

The Lebanese LSICDM

Correlation between antifungal consumption and distribution of *Candida spp.* in different departments of a Lebanese hospital

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Abstract

Introduction: Recently there has been a significant increase in the incidence of fungal infections attributed to *Candida* species worldwide, with a major shift toward non-albicans Candida (NAC). Herein, we described the distribution of Candida species among different departments in a Lebanese hospital and calculated the antifungal consumption in this facility. We, then, correlated the consumption of antifungals and the prevalence of Candida species.

Methodology: This was a retrospective study of *Candida* isolates recovered from the hospital microbiology laboratory database between 2010 and 2015. Data on antifungal consumption between 2008 and 2015 were extracted from the hospital pharmacy database. Spearman's coefficient was employed to find a correlation between *Candida* species distribution and antifungal consumption.

Results: The highest antifungal consumption was seen in the haematology/oncology department (days of therapy/1000 patient days = 348.12 ± 85.41), and the lowest in the obstetrics department (1.36 ± 0.47). The difference in antifungal consumption among various departments was statistically significant (p < 0.0001). Azoles were the most common first-line antifungals. A non-homologous distribution of *albicans* vs. non-albicans was noted among different departments (p = 0.02). The most commonly isolated NAC was Candida glabrata, representing 14% of total isolates and 59% of NAC. The total antifungal consumption correlated positively with the emergence of NAC. The use of azoles correlated positively with Candida glabrata, while amphotericin B formulations correlated negatively with it. None of these correlations reached statistical significance.

Conclusion: Different Candida species were unequally distributed among different hospital departments, and this correlated with consumption of antifungals in respective departments, highlighting the need for antifungal stewardship.

Key words: antifungal; *Candida* species; consumption; critical care; obstetrics; oncology.

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