

A report on mucormycosis types, symptoms and diagnosis.

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Brief Report

Mucor disease (formerly called zygomycosis) is a serious but rare fungal infection caused by a group of molds called zygomycosis. These molds live in the environment. Most commonly, the sinuses or lungs are affected after fungal spores are inhaled from the air. It can also appear on the skin after cuts, burns, or other types of skin injuries.

Types of mucormycosis

Nasal cerebrum (sinuses and brain): Mucormycosis is a sinus infection that can spread to the brain. This is most common in people with uncontrolled diabetes and those who have had a kidney or stem cell transplant.

Skin (skin) zygomycosis: zygomycosis occurs after a fungus. It penetrates the body through the crevices in the skin. This type of infection can occur after burns, scratches, cuts, surgery, or other types of skin trauma. This is the most common mucormycosis in people who are not immune.

Mucormycosis symptoms

Symptoms that may be related to mucormycosis.

- Symptoms of nasal cerebrum (sinuses and brain) zygomycosis are: One-sided facial swelling headache, nose or sinus congestion, rapidly worsening black lesions on the bridge of the nose or upper mouth, fever.
- Pulmonary (pulmonary) zygomycosis symptoms include: Fever, cough, chest pain, short breath.
- Skin (skin) mucor disease can look like blisters or ulcers, and the site of infection may turn black.

How to diagnose mucormycosis?

- When diagnosing mucormycosis, your healthcare

provider will consider your medical history, symptoms, physical examination, and laboratory tests.

- Health care providers suspected of having mucormycosis in the lungs or sinuses may take a sample of fluid from the respiratory system and send it to the laboratory.
- Your doctor may do a tissue biopsy.
- Imaging tests such as CT scans of the lungs, sinuses, or other parts of the body may also be needed depending on where the infection is suspected.

How is mucormycosis treated?

- IV sachet mucormycosis of antifungal drug, usually amphotericin B, posaconazole, or isabconazole, is a serious infection and should be treated with a prescribed antifungal drug, usually amphotericin B, posaconazole, or isabconazole. These drugs are given intravenously (amphotericin B, posaconazole, isabconazole) or orally (posaconazole, isabconazole).
- Other drugs such as fluconazole, voriconazole, and echinocandin are ineffective against the fungal that causes mucor disease.
- If it looks as if you've got a lung or sinus contamination, your medical doctor may also take a pattern of the fluid out of your nostril or throat and ship it to be examined in a lab.
- They may do a tissue biopsy, eliminating a small piece of inflamed tissue for testing.
- Your medical doctor may also do imaging checks like CT or MRI scans to discover whether or not the contamination has unfold in your mind or different organs.

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