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Prediction of Liquid Chromatographic Retention Time: A Review
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Treatment of non-albicans Candida vaginitis with amphotericin B
vaginal suppositories form

Abstract

Non-albicans Candida vaginitis, particularly infection by species like Candida glabrata, is an important clinical issue because it is invariably resistant to standard azole antifungal treatment. These recalcitrant infections can produce chronic or recurrent symptoms, and new therapies become indicated. Amphotericin B, an antifungal polyene with broad-spectrum activity, has been an effective and useful therapy for such difficult-to-treat infections. While stereotypically linked to its fatal systemic side effects 'when administered intravenously, the drug in topical preparation as a vaginal suppository allows it to act directly at the point of infection with negligible risk of systemic toxicity. The only significant side effects of amphotericin B vaginal suppositories are local and usually minor in severity, including vulvovaginal burning, itching, or stinging. These local side effects are well tolerated in most patients. Through action on the fungal cell membrane with an action independent of azoles, amphotericin B vaginal suppositories are a valuable and often effective treatment for patients who have not responded to other antifungal therapy, and are consequently an integral component of the management strategy of resistant non-albicans candidiasis.

Keywords:

Non-albicans Candida vaginitis, Candida glabrata, Azole antifungal treatment, Recalcitrant infections, Chronic or recurrent symptom's, Antifungal polyenes, Broad-spectrum activity