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# Mucormycoses

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# Emergence des Mucormycoses

- Mucormycoses en France
- 1997-2006, 547 cas
- Incidence: 0,9/ 10<sup>6</sup> /yr
- 0,7 cas/10<sup>6</sup> in 1997
- 1,2 cas/10<sup>6</sup> in 2006

- Etude Retrozygo 101 mucormycoses
- 2005-2007
- Mortalité globale: 60%
- A M3: 44%

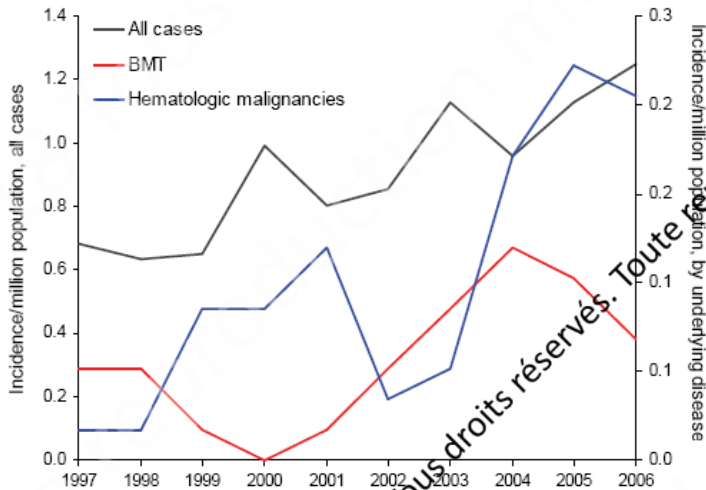
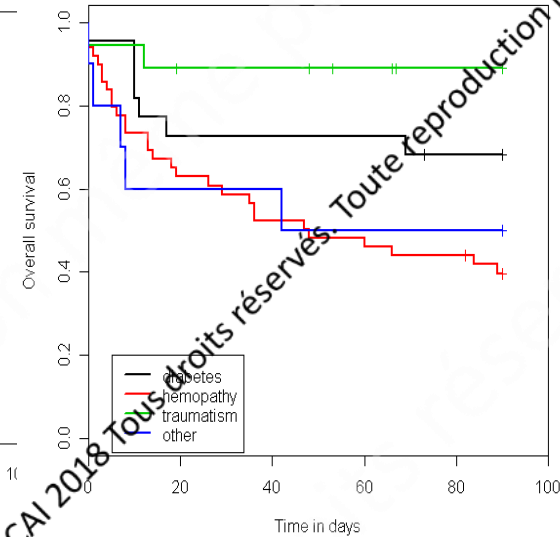
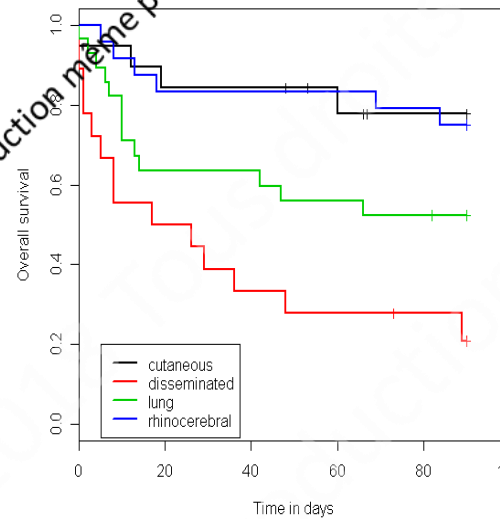


Figure 1. Evolution of the incidence of zygomycosis, France, 1997-2006. BMT, bone marrow transplantation.



# Surveillance des mucormycoses en France

- Réseau de surveillance des infections fongiques en France
- 25 centres 2012-2014
- 88 mucormycoses
- Facteurs de risque:
  - Hémopathie (61,4%)
  - Diabète (15,9%)
  - Traumatisme/Brulures

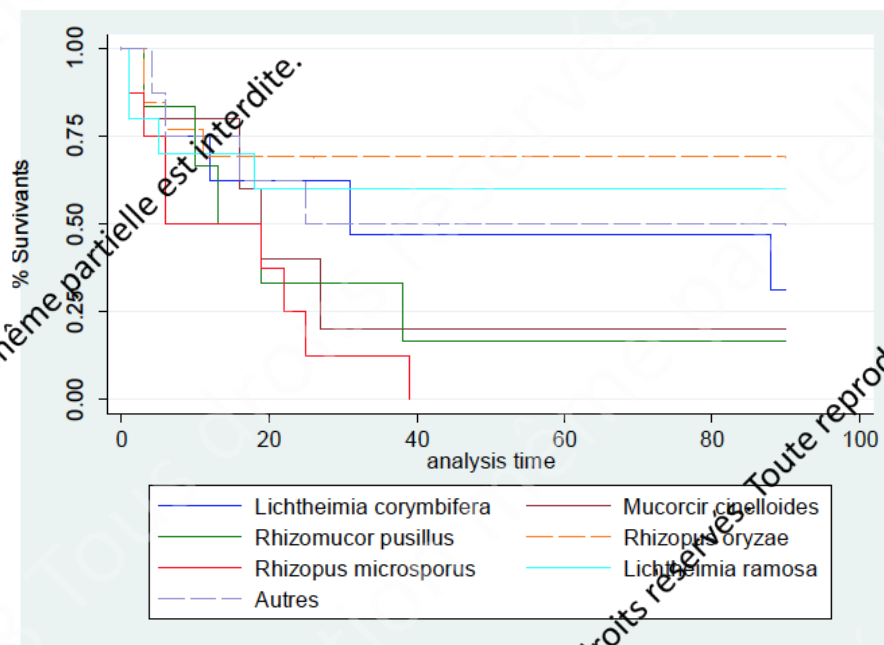


Figure 23 : Courbes de survie selon l'espèce de Mucorales isolée (RESSIF, 2012-2014)

