A Study on Mucormycosis and Liposomal Amphotericin B Prescription for Treatment

Objectives

1.To Study the Incidence of Mucormycosis.

2.To Identify the Stages of Mucormuycosis During Detection

3.To Identify the Preferred Choice of Line of Treatment

4.To Study the Duration of Treatment in Terms of Number of Vials Used

Methodology

Sample Design: Descriptive study

Sampling: Convenience Sampling

Sample population: ENT Specialists

Sample Size: 80

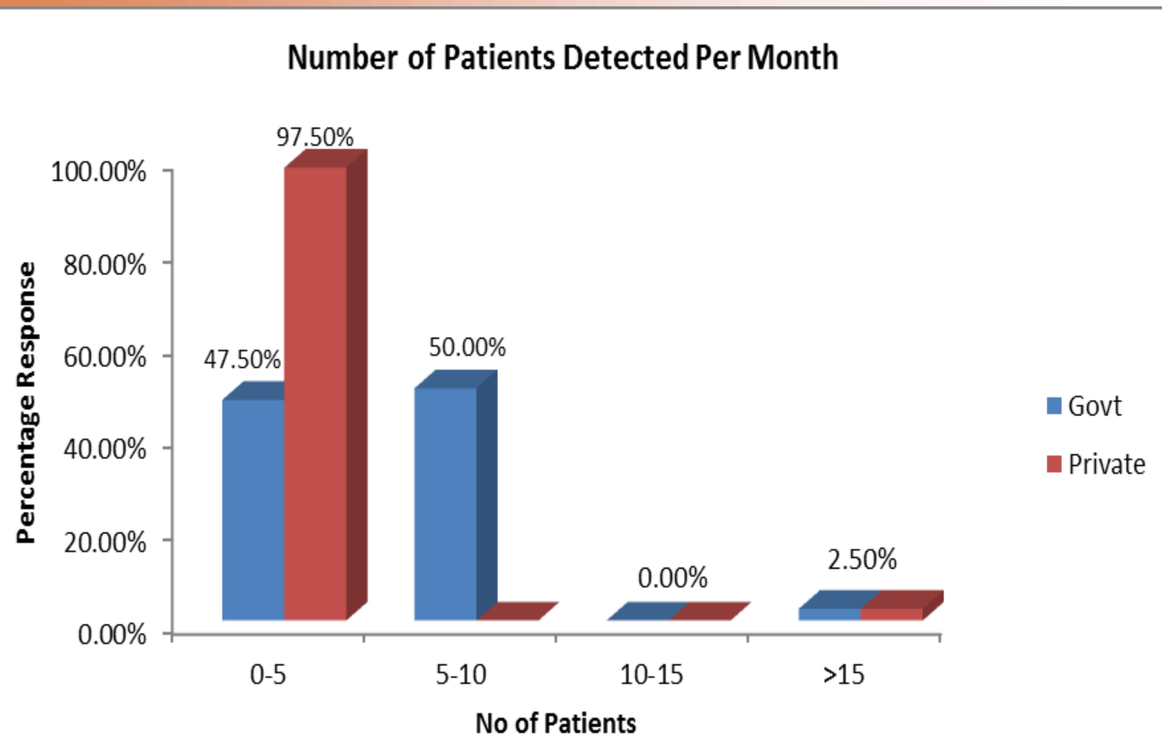
Sample area: Delhi-NCR

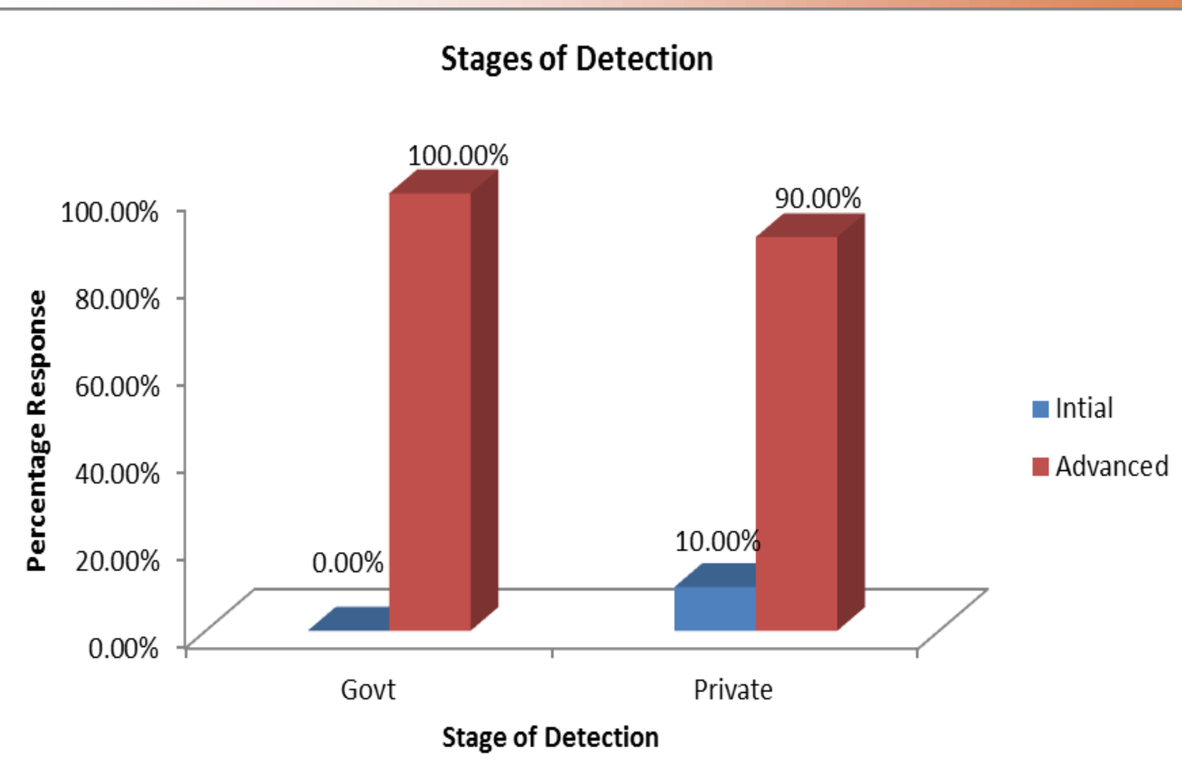
Tool: Questionnaire to collect primary data

