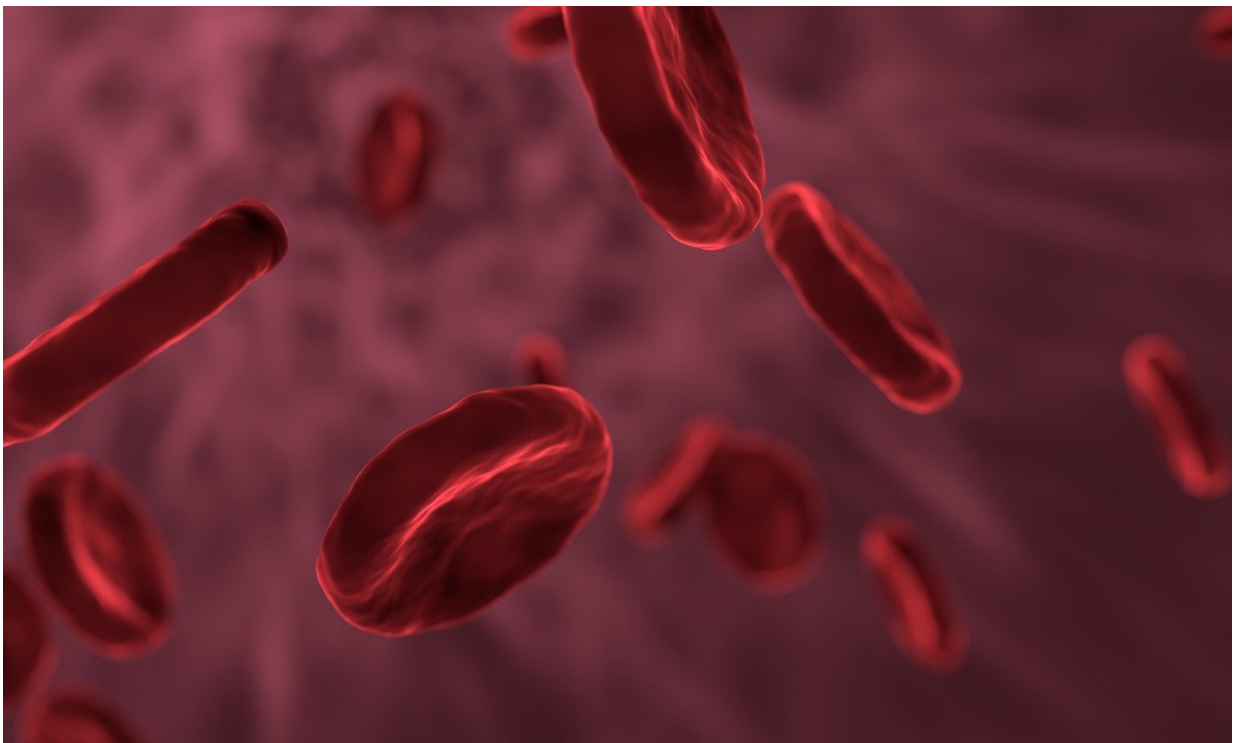


Infectious disease consultation significantly reduces mortality of patients with bloodstream yeast infections

October 17 2018, by Savannah Koplon



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In a retrospective cohort study conducted at the University of Alabama at Birmingham Division of Infectious Diseases, patients with candidemia—a yeast infection in the bloodstream—had more positive

outcomes as they relate to mortality when infectious disease consultation, or IDC, occurred during their hospital stay.

"Candidemia has mortality rates as high as 50 percent, and we wanted to better understand the impact that infectious disease consultation in hospitalized patients can have, specifically as it relates to survival rates and guideline adherence," said Rachael Lee, M.D., lead author of the study and assistant professor in UAB's Division of Infectious Diseases.

The study, published in *Clinical Infectious Diseases*, looked at outcomes of 145 patients hospitalized with candidemia at UAB Hospital from Jan. 1, 2015, to July 31, 2016. Some 111 patients received IDC, while the other 39 did not.

Findings determined that 30-day, 60-day and overall inpatient [mortality rates](#) were significantly lower in IDC patients, and there was an increased adherence to [clinical practice guidelines](#). In addition, patients with IDC were 66 percent less likely to die within 30 days compared to those without IDC. Data also indicated that IDC may benefit even critically ill patients with high APACHE II scores, which determines ICU mortality.

Furthermore, early IDC can help patients get on an antifungal therapy more quickly, which has been shown to lead to better outcomes.

"It has been well-established that ID consultation is associated with improved survival in *Staphylococcus aureus* bloodstream infections, and the findings in this study are similar and reassuring," Lee said. "Here at UAB, we have instituted the practice of automatic IDC for patients with candidemia, and while we know that future studies are needed, we believe that patients with candidemia can only benefit from receiving IDC, especially early on in their hospitalization."

More information: Rachael A Lee et al. Impact of Infectious Disease Consultation on Clinical Management and Mortality in Patients with Candidemia, *Clinical Infectious Diseases* (2018). [DOI: 10.1093/cid/ciy849](https://doi.org/10.1093/cid/ciy849)

Provided by University of Alabama at Birmingham

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