# Mucormycosis epidemiology in France

**Table 1. Characteristics of 101 Patients With Proven or Probable Mucormycosis in France, 2005–2007**

	No (%) of Patients
Mean (SD) age, years	50.7 ( $\pm$ 19.9)
Male sex	59/101 (58)
Main risk factor	
Hematological malignancy <sup>a</sup>	50/101 (50)
+ HSCT	17/50 (24)
+ GVHD	5/50 (10)
+ Diabetes mellitus	9/50 (18)
+ Corticosteroids	13/50 (26)
+ Neutropenia	41/50 (80)
Diabetes mellitus <sup>b</sup>	23/101 (23)
Type 1	10/23 (43)
Ketoacidosis	8/23 (35)
Solid organ transplant <sup>c</sup>	3/101 (3)
Trauma	18/101 (18)
Other <sup>c</sup>	7/101 (7)

Lanternier, CID, 2012

**Table 2. Clinical Localization of the Infection According to the Main Underlying Disease in 101 Cases of Mucormycosis**

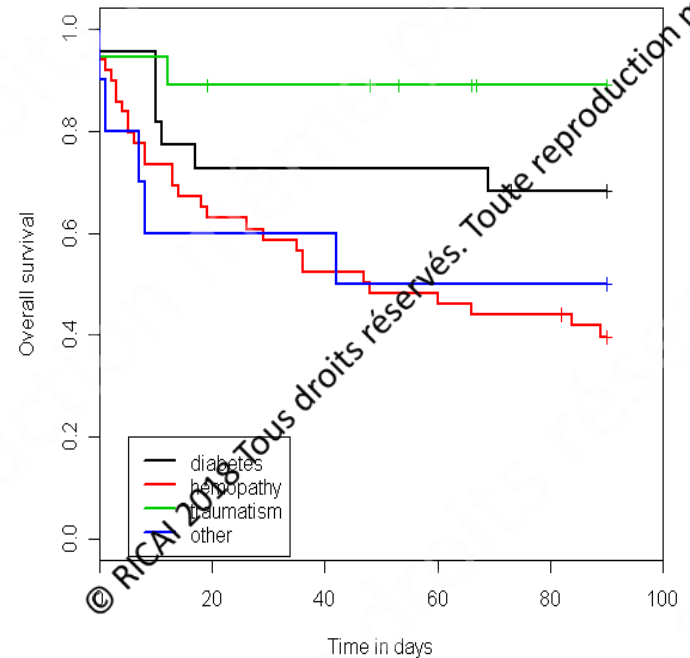
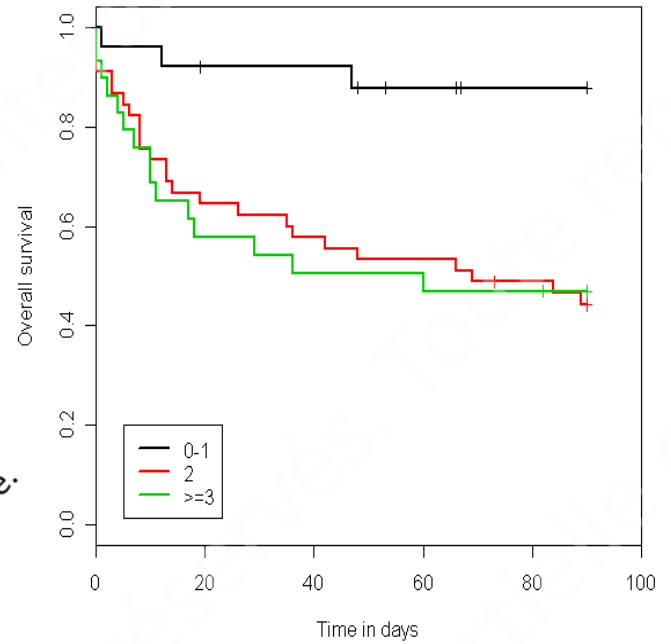
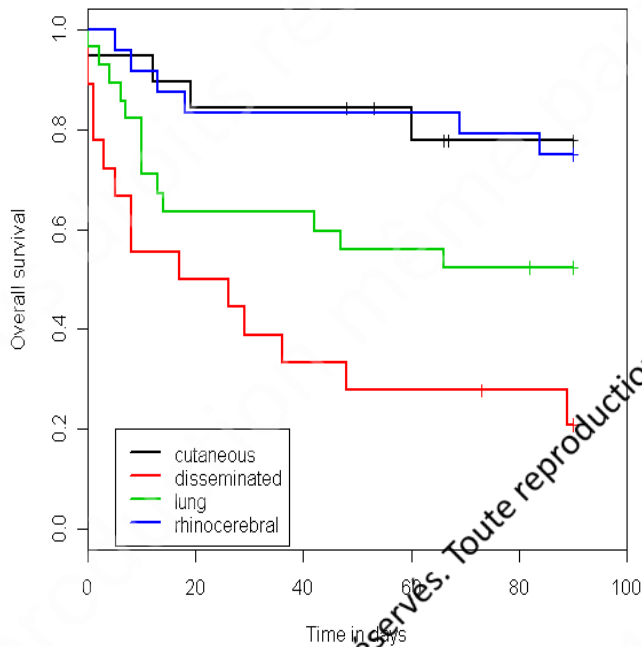
	No.(%) of Patients With Each Underlying Factor				
	Hematological Malignancy (n = 50)	Diabetes Mellitus (n = 23)	Trauma (n = 18)	SOT (n = 3)	Other (n = 7)
Lung	2 (4)	3 (13)	0	1	2
Rhinocerebral	6 (12)	16 (70)	1 (6)	0	2
Cutaneous	4 (8)	0	15 (83)	0	1
Disseminated	13 (26)	2 (9)	1 (6)	1	1
Other	5 (10)	2 (9)	1 (6)	1	1

