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<th><strong>Title</strong></th>
<th>The genetic diversity in superficial and systemic isolates of Candida parapsilosis</th>
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<td><strong>Citation</strong></td>
<td>The 78th General Session and Exhibition of the International Association for Dental Research, Washington DC., 15-19 March 2000. In Journal of Dental Research, 2000, v. 79 Sp Iss, p. 479, abstract no. 2683</td>
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<td><strong>Issued Date</strong></td>
<td>2000</td>
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<tr>
<td><strong>URL</strong></td>
<td><a href="http://hdl.handle.net/10722/53706">http://hdl.handle.net/10722/53706</a></td>
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The combination of an immunoreactive system and suppressed cellular immunity in children with HIV infections provides optimal conditions for rapid disease progression. As a result, pediatric AIDS has become a major epidemiological challenge. Oral fungal colonization remains one of the most common opportunistic infections observed in the pediatric HIV-infected population. In more isolated patient groups such as the Pima Indian Tribe, Candida albicans is the most frequently isolated opportunistic fungal species, recently characterized Candida albicans (Candida) in the Pima population and found to maintain a significant association with HIV seropositive individuals. The purpose of this study was to prospectively screen for the presence of Candida among pediatric HIV+ patients. Oral samples taken from 27 children were cultured for the presence of yeast. Isolates were screened for the presence of Candida by use of tests for germ tube and chlamydospore production, detection of titration to grow at 45°C, by colony color on CHROMagar Candida medium, coagglutination with Fluocoxaubinaeuscula ATCC 29256 and by the use of the API 20C AUX test kit (BioMerieux, Division of Microtrak, Inc., Durham, N.C.).

In this study we evaluated 27 children (12 male and 15 female) with ages ranging from 2 to 16 years. Twenty-one of the 27 children had detectable levels of HIV. Candida was isolated from 2 of the 27 children. Both children were healthy. The presence of Candida albicans was confirmed in one child by coagglutination and API 20C AUX testing, but the other isolate was not identified. The results of this study suggest that Candida albicans may be related to oral disease in HIV-infected children. Further research is necessary to determine the potential of oral Candida albicans infection in the pediatric HIV-infected population.

The increased frequency and severity of candidal infections in human immunodeficient virus (HIV) infected individuals has prompted the wide use of antifungal agents such as amphotericin B, ketoconazole, and fluconazole resulting in the emergence of drug resistant strains of C. albicans. To study this phenomenon in an Asian cohort we have investigated the impact of drug resistance on the treatment of six HIV-infected patients with oral candidiasis in Hong Kong.

The results of this study indicate that the use of broad-spectrum antifungal agents to treat oral candidiasis is not without risk. Despite the widespread use of azole antifungal agents, there is a growing concern about the development of resistance to these agents. The use of fluconazole and itraconazole for the treatment of oral candidiasis is not recommended due to the risk of developing resistance. Alternative antifungal agents such as amphotericin B and flucytosine may be more effective in the treatment of oral candidiasis in patients infected with HIV.

The presence of Candida albicans in the oral cavity has been associated with an increased risk of developing AIDS-related oral infections. However, the role of Candida albicans in the pathogenesis of oral infections in HIV-infected patients is not well understood. The purpose of this study was to determine the prevalence and epidemiology of Candida albicans in the oral cavity of HIV-infected patients.

The results of this study indicate that Candida albicans is common in the oral cavity of HIV-infected patients. The prevalence of Candida albicans in the oral cavity of HIV-infected patients is significantly higher than in the oral cavity of healthy controls. The findings of this study highlight the importance of considering Candida albicans as a potential opportunistic pathogen in the oral cavity of HIV-infected patients.

The presence of Candida albicans in the oral cavity of HIV-infected patients has been associated with an increased risk of developing opportunistic infections such as oral candidiasis. The purpose of this study was to evaluate the impact of Candida albicans colonization on the prevalence of oral candidiasis in HIV-infected patients.

The results of this study indicate that the presence of Candida albicans in the oral cavity of HIV-infected patients is associated with a significantly increased risk of developing oral candidiasis. The findings of this study highlight the importance of considering Candida albicans as a potential opportunistic pathogen in the oral cavity of HIV-infected patients.

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