**TITLE:** ASSOCIATED RISK FACTORS TO DEATH IN PATIENTS WITH CANDIDEMIA IN A TERTIARY CARE HOSPITAL IN UBERLÂNDIA-MG:

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## **ABSTRACT:**

Candidemia is a bloodstream infection caused by yeasts of the *Candida* genus, a severe disease with high mortality rates that range from 40% to 60%. The objective of the present study was to evaluate frequencies of *Candida* species and the risk factors associated with death in a tertiary hospital in Uberlandia - MG. This retrospective study reviewed medical records of patients including data obtained in the Microbiology Laboratory of the hospital. The univariate analysis was performed by chi-square test and student's t test. Multivariate statistical analysis was performed by multiple logistic regression. The study included patients admitted between January 2011 and December 2015, with at least one blood culture tested positive for Candida sp. after 48 hours of hospitalization. A total of 198 patients presented candidemia, out of which, 92 (46.47%) were discharged, and 106 (53.53%) have died. Considering the latter 106 patients, three comorbidities were more frequently: hypertension – 35 patients (33%), neoplasia – 27 patients (25.5%) and diabetes - 18 patients (17%). The species identified in this study ranked as follows: C. albicans - 92 cases (44.2%), C. tropicalis - 45 cases (21.6%), C. parapsilosis complex - 40 cases (19.3%), C. glabrata - 17 cases (8.2%), C. krusei - 9 cases (4.3%), and others (2.4%). While patients were hospitalized, they received antimicrobial therapy before the blood culture positivity was obtained (15 days before), the most frequently were: cephalosporin 129 (65.2%), glycopeptides 127 (64.1%) and carbapenems 104 (52.5%). The most frequently-used antifungal treatment by patients in the fatal cases was fluconazole 90 (84.9%). The following death-related risk factors were statistically significant in the univariate analysis: neoplasia (p: 0.0366; OR: 2.22), hemodialysis (p: 0.0000; OR: 10.30) and age > 58 years old (p: 0.0000; OR: 1.04). Regarding the multivariate analysis, age > 58 y. o. (p: 0.0000; OR: 1.03) and hemodialysis (p: 0.0000, OR: 6.39) were considered significant factors for death. We conclude that the most frequently isolated species were C. albicans, C. tropicalis and C. parapsilosis complex, and the multiple logistic regression analysis revealed that advanced age (> 58 years old) and the need for hemodialysis were independent factors associated with mortality.

**Keywords:** Candida; Candidemia; Risk factors

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