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Fungal peritonitis in peritoneal dialysis patients: a single center experience

Youn Su Lee, Hyo Jung Ryu, Seok Hui Kang, Eun Woo Choi, Jun Young Do

Department of Internal Medicine-Nephrology, Yeungnam University Medical Center, Korea, Republic of

Case Study: Background & Aims: Fungal peritonitis is fatal complication in patients underwent peritoneal dialysis (PD). Development of fungal peritonitis should be treated by PD catheter removal. The aim of the study was to discuss our experience of fungal peritonitis in PD patients.

Methods: We reviewed the chart and identified total 16 patients diagnosed with fungal peritonitis between January 1998 and February 2019. Fungal peritonitis was proven from peritoneal fluid or peritoneal catheter tip.

Results: Eleven patients were women. Age at onset was 32~80 years old. Interval between initiation of PD and onset of peritonitis was 9~199 months. Fungus species were *Candida albicans* in 6, *Candida* species (not otherwise specified) in 4, *Candida parasilosis* in 2, *Candida famata* in 2, *Candida tropicalis* in 1, and *Trichosporon asahii* in 1. All patients had immediate catheter removal. Fifteen patients were successfully treated with antifungal agents (Diflucan and/or Fungizone) and catheter removal. Those were permanently transferred to hemodialysis. One patient died.

Conclusion: In our study, mortality rate was low in fungal peritonitis (6.3%). Early catheter removal and proper anti-fungal agent may be associated with favorable outcomes in patients with fungal peritonitis.