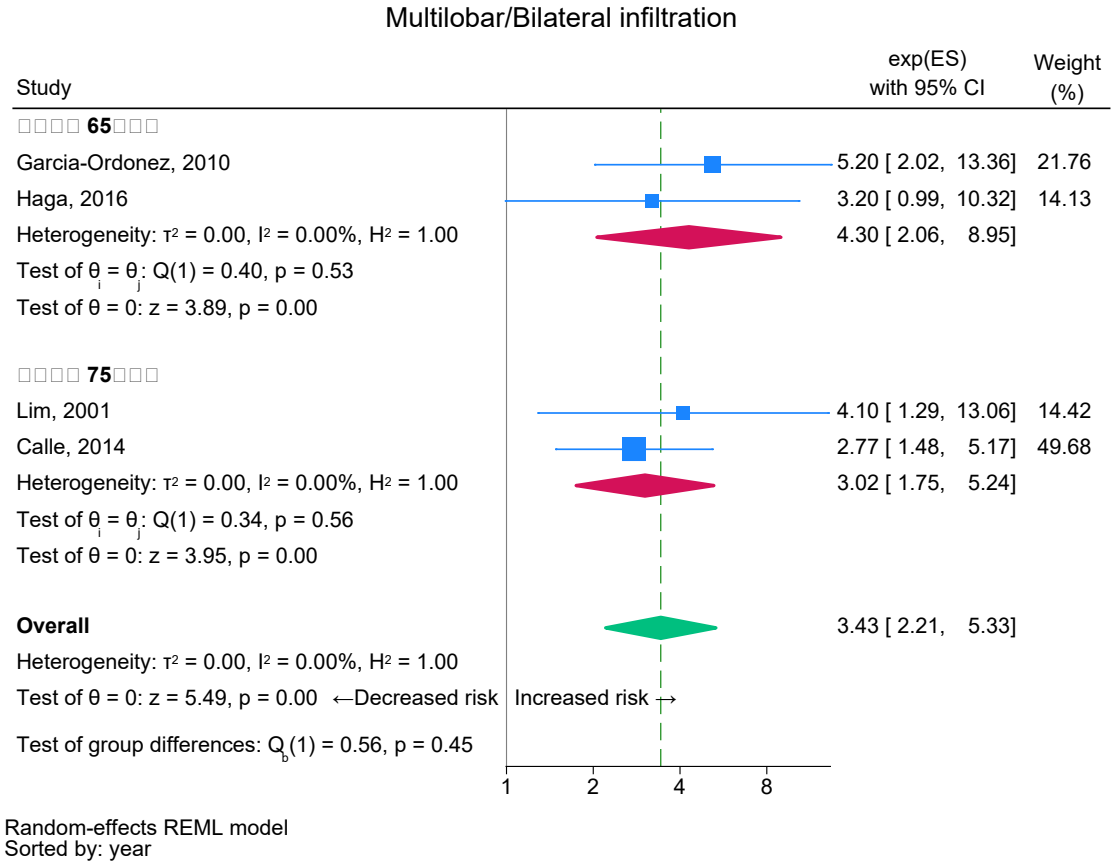


図 Suppl3-5. (Severity/clinical condition) Pleural effusion.