<i>Rhizopus oryzae</i>	(32%)
<i>Lichtheimia</i> spp	(29%)
<i>Rhizopus microsporus</i>	(17%)
<i>Rhizomucor pusillus</i>	(7%)
<i>Cunninghamella</i> spp	(7%)
<i>Saksenaea vasiformis</i>	(3%)
<i>Mucor circillenioides</i>	(3%)
<i>Apophysomyces elegans</i>	(2%)

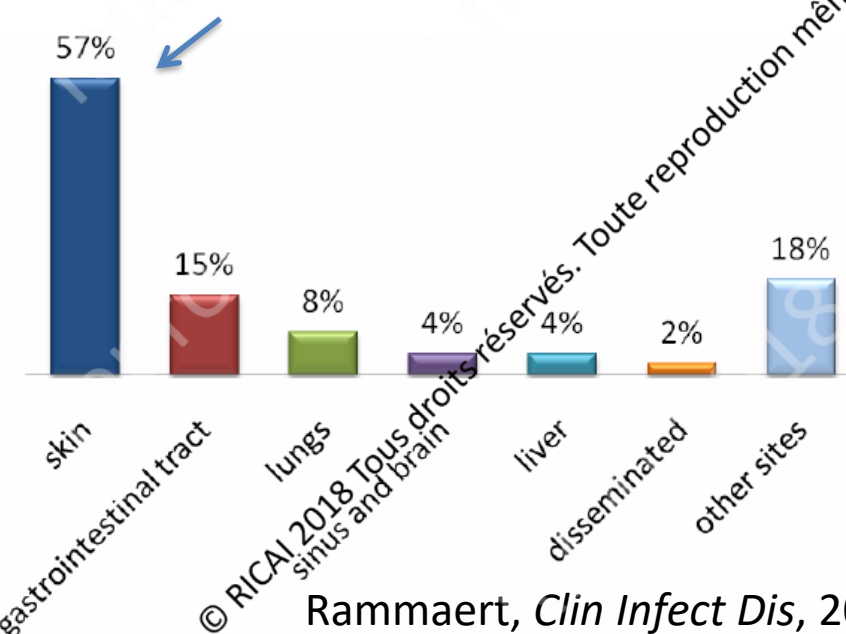
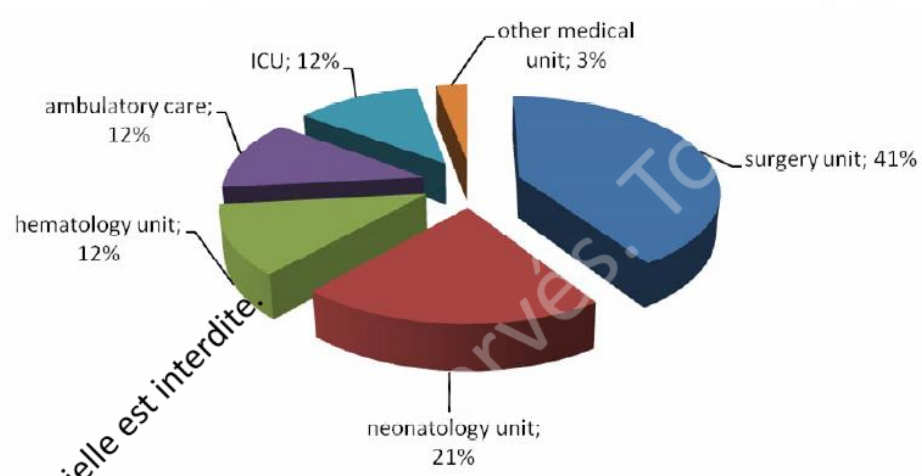
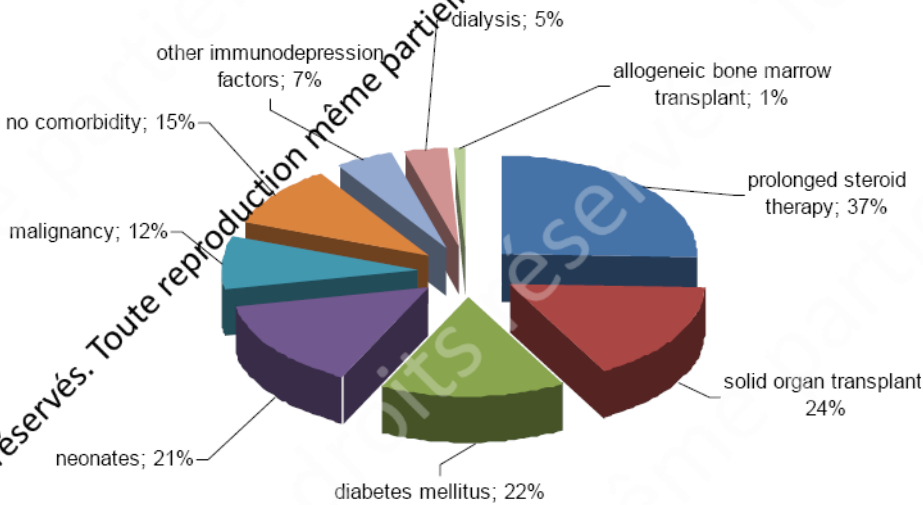
*Rhizopus oryzae* associated with rhino orbito cerebral location

