to decrease the time to diagnosis and treatment of these infections, resulting in a reduction in mortality. The objectives of this study were to determinate the incidence of Heliobacterium, Cryptococcus, and TB using RMs in PLHIV with advanced HIV disease (AHD) and calculate 30-day mortality.

Methods: PLHIV 16 years or older, treated at the Institute of Tropical Medicine Hospital in Asuncion, Paraguay, not receiving ART and presenting CD4 count ≤ 200 cells/μl, or clinical symptoms suggestive of WHO stage 4 or 5 diseases were enrolled and followed for 30 days. Detection of Heliobacterium Ag (HbAg) in urine was performed by enzymatic immunoassay (EIA). Cryptococcus Ag (EAg) detection in sputum and cerebral fluid by immunofluorescence (IIF) and Lipo- bortreusmanum (LAM) detection in sputum by LFT (TB-LAM) limited to those patients with CD4 count ≤ 100 cells/μl and by GeneXpert limited to patients with respiratory symptoms.

Results: From August 2021 to August 2022, a total of 335 PLHIV were enrolled. Patient median age was 37 years [interquartile Range (IQR): 14 years], median CD4 count at enrollment was 91 cell/μl (IQR 147 cell/μl). A total of 80% (n = 269) of patients were symptomatic for one or more of the three diseases being screened for Ag positivity rate was 20% (40/194) for TB-LAM, 10% (27/250) for HbAg, and 11% (35/308) for EAg (diagnosed with cryptococcal meningitis). GeneXpert testing showed a positivity of 14% (17/120) and in these patients with positive GeneXpert also positive tuberculous MDR-TB was diagnosed.

In total, 100/335 (30%) of patients tested had a positive result and complications were observed among 14/335 (4.2%) patients (Table 1). Heliobacterium Ag was the TB was the most frequent co-infection observed 12/335 (3.6%). Mortality according to these infections was 3/335 (0.9%) and all the patients had a CD4 count ≤ 100 cell/μl and among those with AS (U/L) 01/02/12/2022. Conclusions: Preliminary results show that TB and fungal opportunistic infections, including co-infection were common in people with advanced HIV. Longitudinal follow-up will help to evaluate the feasibility and cost-of-implementing RMs for the early detection of opportunistic infections in PLHIV with AHD in Paraguay. Early diagnosis could impact mortality reduction.

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Rare presentations of Cryptococcus: a case series
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Objective: Cryptococcus spp. is usually opportunistic pathogens affecting immunocompromised individuals causing meningitis primarily. Non-CNS presentations are a rare entity and we hereby present a series of 3 cases in the past year (2021-2022).

Methods: Case records of the three patients were studied. Detailed history, demographic details, investigations, treatment were noted.

Results: Patient 1 was a 14-year-old girl who came with complaints of fever, pain, swelling, and restricted movements of the right wrist, elbow, and ankle joints with multiple subcutaneous swellings initially on the thigh followed by elbows, arms, and forearm. The swellings became homogenous, dull-sounding, and firm. There was a history of being treated for 4 times for tuberculosis lymphadenopathy. KOH-Calcochrome whitewash of biopsy and pus aspirate samples showed circular yeast cells which were confirmed by cryptococcal antigen detection. All the samples had grown Cryptococcus neoformans on culture except BHI, BSM, and CSM. KOH was reported to lymphocytic meningitis and was diagnosed. Renaming of pus sample from the sputum after a week of antifungal therapy was negative for C. neoformans. Subcutaneous nodules and joint swellings decreased but she developed reactivation symptoms for C. neoformans. C. neoformans was isolated after 1 year with no recurrence.

Patient 2 was a 22-year-old male, a known case of Hodgkin Lymphoma stage 4 who underwent Antimicrobial therapy as well as plasmapheresis. He was on immunosuppressive. He presented with fever, chills, and cough which got worsened along with multiple cutaneous, hilar and abdominal lymphadenopathy. KOH-Calcochrome whitewash of biopsy samples demonstrated circular yeast cells which were confirmed by cryptococcal antigen detection of biopsy and BSM samples. Cryptococcus neoformans was grown on culture from all the samples. He succumbed to AIDS and cardiorespiratory arrest before any treatment could be administered.

Patient 3 was a 18-years-old female, known case of SLE with lupus nephritis, presented with immunosuppression, fever, dry cough, shortness of breath, decreased urinary output, and gradual swelling of the body starting from the face and progressing to the whole body. She further developed symptomatic effusion, multiple erythematous tender papules over the right thigh, and cellulitis of the right lower limb. She was seen on rheumatologist in view of HBCS findings suggestive of fungal pneumonia. As galactomannan antigen test was negative, venepuncture was tried. Pleural tap that flagged positive to Bacillus and C. neoformans grown on subculture. Her condition worsened with septic shock and succumbed to the disease before any treatment could be initiated.

Conclusions: Subcutaneous, joint, and pulmonary involvement in case, without a primary focus on the central nervous system. Culture and antigen detection can aid in early detection and hence early initiation of therapy.

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Sporotrichosis hyperendemic in Southern Brazil: twelve years of challenges
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Sporotrichosis has been described since the 1960s in the Rio Grande do Sul state (RS), southern Brazil. In reported cases, this region has the second-highest number of cases known due to Sporotrichoibacter in the country.

Objective: We update the current distribution of sporotrichosis in Southern Brazil and report measures taken to face the epidemiological threat of zoonotic sporotrichosis over 12 years.

Methods: Authors developed by the Laboratory of Mycology of the Universidade Federal do Rio Grande (LabMyco/FURG) and their results are described. Database from the LabMyco/FURG is compiled and all cases of proven sporotrichosis (required fungal isolation in culture) from humans and animals (cats and dogs) diagnosed between January 2010 and March 2022 were included.

Results: During the 12 years of the study, four educational events to discuss the regional emergence of sporotrichosis were promoted in the years 2013, 2015, 2017, and 2018. Before these meetings, health professionals were interviewed, and approximately half were unfamiliar with the regional hyperendemicity, epidemiologic agent, source of infection, and/or the main clinical presentation of sporotrichosis. With these events, a total of 144 health professionals were instructed to diagnose and treat the disease. Additionally, in 2017, along with the municipal health system, we implemented a public specialized reference service (URS - Universidade Regional Sul) to make regional infectious diseases consultation, diagnosis, and treatment (EHERB) to treat human sporotrichosis cases. The diagnosis of sporotrichosis was confirmed in 47 patients referred to URS-FUFGRGS/EBERH. All were clinically evaluated by periodic follow-up until clinical cure and received free antifungal treatment by the Brazilian Ministry of Health. A positive impact of the URS was demonstrated by the decrease of 23.5% in the interval between the beginning of the lesions and diagnosis (before URS, mean of 206 days versus after URS implementation, 78.5 days). Since the start of the sporotrichosis diagnosis by LABMyco/FURG in January 2010-March 2022, 171 cases of proven sporotrichosis were diagnosed by fungal culture: 721 in cats, 153 in humans, and 58 in dogs.

Conclusion: In a region with >500,000 inhabitants, 53% cases of sporotrichosis were diagnosed in the last 12 years. Since 2012, the number of cases is from a single laboratory service, we believe this number is underestimated, and the threat even greater. Although some improvements regarding the diagnosis and treatment of this mycosis in our region could be achieved by the educational initiatives and the implementation of the URS, they are still insufficient, and there is a need to overcome several obstacles that urgently need attention. Our region has the second most important port of the country, thus, more efforts, with public health policies directed to the treatment of cats with sporotrichosis, are urgently needed to control the spread and fungal dissemination not just to local and regional populations, but also to other countries.