

INTRODUCTION

Mucormycosis

- It is an opportunistic infections caused by “Bread mold fungi” including – Mucor, Rhizopus, Absidia & Cunninghamella.
- Predisposed Factors:
 - Neutropenia
 - Diabetes mellitus
 - Corticosteroid Use
 - Break down of cutaneous barrier as a result of burning, surgical wound and trauma.
- Mucormycosis frequently infects the sinuses, brains, or lungs. While infection of the oral cavity or brain are the most common forms of Mucor mycosis.



Treatment:

Amphotericin B should be immediately administered due to rapid spread and high mortality rate of the disease.

RESEARCH METHODOLOGY

Sample Design: Descriptive study

Sampling: Non probability convenience sampling

Sample population:

E.N.T Doctors
AIDS & Cancer specialists
Medical I.C.U
Pulmonologist
Pediatrician

Sample Frame:

Government Doctor Private Doctors
Medicinal ICU, O.P.D of E.N.T department
Medical Oncology and AIDS departments
Respiratory ICU and OPD

Sample Size: Respondents: 88

Sample area: Jaipur

Tool:

Questionnaire to collect primary data
Microsoft Excel to carry out analysis

Data Collection:

Primary- Through questionnaire and meeting with respondents
Secondary- To understand study topic and objectives information from article and journal

Study duration: Two (2) months

OBJECTIVES

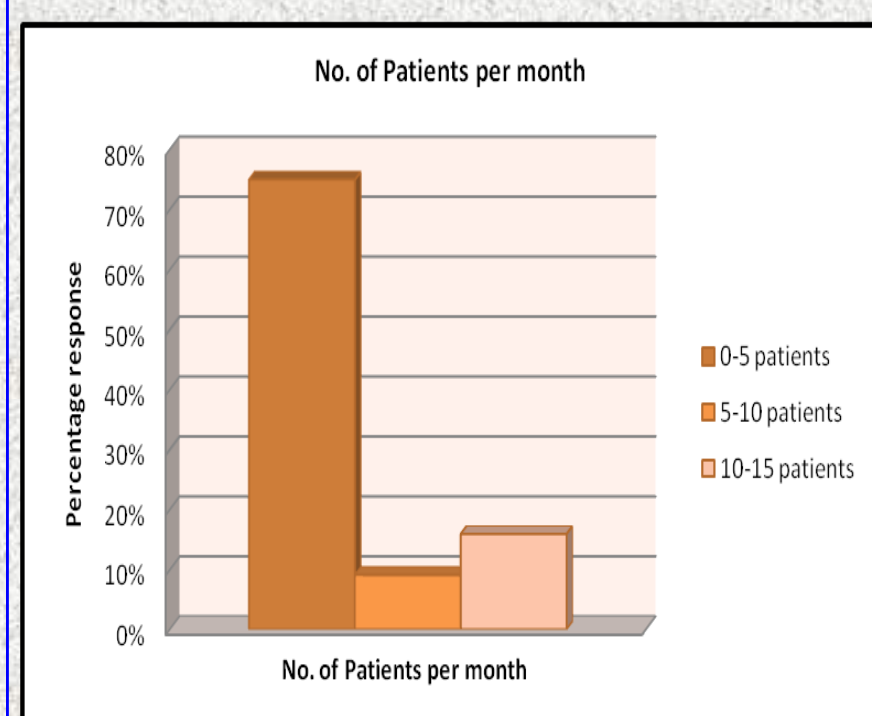
- ⇒ To study the incidence of Mucor Mycosis in Immunocompromised patient.
- ⇒ To identify the most prescribed Antifungal in Mucor Mycosis
 - Liposomal Amphotericin B
 - Amphotericin B
 - Azoles
- ⇒ To find out Number of Patient treated with liposomal Amphotericin B.
- ⇒ To identify the most preferred brand.
- ⇒ To find Average Number of Vials in treatment of Mucor mycosis.

FINDINGS AND INTERPRETATIONS

Objective 1:

