

Clinical Practice Guideline for the Management of Candidiasis: 2016 Update by the Infectious Diseases Society of America

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It is important to realize that guidelines cannot always account for individual variation among patients. They are not intended to supplant physician judgment with respect to particular patients or special clinical situations. IDSA considers adherence to these guidelines to be voluntary, with the ultimate determination regarding their application to be made by the physician in the light of each patient's individual circumstances.

Keywords. candidemia; invasive candidiasis; fungal diagnostics; azoles; echinocandins.

EXECUTIVE SUMMARY

Background

Invasive infection due to *Candida* species is largely a condition associated with medical progress, and is widely recognized as a major cause of morbidity and mortality in the healthcare environment. There are at least 15 distinct *Candida* species that cause human disease, but >90% of invasive disease is caused by the 5 most common pathogens, *C. albicans*, *C. glabrata*, *C. tropicalis*, *C. parapsilosis*, and *C. krusei*. Each of these organisms has unique virulence potential, antifungal susceptibility, and epidemiology, but taken as a whole, significant infections due to these organisms are generally referred to as invasive candidiasis. Mucosal *Candida* infections—especially those involving the oropharynx, esophagus, and vagina—are not considered to be classically invasive disease, but they are included in these guidelines. Since the last iteration of these guidelines in 2009 [1], there have been new data pertaining to diagnosis, prevention, and treatment for proven or suspected invasive candidiasis, leading to significant modifications in our treatment recommendations.

Summarized below are the 2016 revised recommendations for the management of candidiasis. Due to the guideline's relevance to pediatrics, the guideline has been reviewed and

endorsed by the American Academy of Pediatrics (AAP) and the Pediatric Infectious Diseases Society (PIDS). The Mycoses Study Group (MSG) has also endorsed these guidelines. The panel followed a guideline development process that has been adopted by the Infectious Diseases Society of America (IDSA), which includes a systematic method of grading both the quality of evidence (very low, low, moderate, and high) and the strength of the recommendation (weak or strong) [2] (Figure 1). [3] The guidelines are not intended to replace clinical judgment in the management of individual patients. A detailed description of the methods, background, and evidence summaries that support each recommendation can be found in the full text of the guideline.

1. What Is the Treatment for Candidemia in Nonneutropenic Patients? Recommendations

1. An echinocandin (caspofungin: loading dose 70 mg, then 50 mg daily; micafungin: 100 mg daily; anidulafungin: loading dose 200 mg, then 100 mg daily) is recommended as initial therapy (*strong recommendation; high-quality evidence*).
2. Fluconazole, intravenous or oral, 800-mg (12 mg/kg) loading dose, then 400 mg (6 mg/kg) daily is an acceptable alternative to an echinocandin as initial therapy in selected patients, including those who are not critically ill and who are considered unlikely to have a fluconazole-resistant *Candida* species (*strong recommendation; high-quality evidence*).
3. Testing for azole susceptibility is recommended for all bloodstream and other clinically relevant *Candida* isolates. Testing for echinocandin susceptibility should be considered in patients who have had prior treatment with an echinocandin and among those who have infection with *C. glabrata* or *C. parapsilosis* (*strong recommendation; low-quality evidence*).

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