To characterize the epidemiology of candidemia in a hospital setting in Costa Rica” Villalobos et al (2016).

Abstract:

BACKGROUND: Invasive Candida bloodstream infections are frequent and display high mortality in clinical practice. There is scarce published on this topic in Central America.

OBJECTIVE: To characterize the epidemiology of candidemia in a hospital setting in Costa Rica.

METHODS: 210 cases of nosocomial candidemia were analyzed in patients over 17 years of age, admitted to Hospital Mexico, between 2007 and 2011. Descriptive and temporary analyses were performed and the risk factors associated with C. parapsilosis and survival were evaluated.

RESULTS: The incidence rate of candidemia was 1.47 cases per 1,000 admissions. The non-albicans Candida represented 62% of the isolated yeasts. Except for 2009, C. parapsilosis was the most commonly isolated species in four out of the five years reviewed, followed by C. albicans. There was a strong association between C. parapsilosis, the presence of a central
venous catheter (OR: 4.8, CI 95%: 1.8-14.6, p < 0.001) and the use of parenteral nutrition (p: 0.008). The 30-day mortality was 50%. Candida albicans displayed the highest mortality and C. parapsilosis the lowest. Patients who did not receive anti-fungal treatment showed a significantly higher probability of death.

CONCLUSIONS: The high incidence of candidemia from C. parapsilosis is directly related to the use of central venous catheters and parenteral nutrition. There is a need for creating local guidelines addressing the use of central venous catheters and parenteral nutrition, as well as implementing hand hygiene protocols.

Full Text
Reference:

Thank you to our partners for supporting IVTEAM