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论著

艾滋病患者深部真菌感染菌群分布及其耐药性

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摘要：

目的探讨医院住院艾滋病患者深部真菌感染的病原菌特性及其对常用抗真菌药物的敏感度，为临床治疗选用药物提供参考依据。方法采用Bact /ALERT 3D120血培养仪进行真菌培养和检测。根据菌落生长特征，用YBC鉴定卡进行菌种的鉴定与分析；ATB FUNGUS 3 试条进行真菌临床敏感性测定。结果从2 868份不同标本中培养分离出208株深部真菌，不同阳性标本分离菌株构成比依次为：痰34.13%（71株），脑脊液27.40%（57株），血12.50%（26株），粪10.10%（21株），骨髓7.21%（15株），尿4.81%（10株），其他部位标本3.85%（8株）。14例危重患者在多部位分离出2～3种不同种类真菌。208株真菌中，构成比居前5位者分别为：新生隐球菌34.13%（71株），白假丝酵母菌33.65%（70株），马内菲青霉菌14.90%（31株），光滑假丝酵母菌5.77%（12株），热带假丝酵母菌3.85%（8株）。新生隐球菌、白假丝酵母菌对两性霉素B及5氟胞嘧啶非常敏感（敏感率90.63%～100.00%）；白假丝酵母菌、光滑假丝酵母菌及热带假丝酵母菌对氟康唑与伏立康唑显示45.45%～57.82%的耐药。马内菲青霉菌对两性霉素B及伊曲康唑敏感，敏感率分别为95.80%、84.10%。结论艾滋病患者深部真菌感染病原菌较正常人群分布特殊，加强艾滋病患者不同部位病原标本的送检及监测，对临床合理使用抗真菌药物，减少耐药真菌的产生有特别意义。

关键词： 艾滋病 真菌感染 抗药性 微生物 医院感染 抗真菌药物

Species and drug resistance of fungi causing deep infections in AID patients

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Abstract:

ObjectiveTo explore the characteristics and drug sensitivity of fungi causing deep fungal infections in AIDS patients, so as to provide evidence for clinical choice of drugs.MethodsFungi were cultured and tested by Bact /ALERT 3D120 blood culture system, and were identified and analyzed by Yeast Biochemical Card (YBC card) according the colony growth characteristics; sensitivity of fungi to antifungal drugs were detected by ATB FUNGUS 3 strip.ResultsTwo hundred and eight fungal strains were isolated from 2 868 different specimens, the constituent ratios of fungi positive specimens were as follows: sputum 34.13% (71 isolates), cerebrospinal fluid 27.40% (57 isolates), blood 12.50% (26 isolates), excrement 10.10% (21 isolates), bone marrow 7.21% (15 isolates), urine 4.81% (10 isolates), and the other sites 3.85% (8 isolates). Fourteen critically ill patients were isolated 2-3 different strains from multiple sits . Among all isolates, the top five constituent ratios were Cryptococcus neoformans 34.13% (71 isolates), Candida albicans 33.65% (70 isolates), Penicillium marneffei 14.90% (31 isolates),Candida glabrata 5.77% (12 isolates), and Candida tropicalis 3.85% (8 isolates). Cryptococcus neoformans and Candida albicans were highly sensitive to amphotericin B and 5 fluorocytosin (sensitive rate was 90.63%-100.00%); 45.45%-57.82% of Candida albicans, Candida glabrata and Candida tropicalis were resistant to fluconazole and voriconazole. Penicillium marneffei was sensitive to amphotericin B and itraconazole, sensitive rate was 95.80% and 84.11% respectively . ConclusionDeep fungal infection is specially distributed among AIDS patients. In order to use anti fungal drugs rationally and reduce the emergence of resistant strains, it is important to strengthen the detection and surveillance of pathogens from samples at different sites of AIDS patients.

Keywords: acquired immunodeficiency syndrome fungal infection drug resistance,microbial nosocomial infection; antifungal agent

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