Stage of Mucor Mycosis detection

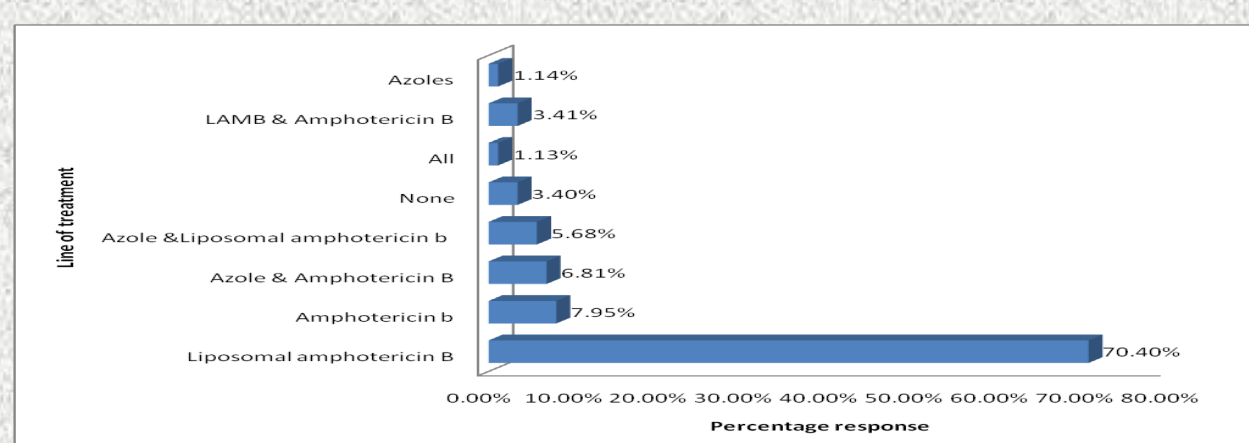
No. of Patients	Doctor response	Response in percentage
0-5	66	75%
5-10	8	9.09%
10-15	14	15.90%



Objective 2

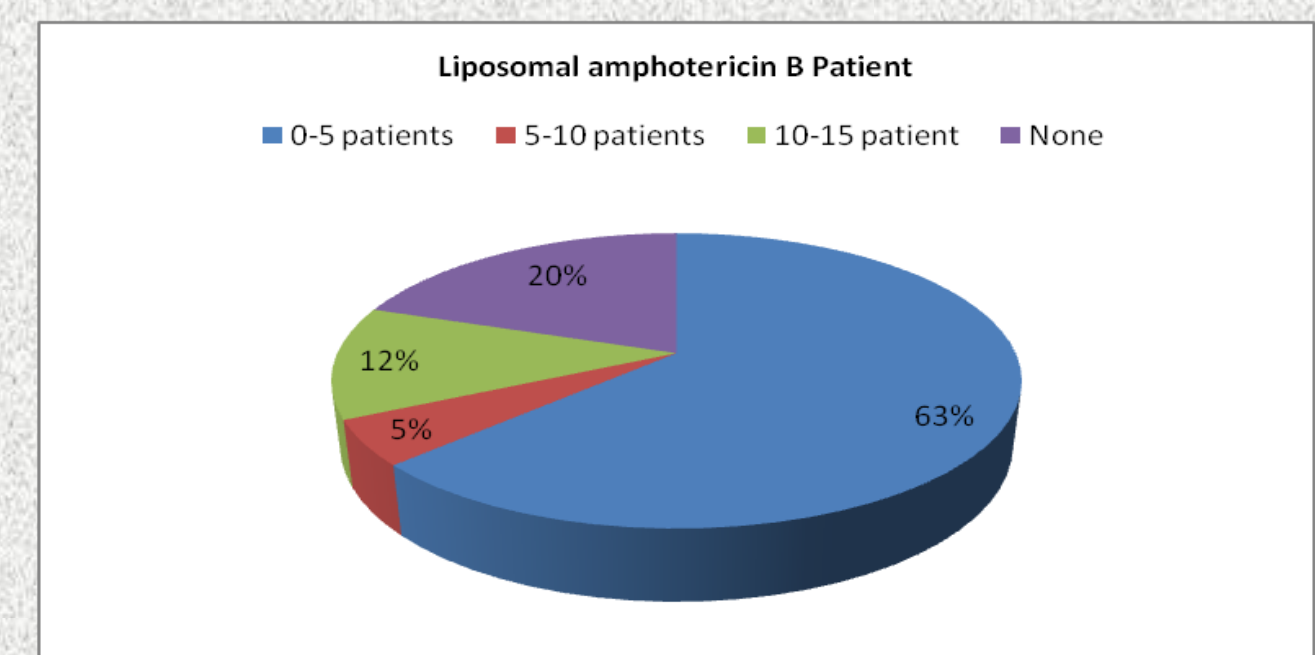
Line of Treatment

Line of treatment	Number of response	Percentage of response
Liposomal Amphotericin B	62	70.40%
Amphotericin B	7	7.95%
Azoles	1	1.14%
Azoles & Liposomal Amphotericin B	5	5.68%
Azoles & Amphotericin B	6	6.81%
Liposomal Amphotericin B & Amphotericin B	3	3.14%
All	1	1.13%
None	3	3.40%



