Candida - Drug Susceptibility

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Dear sir,

Pathogenic yeasts from the genus candida are now recognized as major agents of hospital acquired (nosocomial) infections. There were reports of marked increase in the incidence of treatment failures in candidiasis patients receiving long-term antifungal therapy, which has posed a serious problem in its successful use in chemotherapy¹. Here, we present antifungal susceptibility study on candida isolates from urinary tract infection (UTI) patients. Total 35 candida strains were isolated from community acquired and nosocomial UTI patients. They were speciated and subjected to disk diffusion antifungal susceptibility testing.² The results are shown in Table 1.

None of the candida isolates showed resistance to any of the antifugal agent tested. We should be vigilant for drug resistance in candida in this era of HIV infection. Antifungal susceptibility testing in candida is a simple method and very much in the purview of small set up microbiology laboratory.

David	C. albicans		C. glabrata		C. parapsilosis		C. tropicalis		C. kruse		Total	
Drugs	CA n = 7 (%)	Noso. n = 15 (%)	CA n = 2 (%)	Noso. n = 3 (%)	CA n = 1 (%)	Noso. n = 3 (%)	CA n = 1 (%)	Noso. n = 2 (%)	CA n = 0	Noso. n = 1 (%)	CA n = 11 (%)	Noso. n = 24 (%)
Fluconazole	0	0	0	0	0	0	0	0	-	-	0	0
Voriconazole	0	0	0	0	0	0	0	0	-	0	0	0
Caspofungin	0	0	0	0	0	0	0	0	-	0	0	0
CA – Communit	tv acqui	red No	$s_0 = N_0$	socomi	al [*] - Intri	nsically re	sistant t	o flucon	azole	•	•	

Table 1. Antifungal resistance amongst	t candida isolates (n =35)
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References:

- Mishra NN, Prasad T, Sharma N, Payasi A, Prasad R, Gupta DK, Singh R . Pathogenicity and drug resistance in Candida albicans and other yeast species. A review. Acta Microbiol Immunol Hung 2007 54:201-35.
- 2. Clinical and Laboratory Standards Institute. Zone diameter interpretive standards and

corresponding minimal inhibitory concentration (MIC) interpretive breakpoints. Supplement M44-S3. Clinical and Laboratory Standards Institute (CLSI) 2009, Wayne, PA.

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