



WMA Statement on Fungal Disease Diagnosis and Management

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Annual WHO Global Burden of Disease estimates recognize that fungal diseases account for a significant proportion of health problems worldwide. These include cutaneous fungal infections which affect up to a billion persons and vulvovaginal candidiasis which affects tens of millions of women, often multiple times annually.

Even more serious are invasive and chronic fungal diseases that lead to estimated annual morbidity rates that are similar to those caused by commonly recognized global health concerns such as malaria and tuberculosis. In addition to death, these fungal diseases commonly lead to chronic ill health, including blindness with keratitis, respiratory distress with ***allergic bronchopulmonary aspergillosis (ABPA)***, severe asthma with fungal sensitisation (SAFS) and chronic pulmonary aspergillosis (CPA), weight loss and nutritional deficiency with oesophageal candidiasis and CPA, and inability to engage in healthy sexual activity with vulvovaginal candidiasis.

Serious fungal diseases are often opportunistic, occurring as a consequence of other conditions that suppress the immune system, such as asthma, AIDS, cancer, post-transplant immunosuppressive drugs and corticosteroid therapies. Some occur in critically ill patients.

Despite the fact that many fungal diseases can be treated relatively simply, in many cases, these diseases go untreated. Fungal infections alone are often not distinctive enough to allow a clinical diagnosis, and as cultures are frequently falsely negative, missed diagnosis is common. In addition, a relatively narrow diagnostic window to cure the patient is frequently missed, resulting in prolonged expensive hospital stays, often with a fatal outcome. Despite the existence of effective medicine to treat fungal infections, these are often not available when and where they are needed.

STATEMENT

The WMA stresses the need to support the diagnosis and management of fungal diseases and urges national governments to ensure that both diagnostic tests and antifungal therapies are available for their populations. Depending on the prevalence of fungal diseases and their underlying conditions, specific antigen testing or microscopy and culture are essential. These tests, and personnel trained to administer and interpret the tests, should be available in all countries where systemic fungal infections occur. This will likely include developing at least one diagnostic centre of excellence with a sufficient staff of trained diagnostic personnel. Monitoring for antifungal toxicities should be available.

Physicians will be the first point of contact for most patients with a fungal infection and should be sufficiently educated about the topic in order to ensure an effective diagnostic approach.

The WMA encourages its members to undertake and support epidemiologic studies on the burden of fungal disease in their country and to inform the national government of the results.

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