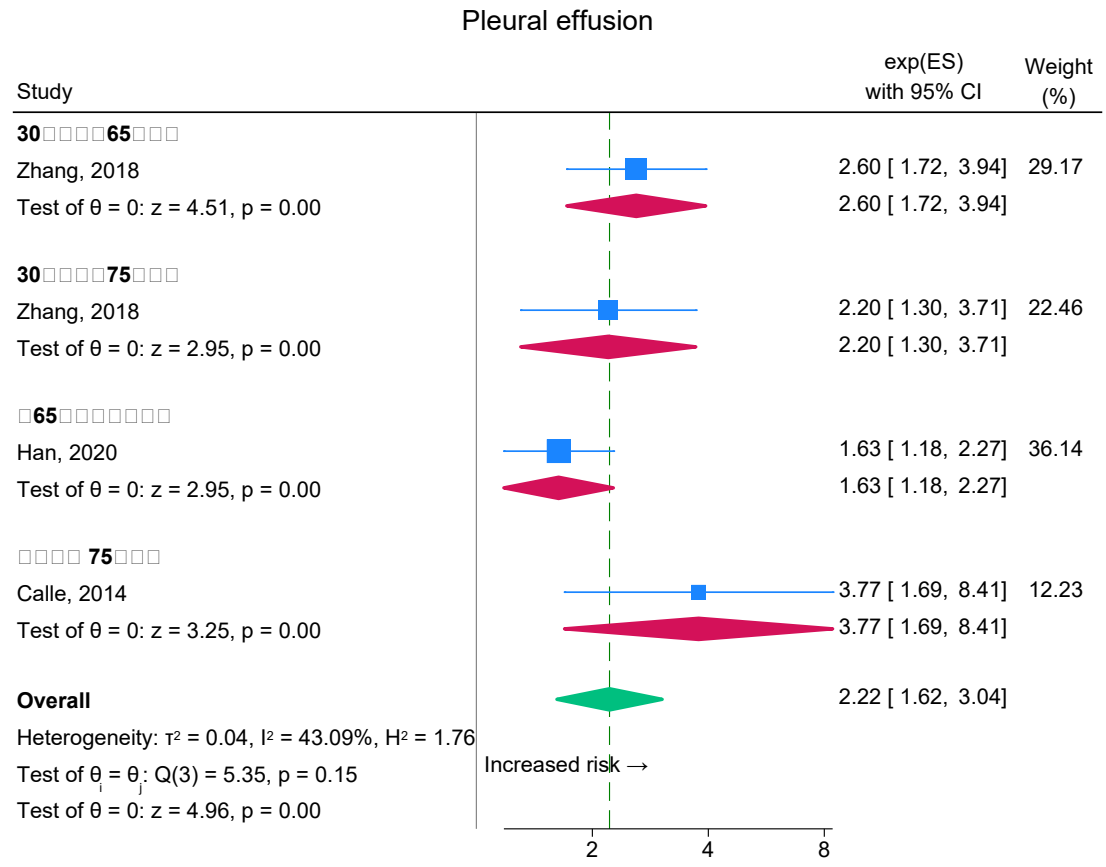
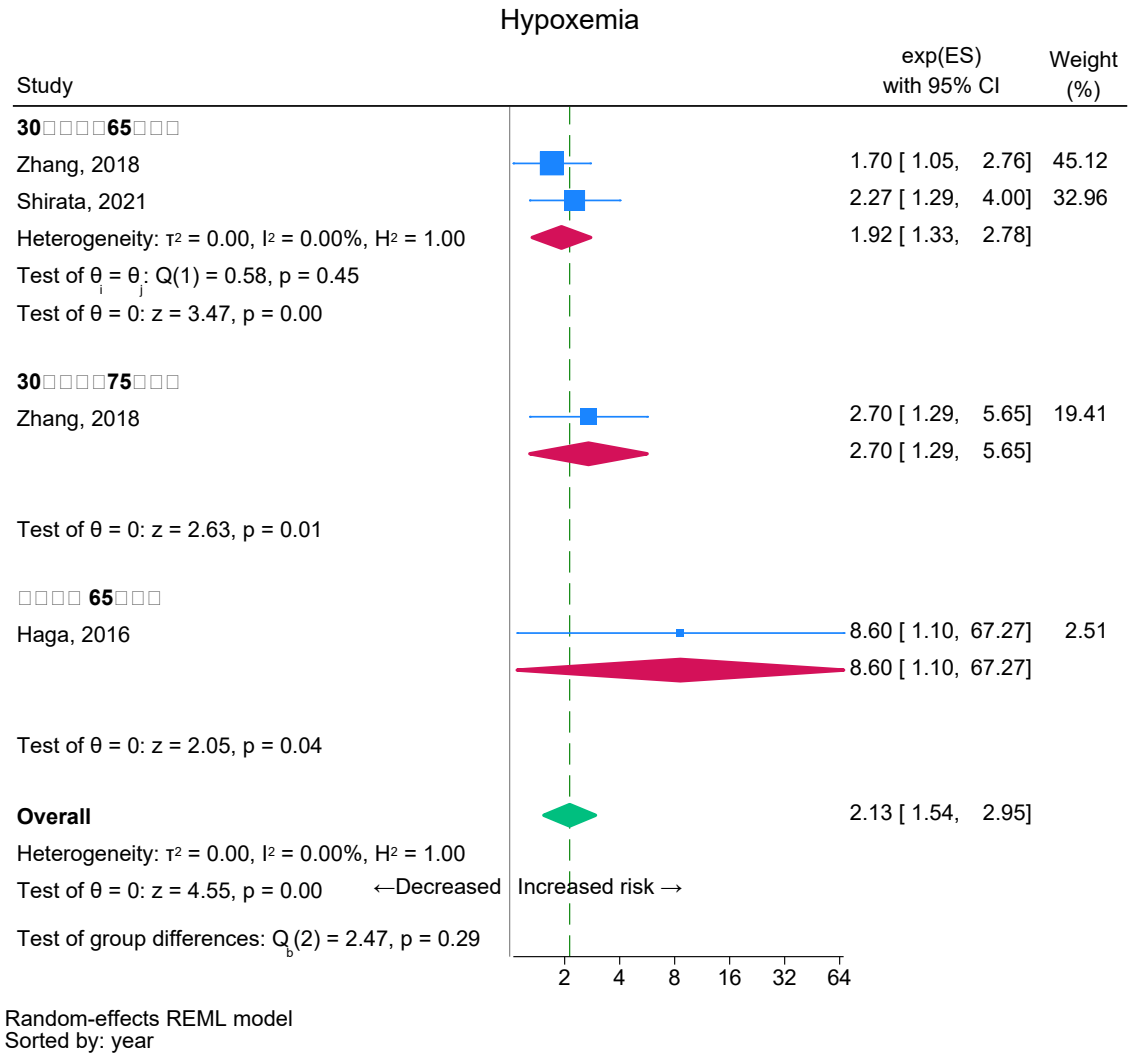


図 Suppl3-6. (Severity/clinical condition) Hypoxemia.



SR13　入院を要する高齢者市中肺炎（重症例を除く）の予後因子は何か？

図 Suppl3-7. (Severity/clinical condition) PSI V or IV-V.

