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ePoster Viewing

Mycology

Estimating the burden of serious fungal diseases in Chile

E. Alvarez Duarte¹, D.W. Denning²

¹University of Chile - Mycology unit - Filamentous Fungal Section, Santiago de Chile, Chile

²The National Aspergillosis Centre in association with the LIFE program at www.LIFE-Worldwide.org- The University of Manchester, Manchester, United Kingdom

Background. We aimed to estimate the burden of fungal infections in Chile, which is presently not known.

Objectives. We estimated the incidence and prevalence of fungal diseases in Chile based on the size of the populations at risk and available epidemiological databases to indicate the national burden of these conditions.

Methods. Data derived from The Organization for Economic Co-operation and Development (OECD), World Health Organization (WHO), The Joint United Nations Programme on HIV/AIDS (UNAIDS), Chilean Ministry of Health, The Public Health Institute of Chile and local reports published were used in the present study. When no data existed, risk populations were used to estimate frequencies of fungal infections, using previously described methodology by LIFE.

Results. The population of Chile is around to 17,000,000; 23% are children, and 16% are women >60. Recurrent vulvovaginal candidiasis (>4 episodes/year) is estimated to occur in 3252/100,000; maybe the lowest rate in Latin America. Using a low international average rate of 5/100,000, we estimate 889 cases, and 133 patients with intra-abdominal candidiasis. Due the low incidence of pulmonary tuberculosis (TB) in Chile, and the access of treatment, few patients with chronic pulmonary aspergillosis are likely – a total of 1,205, 25% following TB. Invasive aspergillosis is estimated to affect 297 patients following leukaemia therapy, transplantation and COPD, ~1.67/100,000. In addition, ABPA and SAFS were estimated in around to 97.6/100,000 and 127/100,000 respectively, in 664,261 adult asthmatics and 3,400 CF patients. Given a 38,000 HIV population, with around to 2,189 new cases of AIDS annually, cryptococcal meningitis and *Pneumocystis* pneumonia are estimated at 0.12/100000 and 4.3/100,000.

Conclusions. The present study indicates that around to 2% (350,000) of the population is affected by fungal infections. Due the lack of data, reports and statistics, the number of patients with mycoses in Chile can only be estimated. However, the fungal burden in Chile seems to be one of the lowest in Latin America. Further epidemiological studies are needed to validate and extend these estimates.

Infection	Number of infections per underlying disorder per year					Total burden	Rate /100K
	None	HIV/AIDS	Respiratory	Cancer/Tx	ICU		
Oesophageal candidiasis	-	4,150	-	-	-	4,150	23
Candidaemia	-	-	-	622	267	889	5
Candida peritonitis	-	-	-	-	133	133	0.8
Recurrent vaginal candidiasis (4x/year +)	289,014	-	-	-	-	289,014	3252
ABPA	-	-	17,345	-	-	17,345	97,6
SAFS	-	-	22,581			22,581	127
Chronic pulmonary aspergillosis	-	-	1,215	-	-	1,215	25
Invasive aspergillosis	-	-	-	138	159	297	1.7
Cryptococcal meningitis	-	22	-	-	-	22	0.12
Pneumocystis pneumonia	-	766	-	-	-	766	4.3
Total burden estimated						~349,915	