# Mortality

- 60%, at M3: 44%



# Mucormycoses liées aux soins



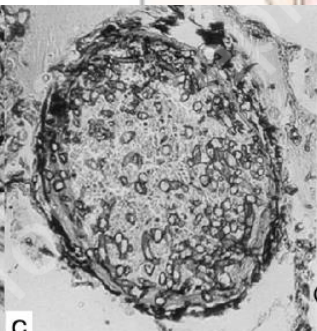
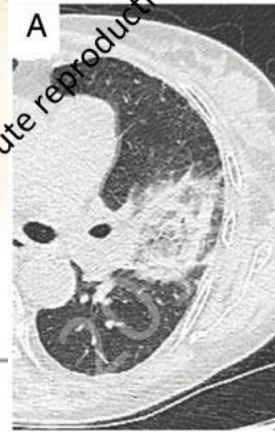
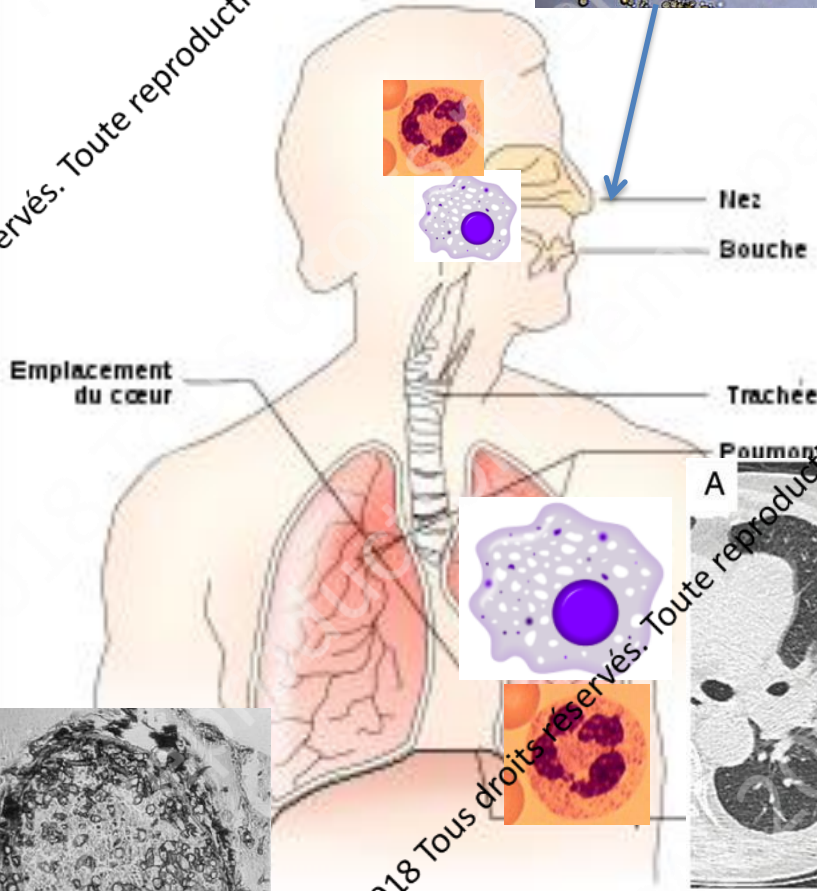
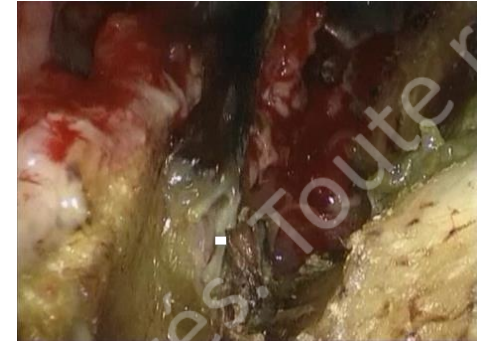
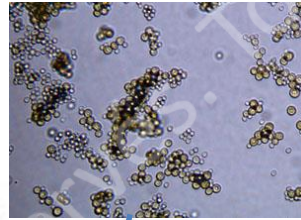
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 Rammaert, *Clin Infect Dis*, 2012

unpublished



# Mucormycoses

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Angiotropisme+++



Thrombose

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# Post traumatic mucormycosis

*Lelievre et al, Medicine 2014*

	Patients with PTM n=16	Other patients n=85	p
Median (IQC) age, years	42.9 (19-68.5)	55.5 (40.5-65.3)	0.42
Underlying disease	5 (31.2)	81 (95.3)	< 0.0001
Cutaneous localization	14 (87.5)	6 (7.1)	< 0.0001
Median time between symptoms and diagnosis, days	4.5 (0-317)	21 (0-210)	0.0002
Surgical treatment	15 (93.7)	39 (47)	0.0006

