

NEUMORISK: A MULTIPLATFORM APP TO ASSESS THE INDIVIDUAL RISK OF COMMUNITY-ACQUIRED PNEUMONIA

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Background :

Risk characterization of **community-acquired pneumonia** (CAP) in primary care and an adequate understanding of individual phenotypes could allow the implementation of specific **preventive measures and individualized clinical interventions**.

The aim of the study was to **develop an application that assesses the individual risk of suffering pneumonia**.

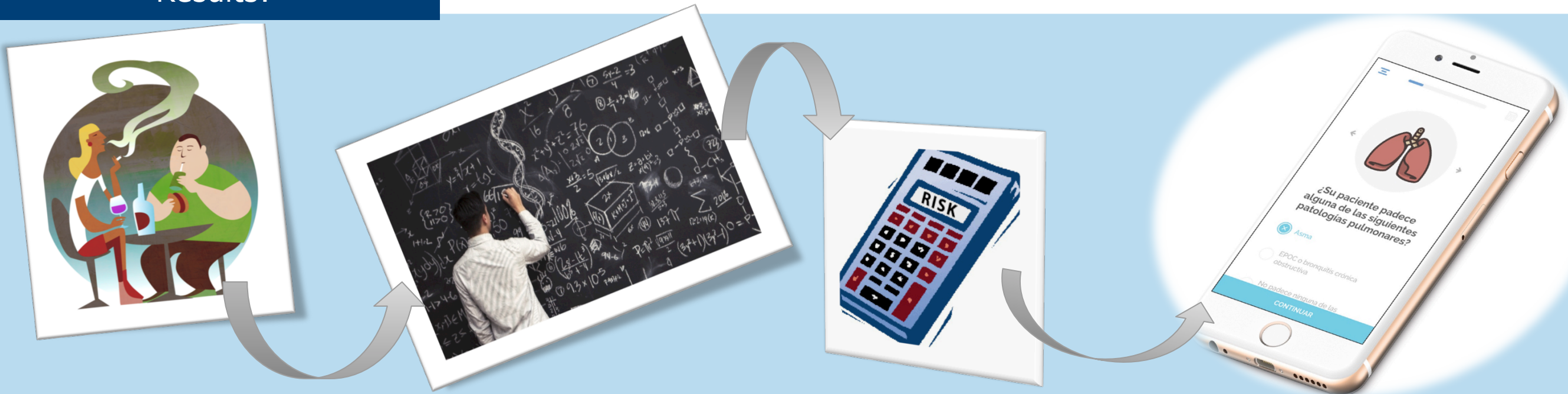


neumorisk

Methods:

This application is **based on mathematical algorithms validated in a retrospective-observational-controlled study** with >28,000 Spanish adult CAP cases diagnosed at primary care in Spain (2009-2013) using the National Surveillance System of Primary Care Data (BiFAP) (*BMC Infect Dis.2016 Nov7;16(1):645*). **Available in web, android and iOS format.**

Results:



25 lifestyle factors and comorbidities identified as risk factors related to CAP, stratified by age and sex, were **analysed**; allowing the **development of a multiplatform application that identifies the individual risk of pneumonia**.



The user responds to **17 test questions**, asked differently depending on the **user profile** (general population or health professional).

The app provides as result a number expressing the **odds ratio of suffering CAP** compared to an age-sex matched subject without any comorbidity

Additionally, the application provides you with a link to **specific practical recommendations on:** vaccination, dietary advice, sports, tobacco, etc. <https://neumoexpertos.org/neumorisk/>

As well as a **link to neumooexpertos (NEP) website:** <https://neumoexpertos.org/quienes-somos/> and documents

More than 7300 people have used it!



Conclusions:

A **multiplatform application that assesses the individual risk of pneumonia was developed** to raise the awareness of CAP and help clinicians identify patients at higher risk of pneumonia and to provide additional recommendations for prevention, including vaccination strategies against CAP.