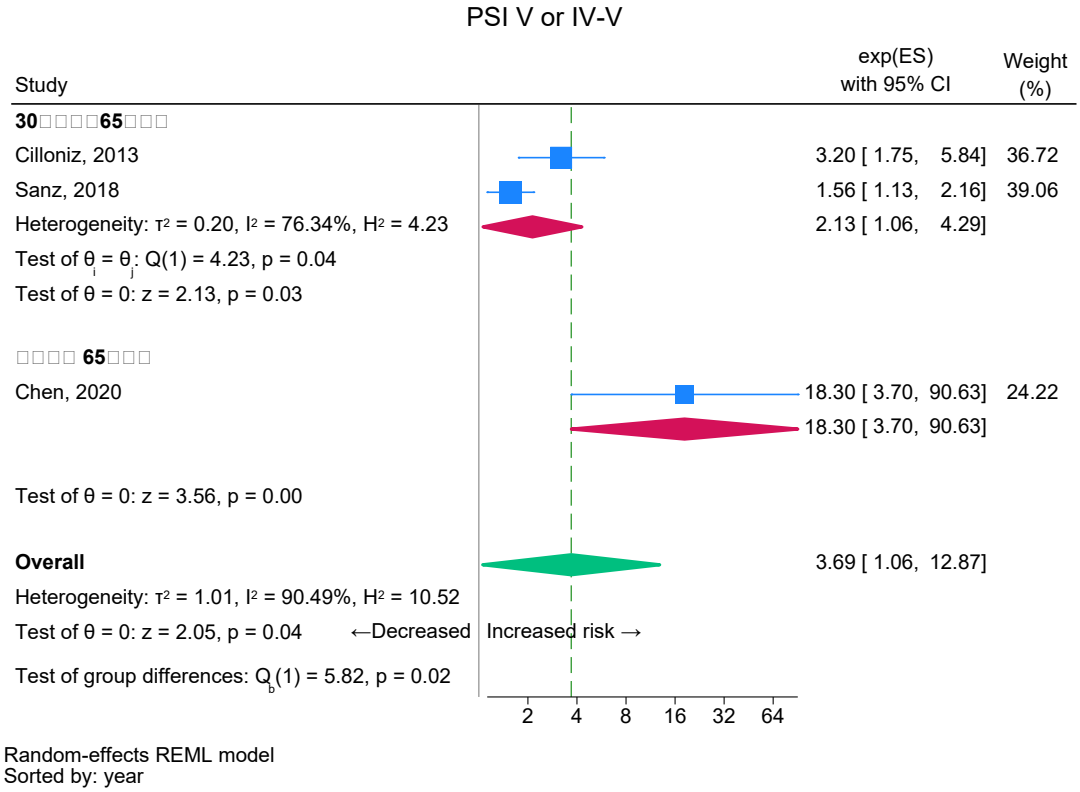
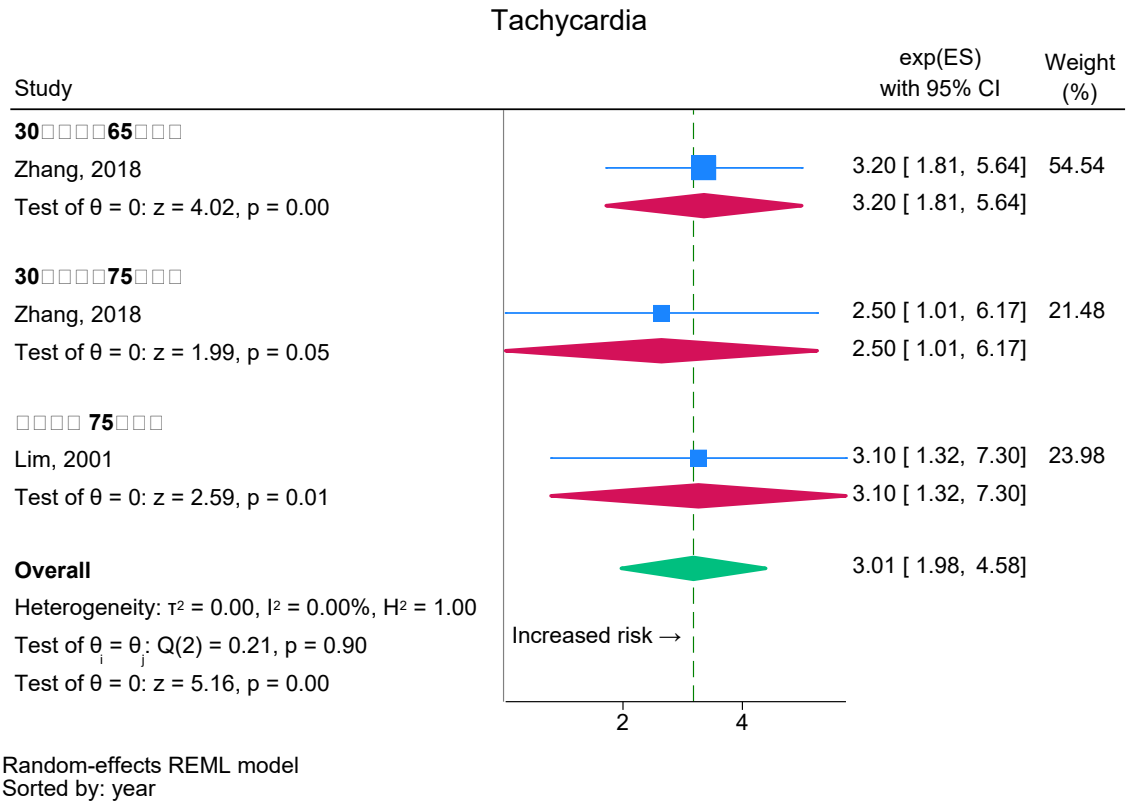


図 Suppl3-8. (Severity/clinical condition) Tachycardia.



Random-effects REML model
Sorted by: year

図 Suppl3-9. (Severity/clinical condition) Hypotension/shock.

