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Chinese consensus on the diagnosis and management of adult candidiasis

Chinese Adult Candidiasis Diagnosis and Management Expert Consensus Group

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Summary In this consensus we mainly present the etiology, epidemiology, risk factors, microbiology, clinical diagnosis and general principles of treatment, as well as the detailed diagnosis and treatment of common candidiasis. Though mucocutaneous candidiasis such as oral, esophageal and vulvovaginal infections are known as non invasive diseases, they are included in this consensus, considering their high prevalence and the potential to be the source of systematic infections. In order to be accordant with the practical situation in China, new technologies and drugs that have not been well developed or routinely applied are not recommended in this consensus. As to the differences from foreign guidelines, we address the

GRADE—Grades of Recommendation Assessment Development and Evaluation

invasive candidiasis

1

Meta

2

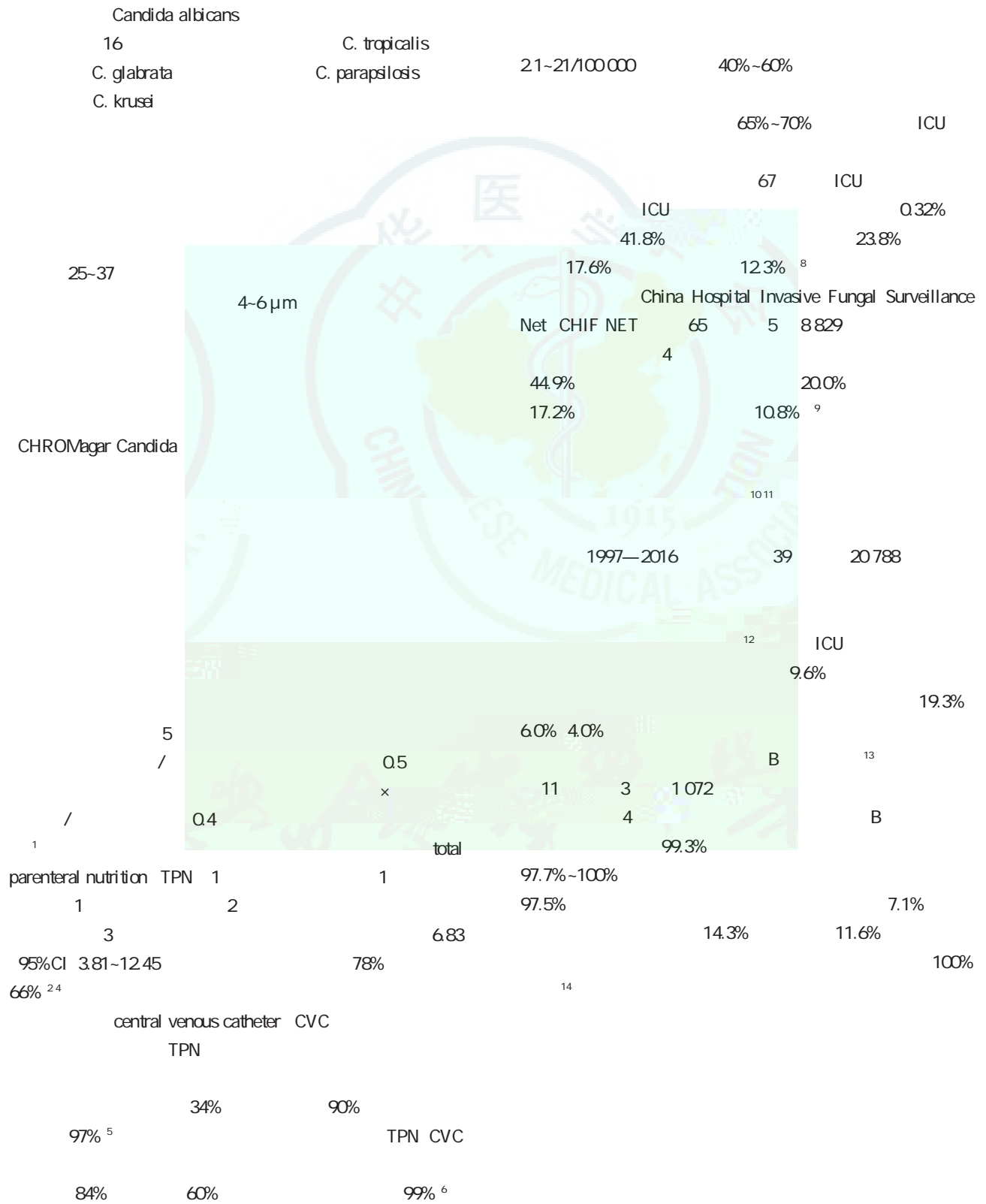
3

1

2

3

Playford ⁷ ICU



	values	ECVs	CLSI M59 2018	M60 2017
1.	1	1617		

1

2

2

3

DNA

matrix- assisted laser desorption ionization time of flight mass spectrometry MALDI TOF MS

3-5 min

3.

breakpoints RPMI 1640 clinical /
pharmacokinetics/pharmacodynamics PK/PD

Clinical and Laboratory Standards Institute CLSI

CLSI M27 2017

15

epidemiological cut off

