

Candidiasis

For many years, fungal infections were considered as "nuisance diseases" such as athlete's foot or vaginal yeast infections. However, advances in medical technology, including organ and bone marrow transplants, chemotherapy, and the increased use of antibiotics have added to the increase in fungal infections.

The word "Candida" refers to a yeast that is a normal organism on the skin, female genital tract, and the entire gastrointestinal (GI) tract of humans.⁽¹⁾ Just because it is in these areas does not mean that there is a disease present. "Candidiasis" is a word that describes a fungal infection in the mouth, esophagus, or vaginal area.

It can also include general infections in single or multiple organs including the eye, brain, heart, kidney, skin, bone, and joints.

Clearly, the patient with a poor immune defense system is at greatest risk for infection by Candida.⁽²⁾ The oral cavity and GI tract are the common entry points for the organism to invade the body causing an infection. These infections are divided into oropharyngeal candidiasis (thrush), esophageal candidiasis, GI candidiasis, and vaginal candidiasis. Also included are patients who have a syndrome known as chronic mucocutaneous candidiasis. These patients are plagued by chronic or recurring infections of the skin, nails, and mucous membranes. Most of these patients have problems with their immune systems.

Generally, infections are usually treated with antifungal medications; however, infections commonly return when therapy is stopped.

Risk factors for developing candidiasis include:

- * prior therapy with antibiotics;
- * recent surgery;
- * extensive burns;
- * having bacterial infections at the same time;
- * nutrition by IV only (called total parenteral nutrition ? TPN).

Oral candidiasis is generally not considered life threatening. However, it does cause discomfort, and in patients with a poor immune system, can spread to the esophagus, causing ulcers and tears in the mucous lining.

A variety of factors are generally necessary for the development of oral candidiasis, including age, immune system deficiencies (including malignancies, diabetes mellitus, and AIDS), nutritional deficiencies, radiation therapy, anti-cancer drugs, and the use of antibiotics or steroid drugs.

Within the urinary tract, the most common Candida infection (Candida cystitis) often follows therapy with antibiotics, if there is a catheter in the bladder, or when there is a kidney abscess. There are usually no symptoms and the infection heals without the use of antifungal drugs. It is often difficult to diagnose this condition due to the normal presence of Candida in the urinary tract.

FOR NUTRITIONAL SUPPORT VISIT [HEALTH & WELLNESS HAVEN](#)

Additional Links [Back to Top](#)

- * [Statistics about Candidiasis](#)
- * [Signs and Symptoms of Candidiasis](#)

Footnotes [Back to Top](#)

^{^1} Carver, PL. Invasive Fungal infections. In: DiPiro JT. et al eds. Pharmacotherapy, a Pathophysiologic Approach. 4th ed. Appleton & Lange. Stamford CT. 1999:1839-1856.

^{^2} Meunier-Carpentier F, Kiehn TE, Armstrong D. Fungemia in the immunocompromised host. Changing patterns, antigenemia, high mortality. Am J Med. Sep 1981;71(3):363-70.

[View Abstract view-abs.asp?fnid=112189&absid=105369](#)

^{^3} Hay RJ. The management of superficial candidiasis. J Am Acad Dermatol. Jun 1999;40(6 Pt 2):S35-42.

View Abstract <view-abs.asp?fnid=112190&absid=105370>>

About Candidiasis

? Introduction

? Statistics

? Signs & Symptoms

Treatment Options

Click to View additional treatment options for Candidiasis

About the Author

Powered by NHIDemand Copyright © 2000-2008 NHIDemand All rights reserved. www.nhiondemand.com This information is educational in context and is not to be used to diagnose, treat or cure any disease. Please consult your licensed health care practitioner before using this or any medical information.

Source: <http://www.vitaminaid.net>