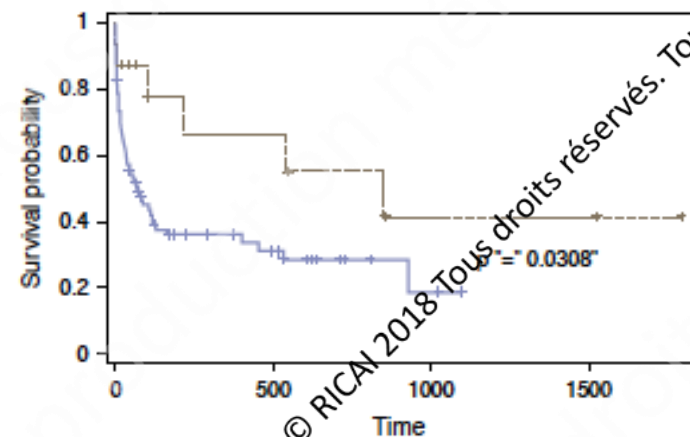
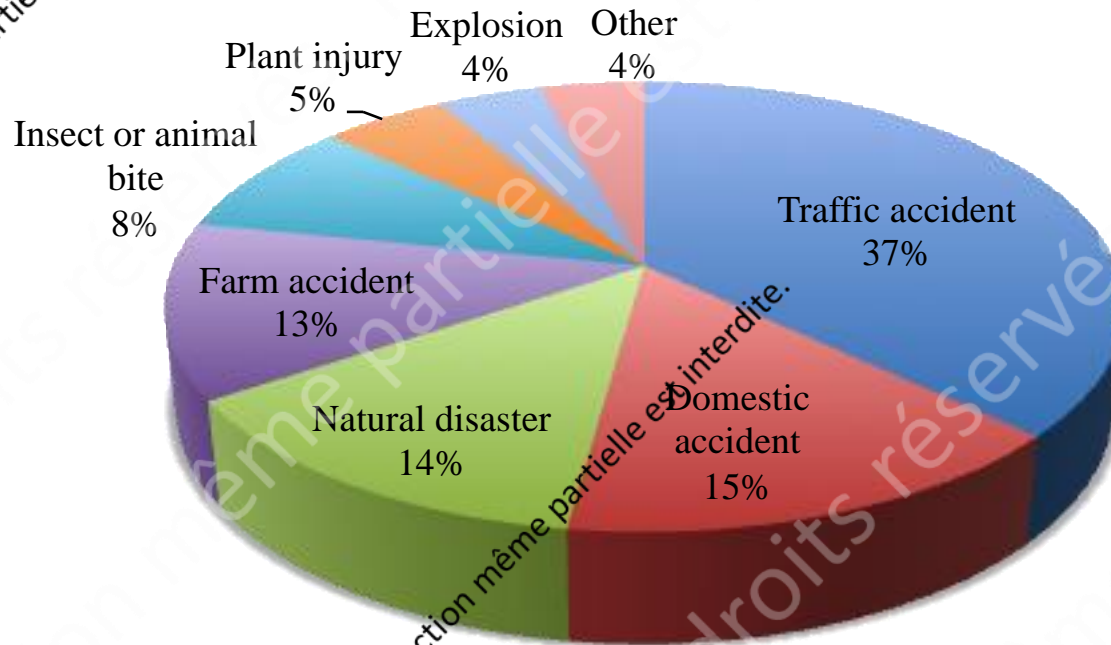


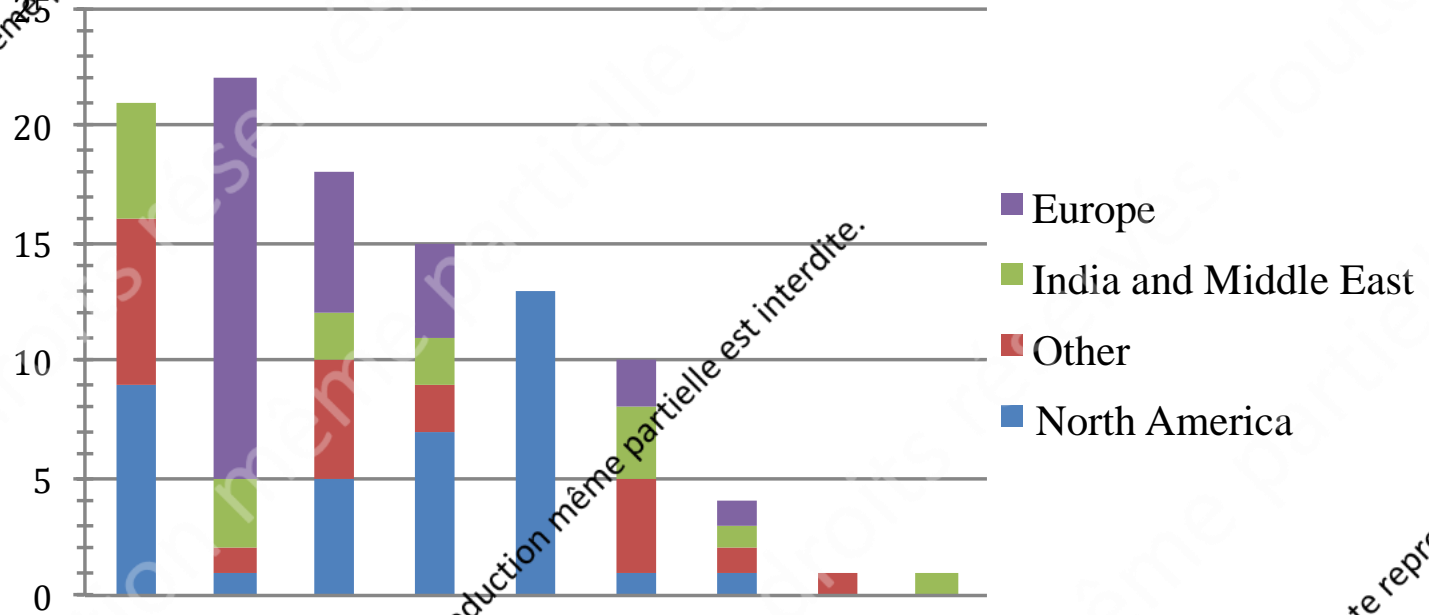
FIGURE 3. Survival of posttraumatic (dotted line) versus other forms of mucormycosis (blue line) in the RetroZygo study.

