



**Filippi L, Poggi C, Gozzini E, Meleleo R, Mirabile L, Fiorini P.**

Source Neonatal Intensive Care Unit, Department of Critical Care Medicine, A. Meyer University Children's Hospital, Florence, Italy. [filippi.luca@virgilio.it](mailto:filippi.luca@virgilio.it)

Candidiasis is relatively frequent in neonatal and pediatric intensive care units (ICUs), particularly in preterm infants less than 28 weeks of gestational age. Neonatal candidiasis shows high mortality and is often associated to poor neurodevelopmental prognosis in survivor patients.

Amphotericin B and fluconazole are the first choice drugs for the treatment of neonatal candidiasis. Caspofungin is an alternative antifungal agent, which is recommended for invasive candidiasis in adults, but has been poorly experienced in neonates and infants as far as now.

We report the first two infants with Candida liver abscesses treated with caspofungin. In the first infant bloodstream and liver lesions were cleared by combination therapy with fluconazole, liposomal amphotericin and caspofungin, while in the second one by caspofungin alone.

**CONCLUSION:** Our observations confirm the efficacy and tolerability of caspofungin in the treatment of neonatal candidiasis refractory to conventional antifungal drugs. More extensive data are recommended in order to assess a specific neonatal schedule.

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