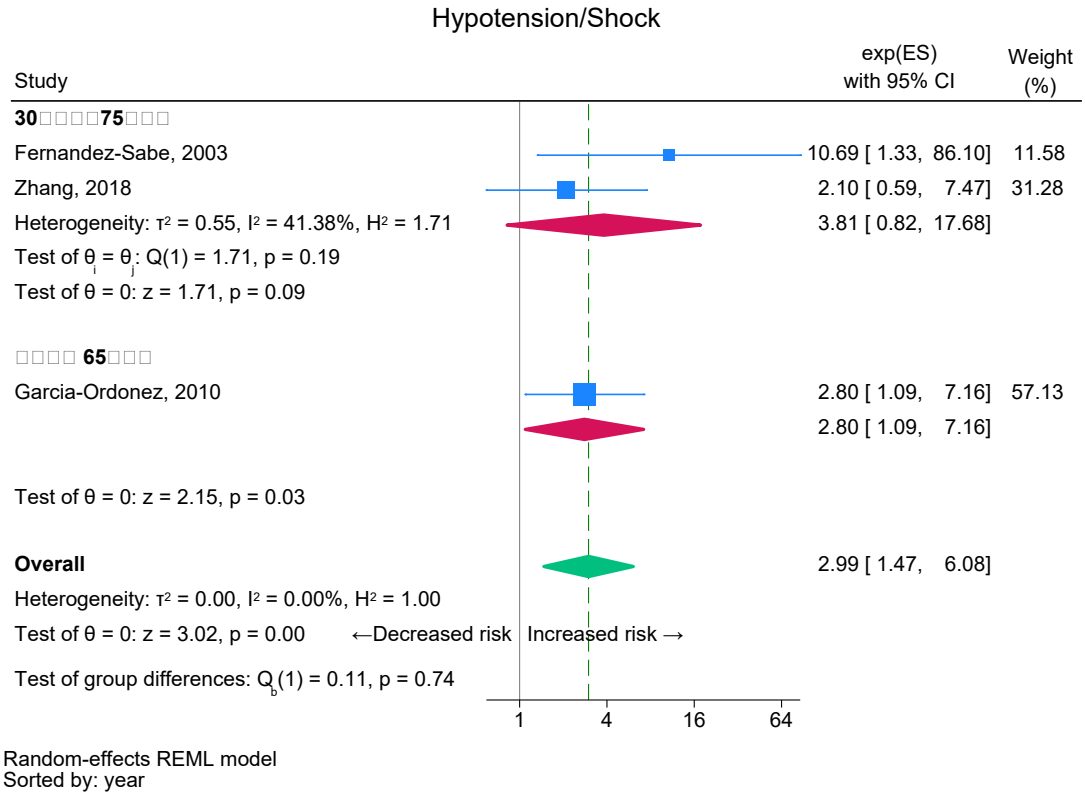


図 Suppl3-10. (Severity/clinical condition) 1-point increase of CURB-65.

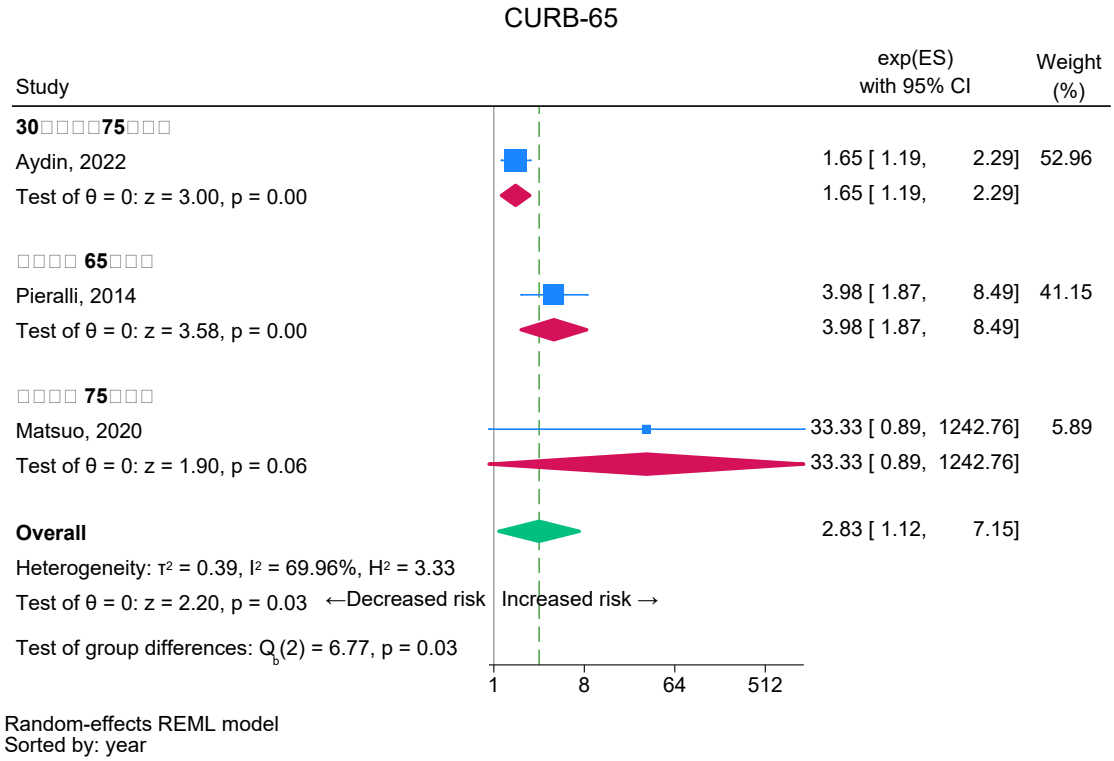


図 Suppl3-11. (Severity/clinical condition) Tachypnea.

