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Novel treatment of disseminated Coccidioidomycosis in a dog with voriconazole

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Coccidioides is endemic in some areas of the southwestern United States, Mexico, and South America, and it was most recently found in south central Washington. The treatment of choice for *Coccidioides* in humans depends on severity, chronicity, and anatomic involvement. In humans, fluconazole is the agent of choice and amphotericin B is often used for rapidly progressive coccidiodal infections. Newly available antifungal drugs that may be beneficial in refractory cases include voriconazole, caspofungin, and posaconazole. There have been a few case reports and one case study documenting successful treatment of disseminated Coccidioidomycosis in human patients using voriconazole. In dogs, management of Coccidioidomycosis involves long-term antifungal drug treatment, typically with azoles such as ketoconazole, itraconazole, or fluconazole. Amphotericin B is recommended in cases of severe, diffuse pulmonary infections to achieve a faster onset of action when compared to azoles. Dogs with disseminated Coccidioidomycosis carry a grave prognosis despite standard treatment with fluconazole. This case report describes the successful management of a dog with disseminated Coccidioidomycosis involving the skeletal, cutaneous, and pulmonary systems with voriconazole after failing traditional therapy with fluconazole and terbinafine. This report is the first to describe the successful management of refractory Coccidiodomycosis with voriconazole in a dog.

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