Abstract:

Oropharyngeal candidiasis (OPC) is the most frequent opportunistic infection, with an occurrence rate of 90% in patients during the course of HIV disease. Candida albicans is the most prevalent species and is followed in frequency by C. glabrata, C. tropicalis, C. krusei, C. parapsilosis. The resistance of oral fungal isolates to currently available antifungal drugs is highly relevant as it has important implications in patient morbidity and mortality. The introduction of highly active antiretroviral therapy (HAART), which improves patient immunity, has dramatically reduced the incidence of opportunistic infections among HIV-positive people. However, there are conflicting reports regarding the association between oral yeast colonization and HAART. Although, C.albicans was the prevailing species, the non candida albicans species was found to be on the rise, most common being Candida parapsilosis. The resistance to fluconazole and itraconazole of Candida isolates was also shown to increase. This azole resistance among AIDS patients on HAART is a serious therapeutic problem. Hence in this study identification and quantification of fungal isolates was done and antifungal drug resistance in HIV/AIDS patients on HAART was studied. The aim of this study was to highlight the need for national surveillance for examining Candida epidemiology and resistance to antifungal drugs in HAART patients among Indian population.