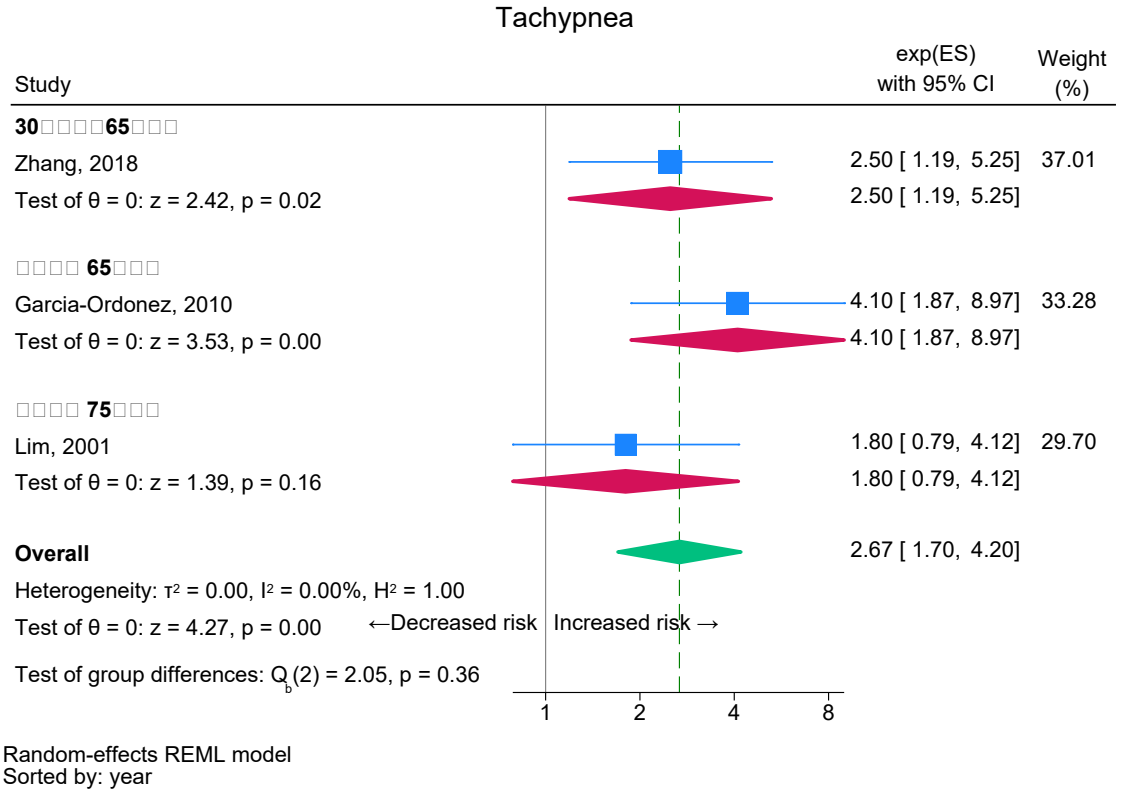
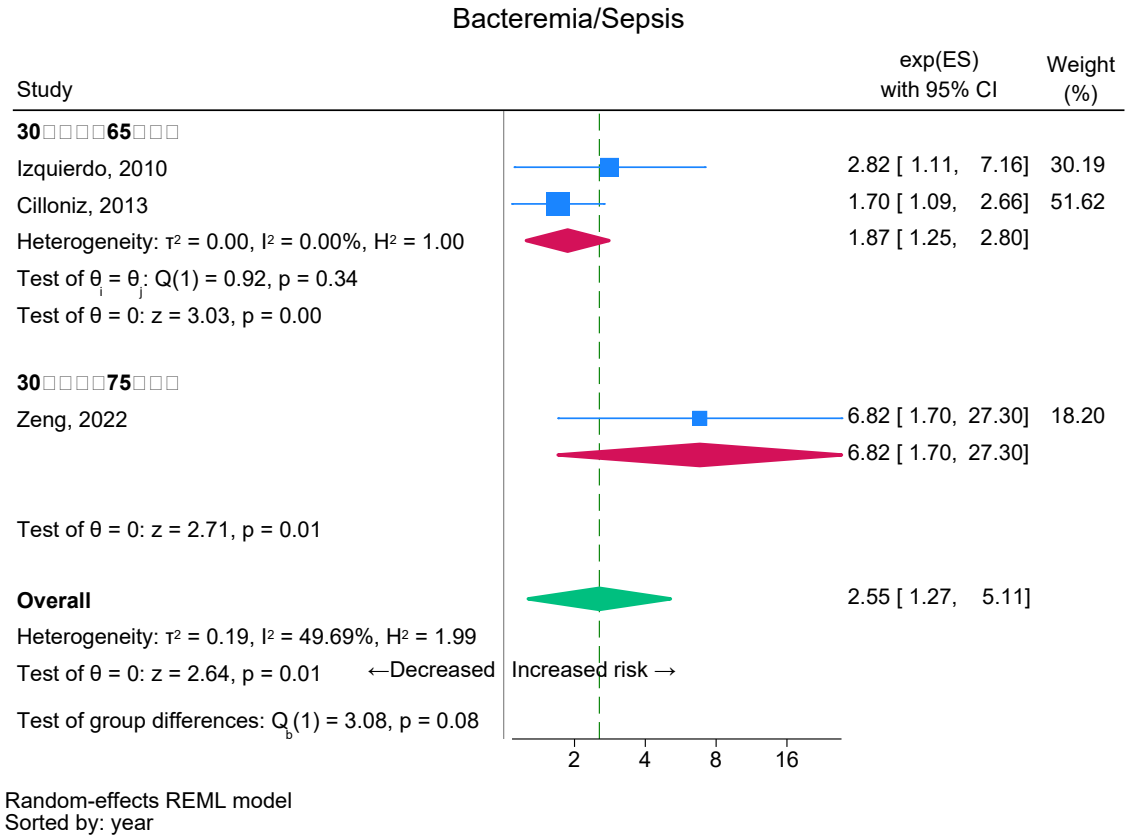


図 Suppl3-12. (Severity/clinical condition) Bacteremia/sepsis.