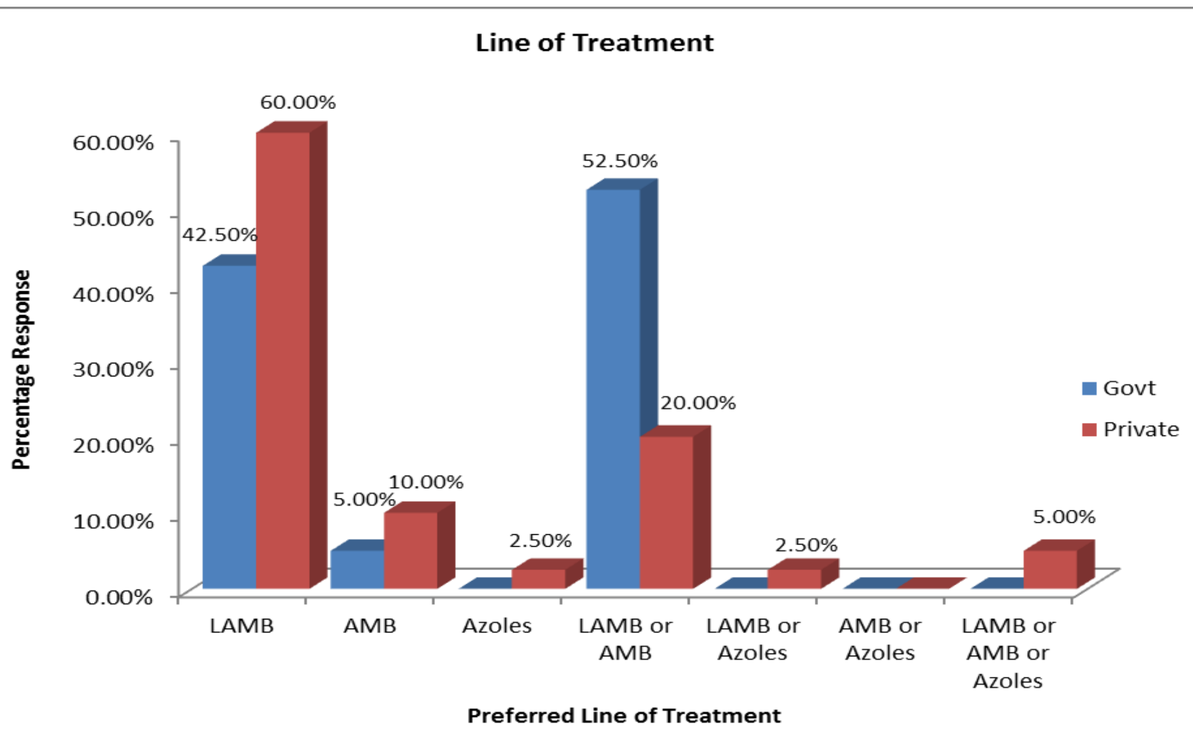
Data Collection: Primary Data

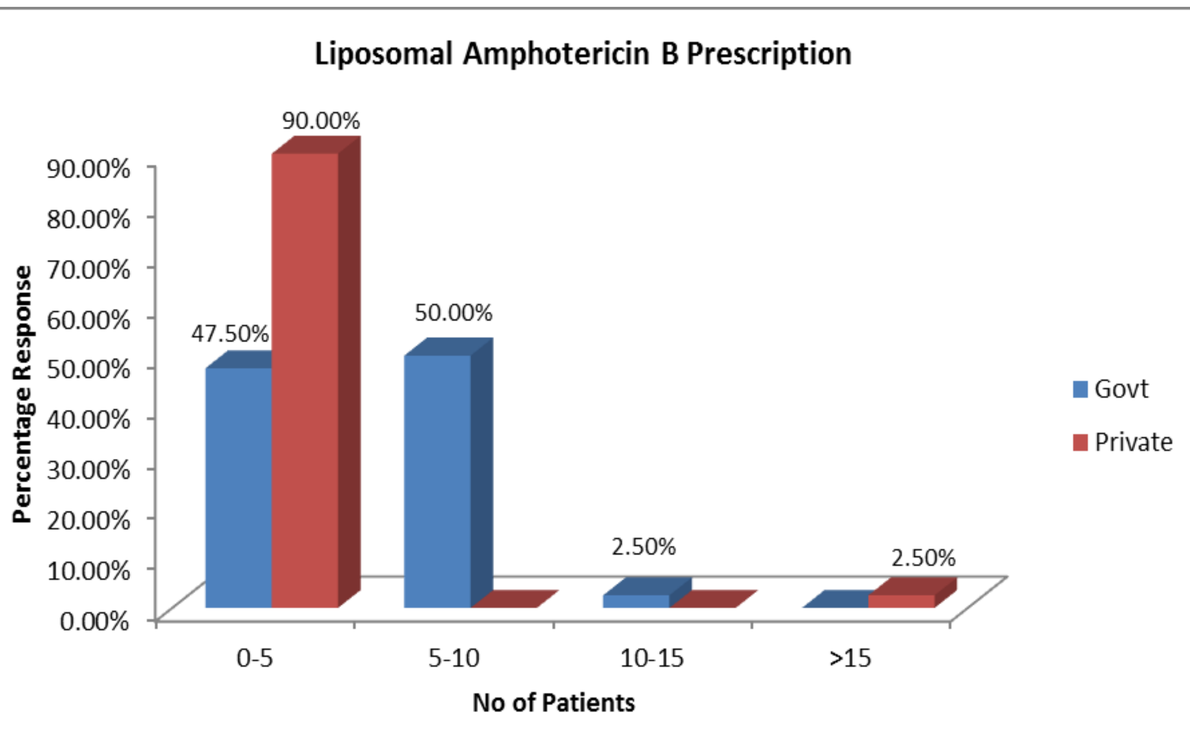
Study duration: Two months

Findings



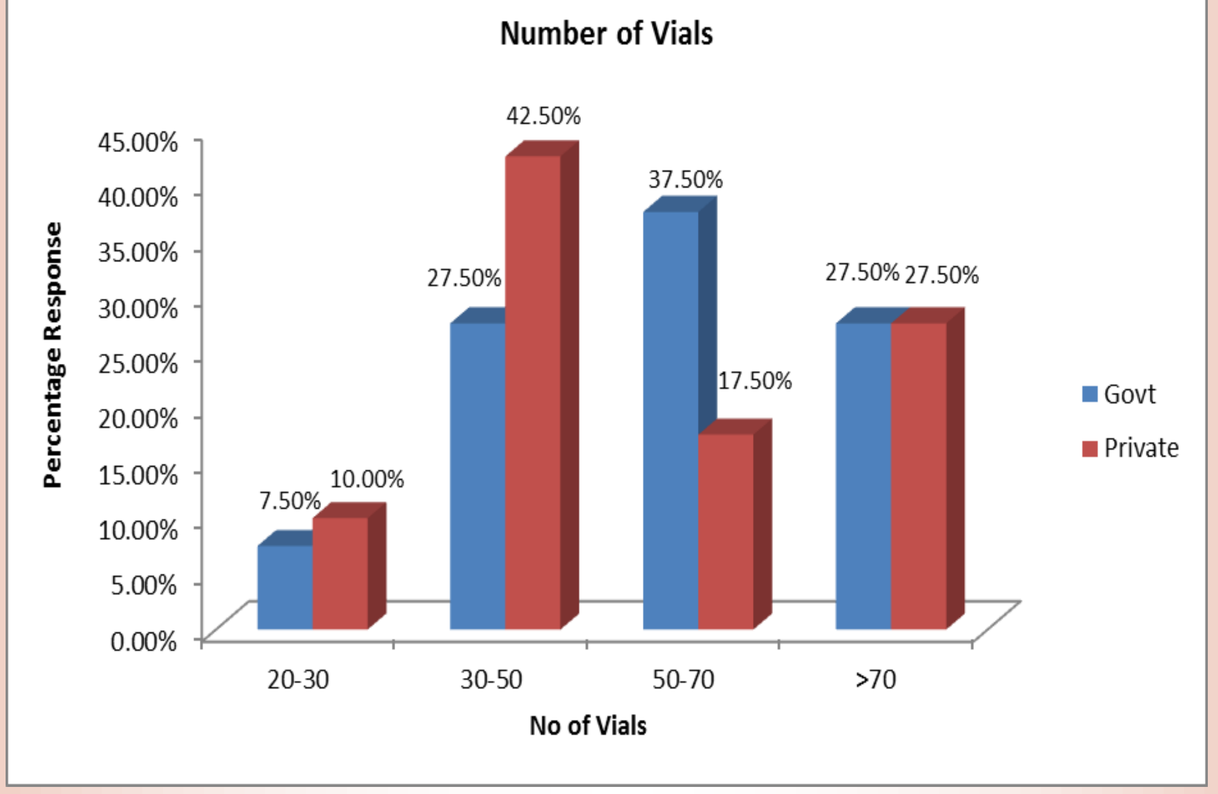






Observations

- Mucormycosis as a rare infection, not much of the patients are detected with this.
- Liposomal Amphotericin B is most prescribed drug followed by Amphotericin B.
- Most patients are detected in the advanced stage of infection which requires longer treatment. This shows that even though mucormycosis is a rare infection but there is a big market for mucormycosis. On average each patient requires 50-70 vials for treatment.



Recommendations

- Liposomal Amphotericin B is very expensive so most of the patients can not afford. These is dire need of affordable treatment.
- It is difficult to identify mucormycosis in the initial stages so there is a need for a technique for easy detection of infection in the initial stage.
- R&D is another area where BSV can venture into for the improvement of the existing formulation of Amphotericin B.
- Posaconazole is most prescribed azole for mucormycosis. It is also used in combination with Liposomal Amphotericin B by few of specialist. This is the area where BSV can venture into

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