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Candida glabrata spondylodiscitis: A case report

Christina El Khoury, Philippe Younes, Rabih Hallit, Nabil Okais, Matta Antoun Matta

1 Department of Infectious Diseases, Bellevue Medical Center, Mansourieh, Lebanon
2 Department of Pharmacy, Bellevue Medical Center, Mansourieh, Lebanon
3 Department of Neurosurgery, Bellevue Medical Center, Mansourieh, Lebanon
4 Saint Joseph University, Beirut, Lebanon
5 Department of Infectious Diseases, Centre Hospitalier Universitaire Notre Dame des Secours, Byblos, Lebanon
6 Universite Saint- Esprit de Kaslik, Kaslik, Lebanon

Abstract
Introduction: Spondylodiscitis is an infection in the intervertebral disc space and adjacent end plates. It can be attributed to bacteria, mycobacteria or fungi. As the number of immunosuppressed patients continues to grow, the incidence of developing fungal infections has become more frequent.
Methodology: We report the case of a 53-year-old immunocompetent female patient with a fungal spondylodiscitis infection caused by Candida glabrata diagnosed by open surgical biopsy, one-month posturosepsis.
Results: Our patient with Candida glabrata was disease free in 6 months after being treated through surgical fusion at the level of C4-C5 and the use of intravenous micafungin followed by oral voriconazole for a total of 6 months.
Discussion: Fungal spondylodiscitis, especially due to Candida glabrata, remains a rare condition, usually suspected in immunocompromised and elderly patients. Without appropriate diagnosis and tailored surgical and medical treatment, the infection can be progressive and yield to deleterious complications such as vertebral destruction. Surgical debridement of the disc alongside fusion and antifungal therapy for a minimum of 3 months are highly recommended.

Key words: spondylodiscitis; Candida glabrata; immunocompetent.


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Corresponding author
Professor Name Surname, MD. PhD.
Head of the Intensive Software Abuse,
123 Gotta find me.
Tel: 555-123456
Fax: 555-123456
Email: info@jidc.org

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