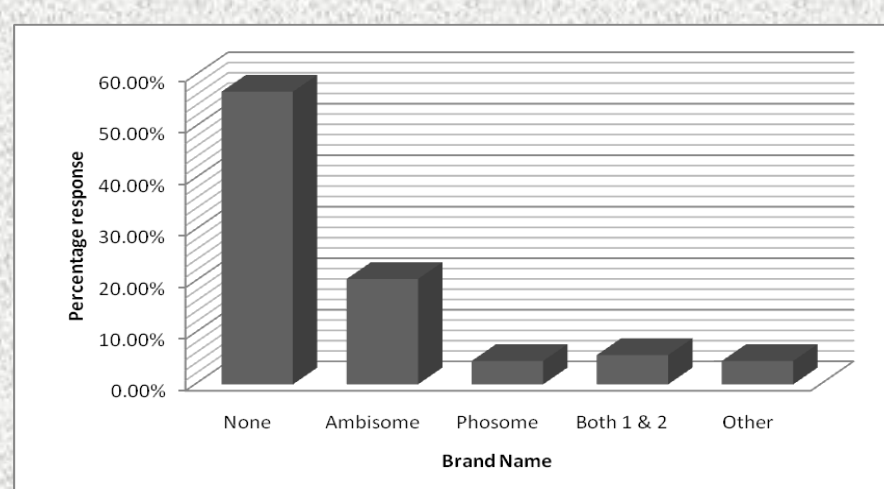
Objective 3: Number of patient treated with Liposomal Amphotericin B.

LAMB /Month	Number of response	Percentage Response
0-5	51	63%
5-10	4	12%
10-15	10	15%
None	16	20%



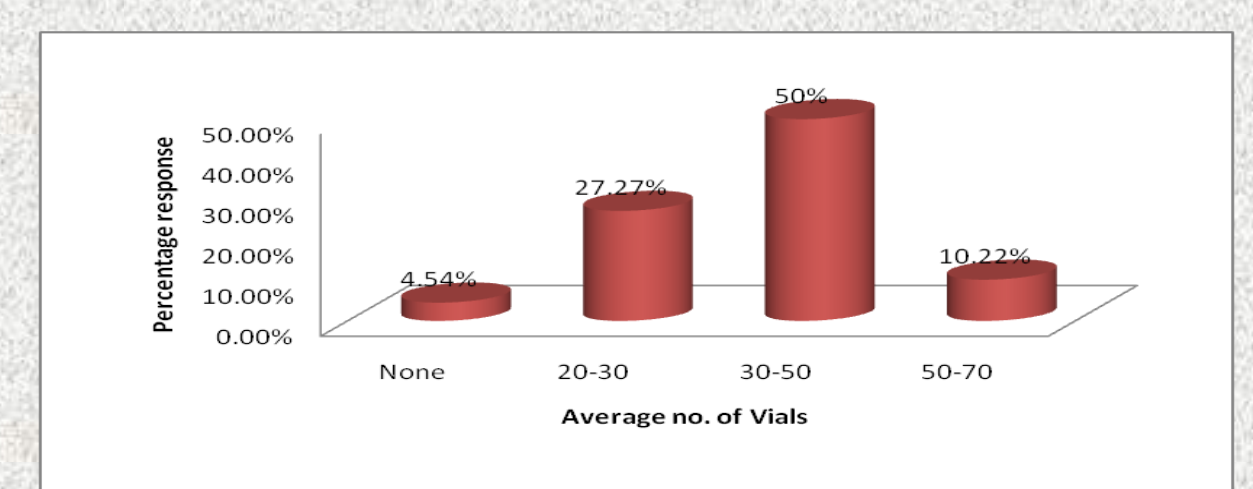
Objective 4: To find out most Preferred Brand.

Brand Name	Response in Number	Response in Percentage
Ambisome	17	20.45%
Phosome	4	4.54%
Both	5	5.68%
None	50	56.81%
Other	4	4.54%



Objective 5: To find out Average number of Vials.

Average no of Vials	Number of Response	Percentage
20-30	24	27.27%
30-50	44	50%
50-70	9	10.22%
None	4	4.54%



KEY FINDINGS

- It was found in study that Mucormycosis patient is rarely found and survival rate in this disease is very low.
- It was found in study that the prescription pattern of anti-fungal for Mucormycosis is depends on economic condition of patients.
- Government doctors prescribed only hospital formulary, they didn't prescribe brand.
- Study reveals the truth that Liposomal Amphotericin B is the most preferred line of treatment.
- Azoles are least preferred due to its high cost and recurrence of disease and conventional Amphotericin B is least preferred due to Hepatotoxicity caused by it.
- Among Various brand of liposomal Amphotericin B, Ambisome was prescribed by most of the doctors.

RECOMMENDATIONS

Place:

- It was found in study that Farmers constitute the high risk group and peak incidence is observed during monsoon.
- Few doctors in survey said that Mucor Mycosis patients are found in large number in the areas where farming is the major occupation.
- Therefore Organization has greater opportunity to venture into such areas.

Product:

- For Mucor mycosis treatment drugs should be of low cost, effective and causes least side effects.
- Report also provides a way ahead for organization with Azoles and Liposomal Amphotericin B combinations being the molecule to venture into due to its effectiveness in Mucormycosis.
- Voriconazole, Posaconazole and Itraconazole are some of the most preferred azoles in combination with liposomal Amphotericin B. Attempt should be done to improve the existing molecule may prove profitable.