

## VIII ENCONTRO DO INSTITUTO ADOLFO LUTZ

### DIAGNOSIS OF PARACOCCIDIOIDOMYCOSIS IN PATIENTS ATTENDED IN ROUTINE SERVICES OF A UNIVERSITY HOSPITAL.

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Identification of appropriate laboratory measurements for confirmation of a clinical impression is important in a routine paracoccidiodomycosis patients' medical care and constituted the objective of this study. Clinical records and laboratory cards of 401 paracoccidiodomycosis patients attended in the Tropical Diseases Area – Botucatu Medical School (São Paulo, Brazil) during the 1974-2008 were reviewed. Direct mycological examination (DME), cell block preparation (CBP), histopathological examination (HE), and specific antibodies serum levels - double agar gel immunodiffusion test - were evaluated before treatment. Males (88.0%) and chronic form (76.8%) predominated. Patients distribution according to period of attendance presented no differences. Identification of typical *P. brasiliensis* yeast forms in clinical specimens was observed in 86% of the patients while 14% of them showed only a positive serological test. Direct mycological carried out in 51 different tissue specimens showed 74.5% of sensitivity; 62.5% of sensitivity was observed in 112 sputum samples. Cell block preparation carried out in 483 sputum samples showed 55.3% of sensitivity. Histopathological examination carried out in 239 tissues from different organs revealed 96.7% of sensitivity. Serological tests carried out in 351 patients and 200 healthy controls paired according to gender showed 90% of sensitivity, 100% of specificity, 100% of positive predictive value, 85% of negative predictive value and 94% of accuracy. Comparisons 2x2 of laboratory measurements carried out in the same patient showed that sensitivity decreases from HE to serology to CBP and DME; the last two assays showed no differences in sensitivity. This study revealed that *P. brasiliensis* can be identified in almost all the cases, mainly by HE, and the value of serological tests in a routine Service, including during long periods, with exchange of technicians, biologists and pathologists.