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FUNGEMIA AT A LARGE ACADEMIC HOSPITAL: A RETROSPECTIVE EPIDEMIOLOGICAL STUDY. (A1), Joanne Lee, Meganne Kanatani. Ronald Reagan University of California, Los Angeles Medical Center, Los Angeles, CA, (jcelee@mednet.ucla.edu). IRB approval received.

The incidence of invasive fungal infections and associated causes has been steadily increasing over the past two decades. Antifungal use has also risen, leading to a shift in the epidemiology and susceptibility patterns of fungal pathogens. At the Ronald Reagan University of California, Los Angeles Medical Center (RRUCLAMC), the use of fluconazole increased by 140% between 2002 and 2008, and the use of caspofungin, voriconazole, and posaconazole has also risen dramatically. To assess the impact of this increased utilization, this study evaluated the incidence and susceptibilities of invasive fungal infections in patients at RRUCLAMC. A retrospective chart review was conducted of all positive fungal blood isolates (n = 210) between January 2007 and December 2008. Data were collected by reviewing electronic medical records. Susceptibility testing results were provided by the RRUMC Clinical Microbiology Laboratory. Associated patients were examined for risk factors including demographic data, length of stay, immunosuppression, gastrointestinal or cardiac surgery, and parenteral nutrition use. Secondary objectives were to determine potential risk factors specifically associated with amphotericin resistance (i.e., previous broad-spectrum antibiotic or antifungal use)

among these isolates. Preliminary results showed that *Candida* species accounted for 83.3% of fungal isolates, with *Candida albicans* constituting only 33.1% of *Candida* isolates. Complete results will be discussed.

Drug or Drug Class: Antifungals

Disease or Symptom: fungemia, candidemia

Practice Setting: hospital, acute care

Monitoring parameters: N/A