

Clinico-mycological profile of cryptococcosis in a tertiary care

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Introduction

Cryptococcosis is a major, fatal, systemic mycosis worldwide.

Objectives

This study was performed to know the spectrum, Clinico-mycological profile and antifungal susceptibility pattern of cryptococcosis (2007-2010)

Material and methods

The samples were processed by standard microbiological methods. Cryptococcal isolates were identified as per standard protocol. The antifungal susceptibility of the isolates was done for amphotericin B, Fluconazole, Itraconazole as per CLSI guidelines.

Results

Cryptococcosis was diagnosed in 51 patients. The cryptococcosis cases include HIV positive patients (42), lymphopenia (1),

neutropenia (1) and apparently immunocompetent (7). Disseminated cryptococcosis was seen in 4 patients. Relapse was seen in 3 cases. Cryptococcal meningitis was the most frequent followed by pulmonary cryptococcosis. Opportunistic infections were seen in 13 cases: candidiasis (7) tuberculosis (4) H1N1 (1), Staphylococcal septicemia (1). All the isolates were sensitive to Amphotericin B, Fluconazole, and Itraconazole. Dissemination, relapse, high mortality was common in HIV positive patients. Relapse/mortality was unlinked to MIC of the drugs. Prognosis depends upon: control of underlying condition, presence of coma at presentations, low yeast burden (LAT d"1:2048)

Conclusion

Routine surveillance is warranted to know the existing and baseline pattern of cryptococcosis. Expedient diagnosis can reduce morbidity and mortality in cryptococcosis.