

Table 3.3 General patterns of antifungal susceptibility

	FLU	ITR	5FC	AMB	VOR	POS	CAS	MFG	AFG
Yeasts									
<i>C. albicans</i>	S	S	S	S	S	S	S	S	S
<i>C. tropicalis</i>	S	S	S	S	S	S	S	S	S
<i>C. glabrata</i>	S-DD to R	S-DD to R	S	S-I	S	S	S	S ¹	S
<i>C. krusei</i>	R	S-DD to R	I-R	S-I	S	S	S	S	S
<i>C. lusitaniae</i>	S	S	S	S-R	S	S	S	S	S
<i>C. parapsilosis</i>	S	S	S	S	S	S	I	S ¹	S
<i>C. guilliermondii</i>	S	S	S	S	S	S	I	S	S
<i>Cryptococcus neoformans</i>	S	S	S	S	S	S	R	R	R
<i>Trichosporon</i>	R	I	R	I	S	S	R	R	R
Moulds									
<i>Fusarium</i>	R	R	R	++	++	++	R	R	R
<i>Aspergillus</i>	R	+	+	+	++	+++	++	++	++
<i>Pseudallescheria</i>	R	S	R	R	++	++	R	R	R
<i>Zygomycetes</i>	R	+	R	+	R	+	R	R	R
Dimorphic fungus									
<i>H. capsulatum</i>	+	++	R	++	++	++	R	R	R
<i>P. marneffeii</i>	+	++	+	++	++	++	R	R	R

S, susceptible; S-DD, susceptibility is dose-dependent; I, intermediate; R, resistant

Amphotericin B (AMB); 5-flucytosine (5FC); fluconazole (FLU); itraconazole (ITR); posaconazole (POS); voriconazole (VOR); caspofungin (CAS); anidulafungin (AFG); micafungin (MFG)

Note:

¹Sporadic cases of breakthrough *C. glabrata* and *C. parapsilosis* infection have been reported in the literature

Reference: (169–179)