# Circumstances of trauma of 122 cases of PTM from literature review.



	RetroZygo (n =16), n (%)	Literature (n=122), n (%)
<b>Necrosis</b>	10 (62.5)	93 (76.2)
<b>Bacteria recovered from culture of wound</b>	8 (50)	50 (41.0)

# Distribution of Mucorales species according to the geographical origin (n=122)

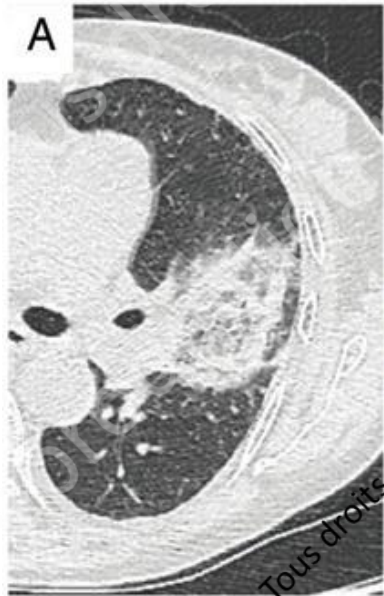


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# Diagnostic de mucormycose pulmonaire

## Signe du halo inversé

- Etude monocentrique
- Leucémie aigue



**Table 3. Evolution of Computed Tomographic Scans of 16 Patients With Proven Pulmonary Mucormycosis**

CT characteristics	Days 0–5	Days 6–14	Days 15–26
No. of patients with CT performed	16/16 (100)	11/16 (69)	11/16 (69)
No. of CTs performed	25	14	11
No. of patients with CT during neutropenia	15/16 (94)	9/11 (82)	4/11 (36)
Typical RHS	15/16 (94)	7/11 (64)	0/11 (0)
Diameter of lesion $\leq 3$ cm	2/16 (12)	0/11 (0)	1/11 (9)
Diameter of lesion $> 5$ cm	7/16 (44)	8/11 (73)	9/11 (82)
Micronodules	1/16 (6)	7/11 (64)	10/11 (91)
Pleural effusion	2/16 (12)	6/11 (55)	7/11 (64)
Air-crescent sign or cavitation	0/16 (0)	1/11 (9)	4/11 (36)

Data are presented as No. of scans with characteristic/No. of scans with available data (%). Day 0 corresponds to the day of the first CT scan. Micronodules are defined by diameter  $< 1$  cm.

Abbreviations: CT, computed tomography; RHS, reversed halo sign.

# qPCR Mucorale sur sérum: diagnostic et suivi

- Etude nationale rétrospective
- 44 patients avec mucormycose, 34 avec hémopathie
- Combinaison de 3 qPCR sur sérum: *Mucor*, *Rhizopus*, *Lichteimia*
- 81% qPCR positive
  - 92% quand technique correcte
- qPCR positive 9 jours avant diagnostic mycologique et 2 jours avant diagnostic radiologique
- Survie à J84 plus élevée chez les patients avec qPCR négative (48% vs 4%)
- qPCR pour le diagnostic et le suivi de mucormycose



# Clinical presentation

22 patients with rhino orbitocerebral mucormycosis from Retrozygo study

Symptoms	%
Cranial nerve palsy	68%
Pain	86%
Oedema	59%
Turbinal or nasal necrosis	40%
Palatine necrosis	31%
Low visual acuity	36%
Exophtalmia	23%
Chemosis	18%

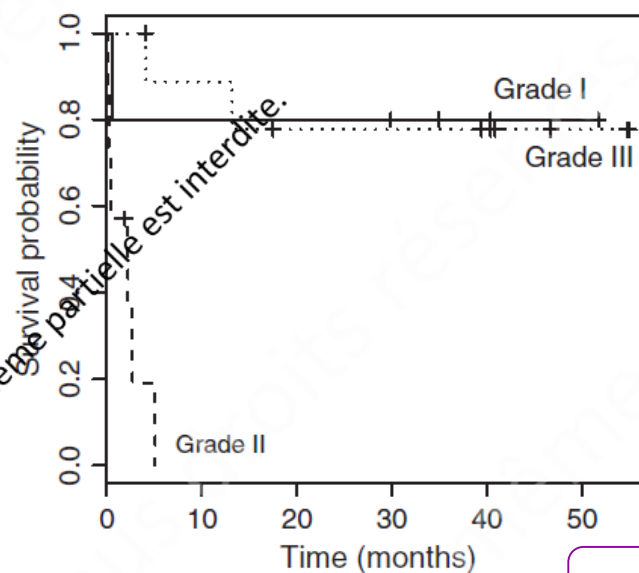
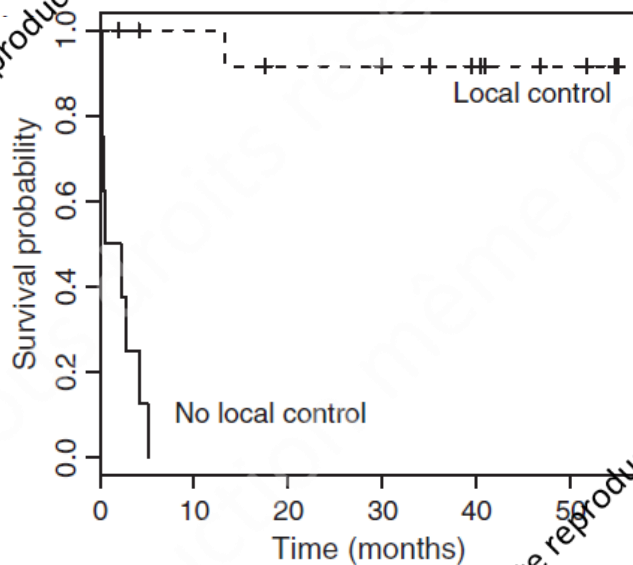


