

3.05 Examining the role of bronchoscopy in the investigation and management of *Pneumocystis jirovecii* (PJP) infection in HIV patients – a five year retrospective analysis

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Background: Bronchoscopy is frequently requested to look for evidence of *Pneumocystis jirovecii* (PJP) infection in at-risk immunosuppressed individuals, particularly HIV patients. **Methods:** We looked at all bronchoscopies performed for bronchial washings or bronchoalveolar lavage on patients with HIV in St. James's Hospital over a five year period from 2019-2023. We examined the incidence of PJP infection in this population as related to their baseline characteristics, comorbidities, and virologic control, and how diagnosis of PJP infection via bronchoscopy impacted their clinical management. **Results:** 66 bronchoscopies were performed on 57 individual patients (28% female) over the five year period. PJP was detected in 12 (18%) and other pathogens detected in 29 (44%) patients. All cases of PJP were associated with a CD4 count of <200 cells/microliter. In 7 (58%) of detected cases radiological appearances were typical for PJP infection. There were 3 procedure-related adverse events (4%). In no cases was the clinical management changed as a result of bronchoscopy being performed. **Conclusions:** In our population the use of bronchoscopy to detect PJP infection did not change overall management in any cases. This raises questions regarding the utility of performing bronchoscopy in this patient cohort. **Keywords:** *Pneumocystis jirovecii* (PJP). **Disclosures:** None. **Conflict of Interest:** The authors declare they have no conflict of interest.