TITLE: A 5-YEAR REVIEW OF INVASIVE CANDIDIASIS IN A PEDIATRIC TERTIARY HOSPITAL: THE CURRENTE CHALLENGE OF *Candida parapsilosis* complex

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ABSTRACT:

Invasive candidiasis (IC) is the most prevalent fungal nosocomial infection, contributing to morbidity and mortality of hospitalized patients and a significant burden to the healthcare system. Species distributions and susceptibility patterns of Candida isolates diverge widely between children and adults. Although C. albicans is the major cause of IC worldwide, Candida parapsilosis complex is one of the most common non-albicans Candida species. The aim of this study was to perform a 5 years retrospective analysis of IC cases in a Brazilian tertiary pediatric hospital and conduct a microbiological investigation of C. parapsilosis sensu stricto. All isolates were identified by MALDI-TOF MS. The genotyping of all C. parapsilosis sensu stricto was performed by microsatellite analysis; antifungal susceptibility to amphotericin B and fluconazole, and biofilm formation were also evaluated. A total of 123 IC episodes were identified from August 2016 to August 2021. The IC incidence was 1.24 cases/1000 hospital admissions and mortality of 34%. The age of patients with IC ranged 0-17 years and 50.4% of them were male. The main species identified were C. parapsilosis complex (35.8%), followed by C. albicans (29.2%) and C. tropicalis (21.9%). All C. parapsilosis sensu stricto isolates were recovered from blood cultures and identified as biofilm producers, 82.5% of them, as strong producers. According to the microsatellite analysis, more than thirty different genotypes were assigned over the 5 years analyzed, one of them in more than one patient. All C. parapsilosis sensu stricto isolates were sensitive to amphotericin B and one was non-sensitive to fluconazole. During recent years, the number of C. parapsilosis infections increased. Continuous changes in pediatric IC epidemiology have been reported, therefore, epidemiological surveillance is essential for the control and prevention of infections and hospital outbreaks.

Keywords: invasive candidiasis, *Candida parapsilosis* complex, pediatric, biofilm, epidemiology

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