Legionnaires disease is a late and severe complication occurring in recipients of solid organ transplantation.

What Are the Clinical Manifestations, Radiological Presentation, Risk Factors for Severity, Treatment, and Outcome of Legionnaires Disease in Solid Organ Transplant?

**STUDY DESIGN**

Retrospective, 10-year, multicenter cohort study (France) of Legionnaires disease in patients with solid organ transplant using hospital discharge databases

Diagnosis based on:
- + Respiratory culture
- + Urine antigen test
- + Serology

**RESULTS**

101 patients identified
- 63.4% kidney transplant
- 5.6 years (median) from transplant to Legionnaires disease
- 56% ICU admission (severe Legionnaires disease)

Chest CT scan showed:
- Alveolar consolidation 98%
- Ground-glass opacity 63%
- Macronodules 21%
- Cavitation 8.8%

Severe Legionnaires disease associated with:
- Negative urine antigen at presentation ($P = .047$)
- Lymphopenia ($P = .014$)
- Respiratory symptoms ($P = .010$)
- Pleural effusion ($P = .039$)

Diabetes associated with 12-month mortality

HR 3.2 (95% CI, 1.19 to 8.64)