HE	/ mNGS PAS	GMS	TPN	G
				1
possible				2
probable				
3	proven			
	/			
19 22				
21%~71% ²³	G			
		76.8%		85.3% ²⁴

30

31

24 h

2S 1

2h

30h

48h ^{51 52}

B

disseminated candidiasis

acute disseminated candidiasis

64 2 B 5-10µg/0.1 ml
100µg/0.1 ml 3-4 1 70
U'P1J- ä 3lp 6 <ä &!L ä) (

intra abdominal candidiasis

/

20%~70%

27 65 1
24h

2
3

G

20%~40% 66

G

10-14d

3~

5 d
67

Candida endophthalmitis

68

69

27

27

30%~50%

central nervous system

candidiasis

B 0.5-0.7 mg kg⁻¹·d⁻¹
400mg/d 6 mg/

kg 6-12 2

G

79

mNGS⁸⁰

81 82

B 0.5-0.7 mg kg⁻¹·d⁻¹

B

400-800

mg 6-12mg/kg

B

B

B

B

B

3/4

B

6

B

400-800mg

2

4

86 88

B

B

3-6

12

83 1

mucosal candidiasis

2

3

1.

4

89

AIDS

Candida osteomyelitis

Candida septic arthritis

1%~4%

0.2%

70%

10

/ml

4

4-6 ml

7-14 d

200-400mg/d

14-

28 d

200 mg

1

84 85

200~400 mg

2

3 d

1

14-28 d

3d

2

200mg/d

4

B

400mg

400mg/d

4

200

ESR CRP

MRI

100mg/ml

4

200

CT

mg/

2

B 0.3mg kg⁻¹·d⁻¹

3 100mg CT
 AIDS
 HIV 92
 2

B B

mg 14-21 d
 mg/d
 d¹ 200-400
 400
 B 0.3-0.7 mg kg¹· d¹ 93
 B 3 100- B 0.3-0.6 mg kg¹· d¹ 400 mg/d
 200mg AIDS HIV 90 mg/d 2 200-300
 3 4 7-14 d B 0.3-0.6 mg kg¹· d¹ 1-7 d
 100 3 50- B 50mg/L 5d
 4. 200-400mg/d 2
 B 0.3-0.6 mg kg¹· d¹ 1-7 d 94

B 25-50 mg 200-500 ml
 95
 cutaneous candidiasis

150mg 90%
 2-3 3 150mg
 600mg 14 d
 10 14 d

150mg 6 10-14 d
 2 3d 100-200mg 6 91 200mg 1-2 1-2
 5.

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