Vironneau P, CMI 2013

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# Place de la chirurgie dans les mucormycoses rhino-orbito-cérébrales



Grade	N (%)
I: Biopsy	5 (22)
II: Resection of necrosis	7 (32)
III: Extended surgery	10 (45)

PHRC MICCA

# Forte posologie d'amphotéricine B liposomale (10 mg/kg/j) dans le traitement de première ligne de la mucormycose

	Herbrecht, W4 or EOT if before (n=33) <sup>a</sup>	Segal, W4 or EOT if before (n=32) <sup>b</sup>	Herbrecht, W12 (n=31) <sup>c</sup>	Segal, W12 (n=31) <sup>c</sup>
Favourable response	12/33 (36%)	10/32 (31%)	14/31 (45%)	15/31 (48%)
partial response	6/33 (18%)	4/32 (13%)	4/31 (13%)	6/31 (19%)
complete response	6/33 (18%)	6/32 (19%)	10/31 (32%)	9/31 (29%)
Failure	21/33 (64%)	22/32 (69%)	17/31 (55%)	16/31 (52%)
stable	4/33 (12%)	7/32 (22%)	2/31 (6%)	1/31 (3%)
failure without death	10/33 (30%)	8/32 (25%)	2/31 (6%)	2/31 (6%)
death <sup>d</sup>	7/34 (21%)	7/34 (21%)	13/34 (38%)	13/34 (38%)
related to mucormycosis	5/34 (15%)		9/34 (26%)	
not related to mucormycosis	2/34 (6%)		4/34 (12%)	

L-AmB: liposomal amphotericin B  
EOT: end of treatment.

Doublement créatinine: 40%

# Posaconazole

## Nouvelles formulations disponibles

- Pas d'étude en première ligne
- Comprimés:
  - Indépendant de la prise alimentaire
  - Une prise par jour
  - 300mg/j
  - Comparaison 300mg comprimé vs 400mg X 2/j solution:
    - Solution 748 ng/ml; comprimé, 1,910 ng/ml;  $P < 0.01$
- IV:
  - Sur voie centrale

# Isavuconazole

- Nouveau azolé large spectre
- IV et PO
- Pas de cyclodextrine

Antifungal compound and species (no. of isolates)	EUCAST, day 1			EUCAST, day 2		
	Range (mg/liter)	MIC <sub>50</sub> (mg/liter)	% of MICs below <i>A. fumigatus</i> ECOFF <sup>c</sup>	Range (mg/liter)	MIC <sub>50</sub> (mg/liter)	% of MICs below <i>A. fumigatus</i> ECOFF <sup>c</sup>
<b>Amphotericin B</b>						
<i>Lichtheimia corymbifera</i> (12)	≤0.03 to 0.125	≤0.03	100	≤0.03 to 0.25	0.125	100
<i>Lichtheimia ramosa</i> (4 <sup>a</sup> /5)	≤0.03	≤0.03	100	≤0.03 to 0.06	0.06	100
<i>Mucor circinelloides</i>						
Group I (4/5 <sup>b</sup> )	≤0.03 to 0.125	≤0.03	100	≤0.03 to 0.125	0.06	100
Group II (9)	≤0.03 to 0.125	0.06	100	0.06 to 0.25	0.125	100
<i>Rhizomucor pusillus</i> (8 <sup>a</sup> /9)	≤0.03	≤0.03	100	≤0.03 to 0.25	0.06	100
<i>Rhizopus microsporus</i> (26)	0.06 to 0.5	0.125	100	0.25 to 1	0.5	100
<i>Rhizopus oryzae</i> (6)	0.125 to 0.5	0.25	100	0.5 to 1	0.5	100
Total (70/72 <sup>a,b</sup> )	≤0.03 to 0.5	0.06	100	≤0.03 to 1	0.125	100
<b>Isavuconazole</b>						
<i>Lichtheimia corymbifera</i> (12)	0.5 to 2	1	100	1 to 4	2	67
<i>Lichtheimia ramosa</i> (4 <sup>a</sup> /5)	0.125 to 0.5	0.25	100	0.5 to 4	2	60
<i>Mucor circinelloides</i>						
Group I (4/5 <sup>b</sup> )	4 to 8	8	0	2 to 16	16	26
Group II (9)	1 to 16	8	11	4 to >16	16	100
<i>Rhizomucor pusillus</i> (8 <sup>a</sup> /9)	0.5 to 1	0.5	100	1 to 2	2	100
<i>Rhizopus microsporus</i> (26)	0.5 to 4	1	92	1 to 8	4	35
<i>Rhizopus oryzae</i> (6)	0.5 to 4	1	83	0.5 to 8	4	33
Total (70/72 <sup>a,b</sup> )	0.125 to 16	1	77	0.5 to >16	4	44
<b>Posaconazole</b>						
<i>Lichtheimia corymbifera</i> (12)	0.06 to 0.25	0.125	100	0.125 to 0.5	0.25	75
<i>Lichtheimia ramosa</i> (4 <sup>a</sup> /5)	≤0.03 to 0.125	≤0.03	100	0.06 to 0.5	0.5	40
<i>Mucor circinelloides</i>						
Group I (4/5 <sup>b</sup> )	0.25 to 1	0.5	40	0.5 to 8	1	0
Group II (9)	0.125 to >16	2	11	0.5 to >16	>16	0
<i>Rhizomucor pusillus</i> (8 <sup>a</sup> /9)	≤0.03 to 0.125	0.06	100	0.125 to 0.5	0.25	78
<i>Rhizopus microsporus</i> (26)	0.25 to 1	0.5	12	0.5 to >16	2	0
<i>Rhizopus oryzae</i> (6)	0.25 to 2	0.5	50	0.25 to >16	0.5	17
Total (70/72 <sup>a,b</sup> )	≤0.03 to >16	0.25	47	0.06 to >16	1	26



