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# Caspofungin Use in Patients with Invasive Candidiasis caused by Common Non-albicans Candida Species: Review of the Caspofungin Database.

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Increasing rates of invasive candidiasis caused by non-albicans *Candida* species have been reported worldwide. Particular concerns have been raised for *C. parapsilosis* because of reduced in vitro susceptibility to echinocandins. We identified 212 patients with invasive candidiasis due to non-albicans Candida species (>/=5 cases per species) in 5 clinical trials of caspofungin monotherapy from the pharmaceutical Sponsor's (Merck and Co., Inc.) database: 71 *C. parapsilosis*, 65 *C. tropicalis*, 54 *C. glabrata*, 10 *C. krusei*, 9 *C. guilliermondii*, and 5 *C. lusitaniae;* 167 cases caused by *C. albicans* were also identified. Efficacy was assessed at the end of caspofungin therapy. Success (favorable overall response) required favorable clinical and microbiological responses. Mean APACHE II score was 16.5 in the non-albicans group and 15.7 in the *C. albicans* group. Neutropenia at study entry was more common in the non-albicans group (12%) than in the *C. albicans* group (5%). Median duration of caspofungin therapy was 14 days in both groups. Success rate was 77% in both groups and at least 70% for each non-albicans species: *C. parapsilosis* 74%, *C. tropicalis* 71%, *C. glabrata* 85%, *C. krusei* 70%, *C. guilliermondii* 89%, *C. lusitaniae* 100%. Time to negative blood culture was similar for the various species. Overall mortality was 26% in the non-albicans group and 29% in the *C. albicans* group. Drug-related serious adverse events and discontinuations due to caspofungin toxicity were uncommon. Although sample sizes were limited, caspofungin demonstrated a favorable efficacy and safety profile in the treatment of invasive candidiasis caused by the following non-albicans *Candida* species: *C. parapsilosis*, *C. tropicalis*, *C. glabrata*, *C. krusei*, *C. guilliermondii*, and *C. lusitaniae*.

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