



Figure 2.

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Case series of Cryptococcal Meningitis—Experience in North Western India over 1 year (2021–22)

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Objective: Cryptococcosis is an opportunistic fungal infection causing high morbidity and mortality in patients, preferentially affecting immunocompromised. It can cause a wide array of clinical manifestation, which includes meningitis, pulmonary, as well as disseminated infection. *Cryptococcus neoformans* causes more than 90% cases of cryptococcal meningitis.

Methodology: We performed a retrospective review of patients with confirmed cryptococcal meningitis during 1 year period from 2021 to 2022 in tertiary care center, AIIMS Jodhpur. We assessed clinical, radiological, microbiological, and biochemical parameters along with treatment provided and outcomes of the patient.

Results: Of 189 patients screened for suspected cryptococcal meningitis, 6 were microbiologically confirmed positive. All the patients were immunocompromised, of which four were HIV positive and one was a solid organ transplant recipient on immunosuppression and one was old TB Meningitis. Most common symptom was headache and altered sensorium (100%). Radiological findings showed 30% had no significant abnormality. CSF examination revealed average CSF protein 97.6 (63-163), CSF chloride 103.3 (108-132), sugar 36.33 (1-68), with predominant lymphocytes. All the patients were microbiologically confirmed by CSF cryptococcal latex test. A total of 4/5 patients received amphotericin B (3 mg/kg) with fluconazole (1200 mg) for 2 weeks in the induction phase followed by fluconazole consolidation phase and maintenance phase. Of the five patients, four patients survive with a good response to the treatment with one fatality.

Conclusion: Through our case series we emphasize the fact that Cryptococcal meningitis may present with non-significant radiological features. Thus, the differential diagnosis of *C. meningitidis* must always be thought of when an immunocompromised patient presents with headaches and other signs and symptoms involving the central nervous system.

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Catheter-associated blood stream infections due to *Wickerhamiella pararugosa* in a patient with acute myeloid leukemia: Review of literature

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Objectives: This report aims to present a case of *Candida pararugosa* bloodstream infection, review previous cases with *C. pararugosa* infections, and provide a concise review of the clinical background, risk factors, and brief the management of infections.