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Autores	SILVA, ROSÂNGELA APARECIDA MENDES; DE MENDONÇA, REGINA MARIA HOLANDA; DOS SANTOS AGUIAR, SIMONE; YAJIMA, JÚLIA CERVELLINI; MARSON, FERNANDO AUGUSTO LIMA; BRANDALISE, SILVIA REGINA; LEVY, CARLOS EMÍLIO
Autor (es) USF	MARSON, FERNANDO AUGUSTO LIMA
Autores Internacionais	
Programa/Curso (s)	Programa de Pós-Graduação Stricto Sensu em Ciências da Saúde
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Resumo	Among the treatment-related acute toxic effects, risks for bloodstream infections (BSIs) are associated with several variables. The authors carried out a retrospective cohort study with 259 children and adolescents with ALL, treated with the GBTLI-LLA 2009 protocol, in order to assess the incidence of BSIs in the induction phase; to determine the risk factors for these BSIs; and to identify the related microorganisms and sensitivity profile of the microorganisms related to these infections. BSIs were documented in 19.3% of patients. The isolated microorganisms were 39 Gram-negative bacteria, 21 Gram-positive bacteria, and four fungi. There was a statistically significant risk of BSI between the variables: protocol for T-line-derived leukemia (Derived T Protocol) (p = 0.020), oral manifestations (p = 0.015), central venous catheter (p = 0.008), and bladder catheter (p = 0.004). BSI is a frequent event in ALL patients during the induction phase. The identification of these factors can allow the elaboration and improvement of strategies for the intensification of supportive care, prevention, and rapid treatment of infections.
Fomento	