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Risk factors for cytomegalovirus infection in patients with antineutrophil cytoplasmic antibody-associated vasculitis --Manuscript Draft--

death. This study aimed to elucidate risk factors for CMV infection in patients with antineutrophil cytoplasmic antibody-associated vasculitis (AAV). Methods: Patients with AAV who underwent remission induction treatment at Okaya University Hospital between 2006 and 2016 were retrospectively analyzed. The primary outcome was the development of CMV infection within 3 months. Results: Of the 111 patients, 13 (11.7%) patients developed CMV infection. Patients with CMV infection were older (p = 0.030) and had a higher body mass index (p = 0.029) in comparison to those without CMV infection. A higher proportion had a seve form (p = 0.001) and granulomatosis with polyangiitis (GPA) (p = 0.001), as well as a higher Birmingham Vasculitis Activity Score (p = 0.018) and C-reactive protein (p = 0.018) levels at baseline. Using logistic regression analysis, severe form and GPA were independent risk factors (odds ratio [OR] = 9.68, 95% confidence interval [CI] = 1.92-60.23, and OR = 7.46, 95% CI = 1.46-47.60, respectively). In addition, patients with CMV infection were more likely than those without infection to be glucocorticoid related diabetes mellitus (p = 0.025).		
Full Title: Risk factors for cytomegalovirus infection in patients with antineutrophil cytoplasmic antibody-associated vasculitis Short Title: Risk factors for CMV infection in AAV patients Corresponding Author: "Okayama Daigaku Daigakuin Ishiyakugaku Sogo Kenkyuka Igakubu" Okayama, JAPAN "Okayama, JAPAN Keywords: anti-neutrophil cytoplasmic antibody-associated vasculitis; cytomegalovirus; risk factors; Infection Abstract: Aims: Cytomegalovirus (CMV) infection under immunosuppression sometimes cause deviced and relaters with AAV whou underwent remission induction treatment at Okaya University Hospital between 2006 and 2016 were retrospectively analyzed. The primary outcome was the deviced prent of CMV infection nutreatment at Okaya University Hospital between 2006 and 2016 were retrospectively analyzed. The primary outcome was the deviced prent of CMV infection. Patients with CMV infection were tool of and a higher proportion had a sew form (p = 0.001) and granulomatosis with polyangilits (GPA) (p = 0.001), as well as a higher Birmingham Vasculitis Activity Core (n = 0.016) and C-reactive protein [read of 20, 20, and DR = 7.40, 95% CI = 1.40-47.60, respectively. In addition, patients with CMV infection were more likely than those without infection analysis, severe form and OFA were independent risk factors colds ratio (DR = 9.69, 55% confidence interval (CI = 1.92-60.23, and OR = 7.40, 95% CI = 1.40-47.60, respectively. In addition, patients with CMV infection were more likely than those without infection and explore titraval (CI = 1.92-60.23, and OR = 7.40, 95% CI = 1.40-47.60, respectively. In addition, patients with CMV infection were more likely than those utilitatis (GPA) (p = 0.013) and the glucocorticoid related diabet	Manuscript Number:	PONE-D-18-20504R1
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