Random-effects REML model
Sorted by: year

図 Suppl3-13. (Severity/clinical condition) Renal dysfunction.

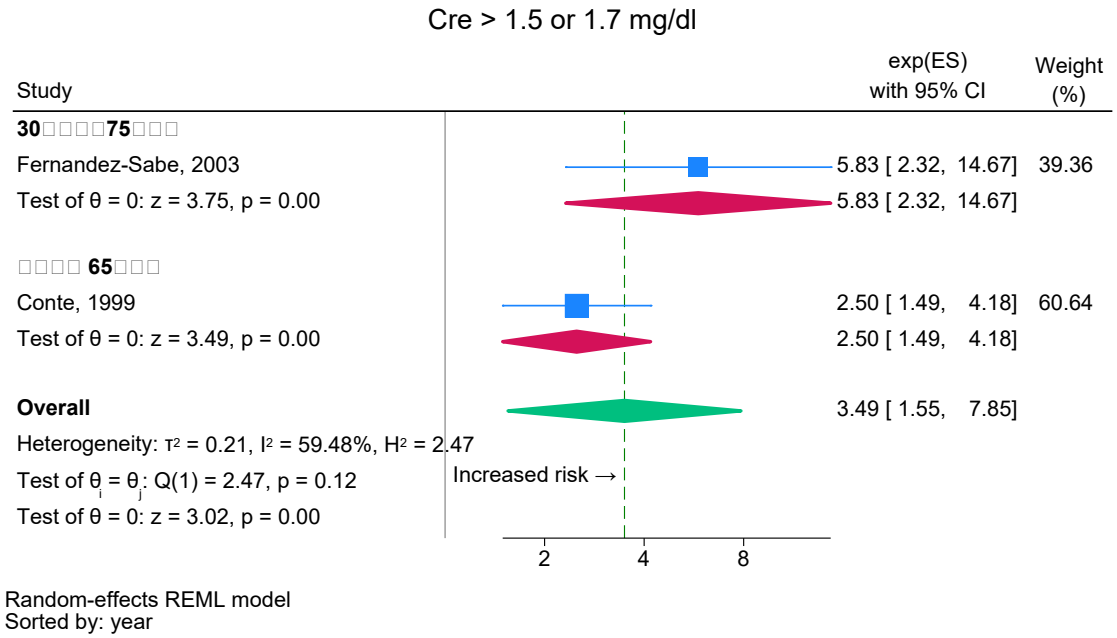


図 Suppl3-14. (Severity/clinical condition) Hypothermia.

