Management of Invasive Fungal Infections

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Summary
Invasive fungal infections cause significant morbidity and mortality in immunosuppressed patients. While incidence of C. albicans infections has been decreasing in neutropenic cancer patients and non-albicans Candida are on rise; invasive candidiasis has become a significant problem in patients residing in the ICU. Several predictive scores have been developed to diagnose these infections early since any delay in therapy may increase the mortality. Mortality due to invasive aspergillosis in netroplenic cancer patients and in those undergoing haematopoietic stem cell transplantation has decreased during the last 3-5 years. This is mainly due to newer antifungals such as voriconazole and better management stargeies. Prophylactic, empirical and preemptive management strategies are critical and new diagnostic tools (e.g. high-resolution CT scan, serum galactomannan and beta-glucan levels) may lead to early diagnosis. Non-aspergillus mold infections have gained importance during the last decade and their incidence has steadily been increasing. Mortality due to these fungal infections are higher than invasive aspergillosis and delayed diagnosis and therapy may increase the rate of mortality.

Despite the fact that we have witnessed a significant improvement in both diagnostic and therapeutic modalities of invasive fungal infections, there are still many unanswered questions for better diagnostic and management strategies.

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