

# Proadrenomedullin determining clinical severity and analyzing prognostic value for pneumonia

Sir,

Thanks for your interest. As you stated, proadrenomedullin (proADM) is an interesting biomarker, and many researchers studied its value for various physiologic and also pathologic conditions. Many noninfectious situations alter proADM levels, but Kutz *et al.* encourage that “reinforce the concept of using biomarkers in algorithms with widely separated cutoffs despite statistically significant associations of some preanalytic factors and biomarker levels.”<sup>[1]</sup> Our primary aim was to determine and compare proADM with clinical severity scores for pneumonia and validate its value with regard to that of previous studies, at a prospective work. We found no statistical superiority in favor of proADM. In a meta-analysis, Liu *et al.* concluded that proADM sensitivity and specificity – to predict mortality in community-acquired pneumonia – were 0.74 (95% confidence interval [CI]: 0.67–0.79) and 0.73 (95% CI: 0.70–0.77), respectively.<sup>[2]</sup> As a result, there is no sufficient evidence yet to rely on only proADM for pneumonia severity instead of clinical scores as its value was altered by multiple conditions. Eventually combining with other biomarkers and scores is much more promising.

## Financial support and sponsorship

Nil.

## Conflicts of interest

There are no conflicts of interest.

**Sedat Demirsoy, Oguzhan Okutan,  
Zafer Kartaloglu, Dilaver Tas<sup>1</sup>, Omer Ayten,  
Kadir Canoglu**

Department of Pulmonology, Sultan Abdulhamid Han Research Hospital, <sup>1</sup>Department of Pulmonology Baskent University, Istanbul Education and Research Hospital, Istanbul, Turkey

## Address for correspondence:

Dr. Dilaver Tas,  
Department of Pulmonology, Baskent University, Istanbul Education and Research Hospital, Istanbul, Turkey.  
E-mail: dilavertas@gmail.com

## ORCID:

<http://orcid.org/0000-0003-2785-2492>

## References

1. Kutz A, Grolimund E, Christ-Crain M, Thomann R, Falconnier C, Hoess C, *et al.* Pre-analytic factors and initial biomarker levels in community-acquired pneumonia patients. *BMC Anesthesiol* 2014;14:102.
2. Liu D, Xie L, Zhao H, Liu X, Cao J. Prognostic value of mid-regional pro-adrenomedullin (MR-proADM) in patients with community-acquired pneumonia: A systematic review and meta-analysis. *BMC Infect Dis* 2016;16:232.

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

Access this article online	
Quick Response Code:	Website: <a href="http://www.eurasianjpulmonol.com">www.eurasianjpulmonol.com</a>
	DOI: 10.4103/ejop.ejop_94_19

**How to cite this article:** Demirsoy S, Okutan O, Kartaloglu Z, Tas D, Ayten O, Canoglu K. Proadrenomedullin determining clinical severity and analyzing prognostic value for pneumonia. *Eurasian J Pulmonol* 2020;22:71.

**Received:** 08-11-2019 **Accepted:** 08-11-2019

**Published:** 30-04-2020

© 2020 Eurasian Journal of Pulmonology Published by Wolters Kluwer - Medknow