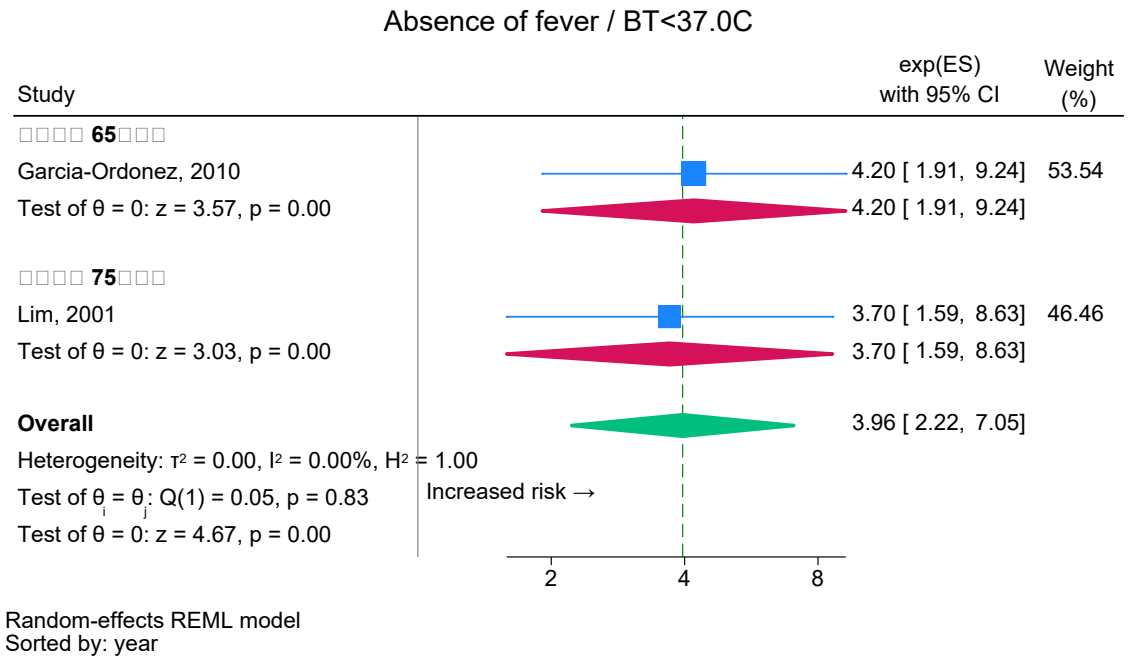
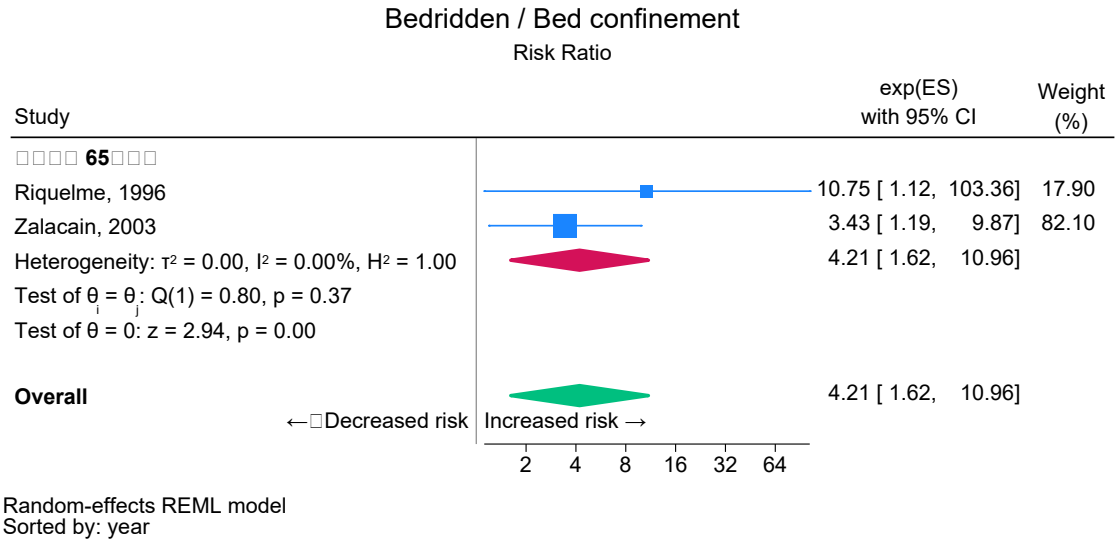
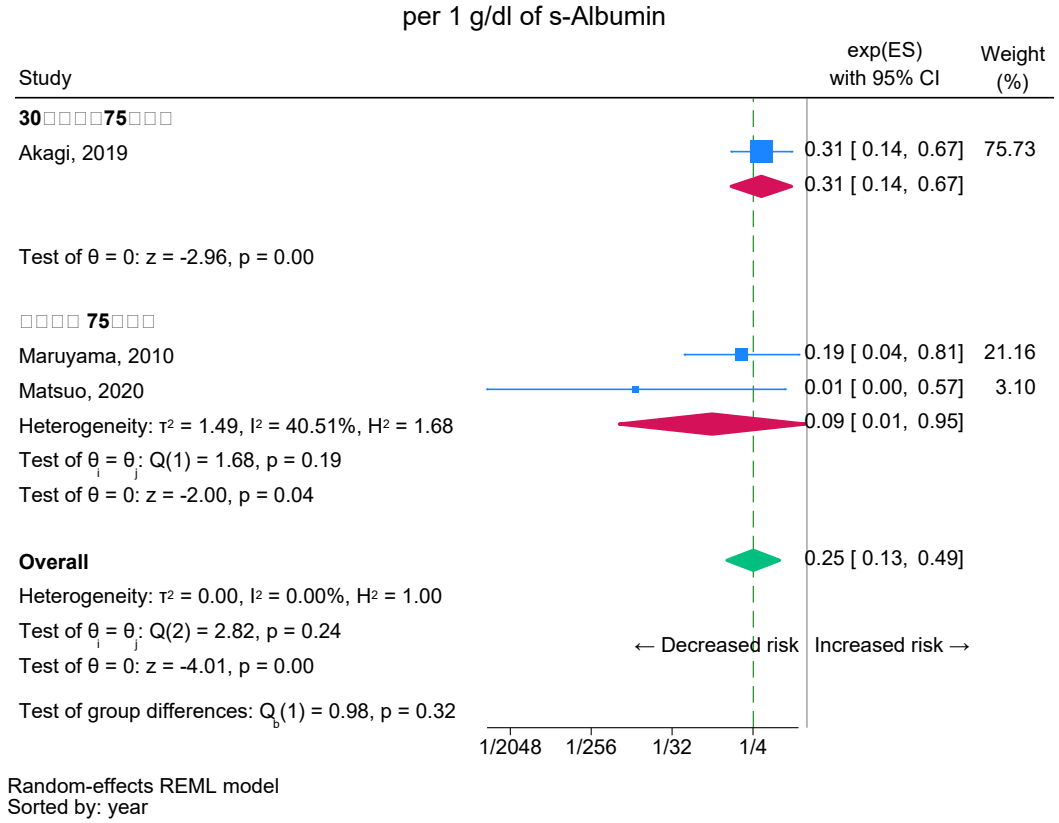


図 Suppl4-1. (Functional status) Bedridden.



SR13　入院を要する高齢者市中肺炎（重症例を除く）の予後因子は何か？

図 Suppl5-1. (Other factors) 1-g/dL increase of serum albumin



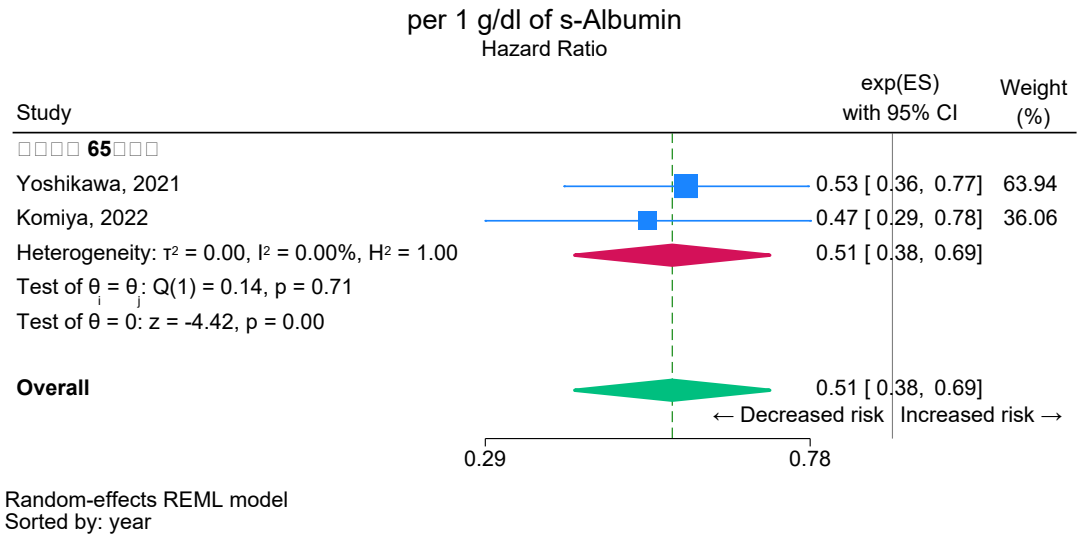
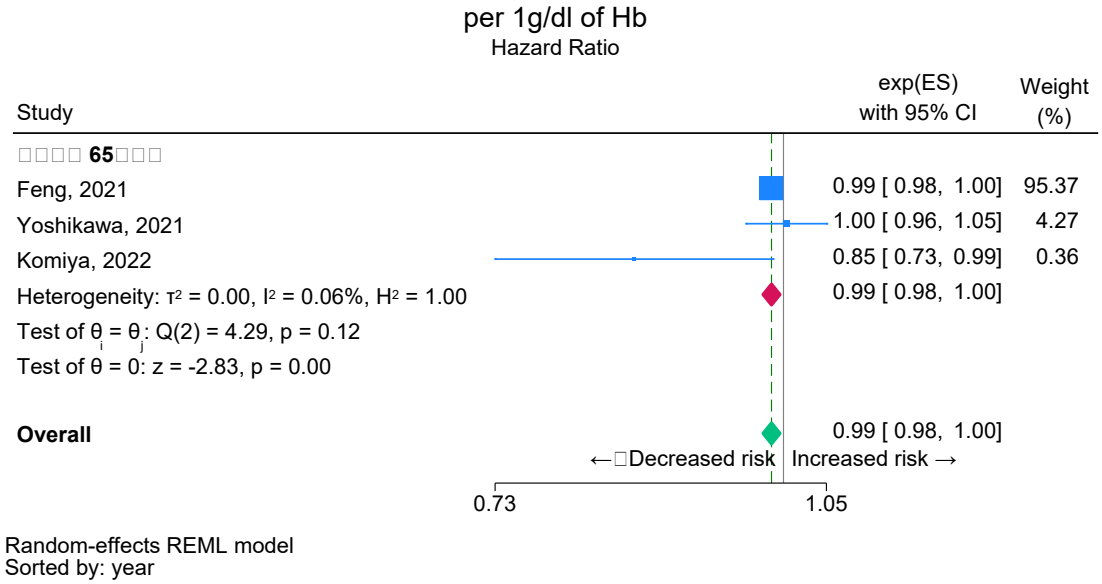
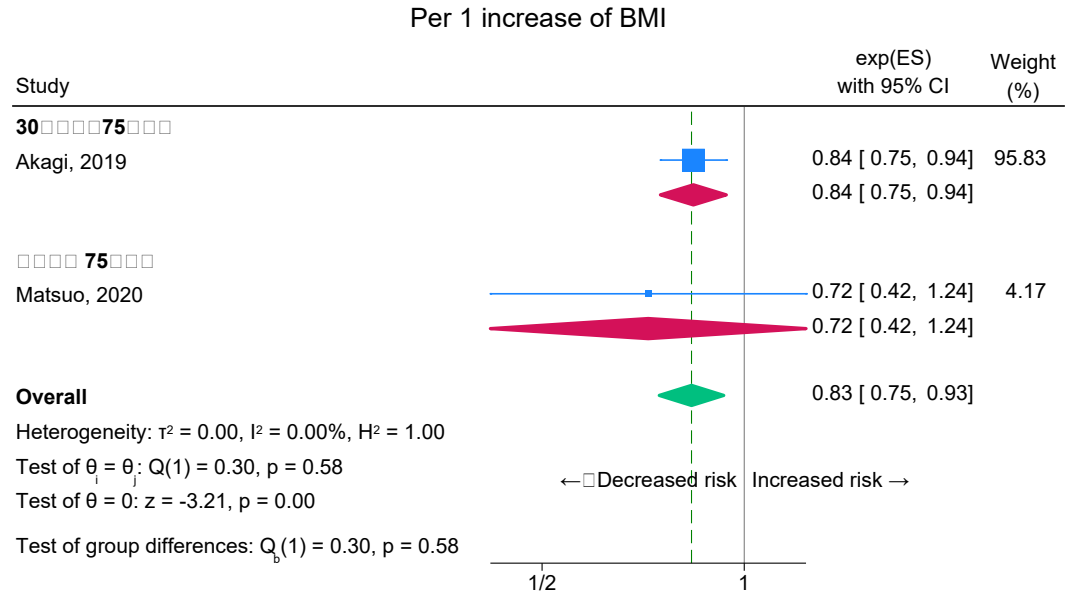


図 Suppl5-2. (Other factors) 1-mg/dL increase of hemoglobin.



Random-effects REML model
Sorted by: year

図 Suppl5-3. (Other factors) 1-point increase of BMI.



Random-effects REML model
Sorted by: year