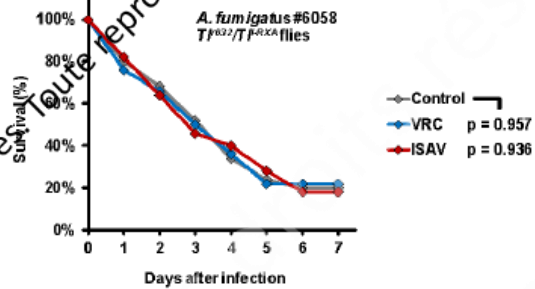
# Pre-Exposure to Isavuconazole Increases the Virulence of Mucorales but not *Aspergillus fumigatus* in a *Drosophila melanogaster* Infection Model

Running Title: Isavuconazole-associated hyper-virulence in *Drosophila*

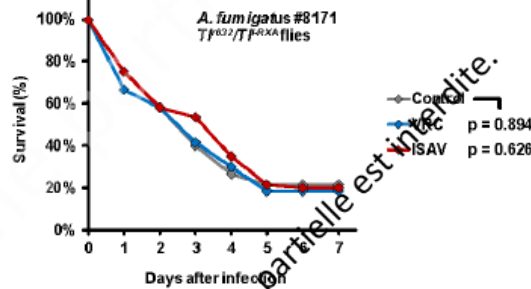
Sebastian Wurster<sup>1</sup>, Russell E. Lewis<sup>2</sup>, Nathaniel D. Albert<sup>1</sup>, Dimitrios P. Kontoyiannis<sup>1#</sup>

AAC, 2018

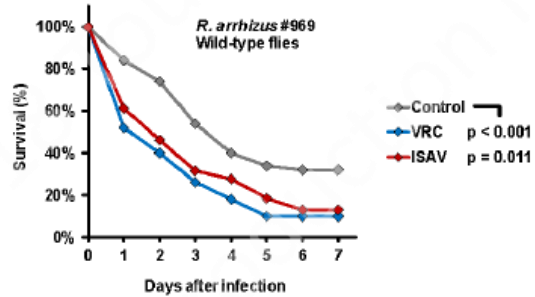
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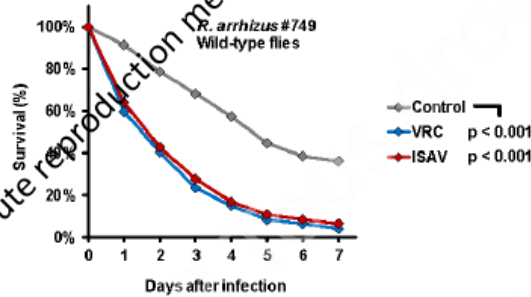
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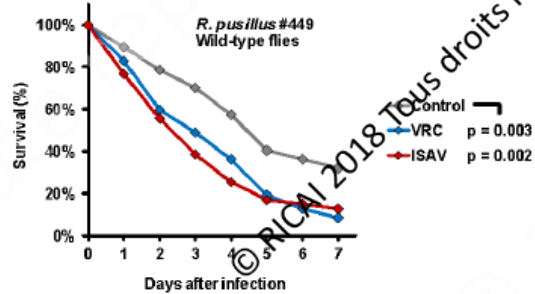
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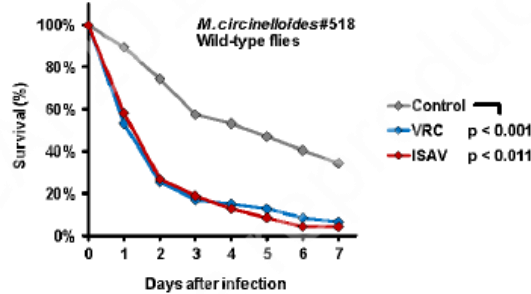
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# Isavuconazole dans le traitement de mucormycoses: étude VITAL

**24/37 arrêts de traitement**

Décès: 11 (30%)

Effets indésirables: 6 (16%)

Non compliance: 4 (11%)

Non réponse: 3

	Primary treatment group (N=21)	Refractory group (N=11)	Intolerant to other antifungals group (N=5)	Total (N=37)
<b>DRC-assessed overall response at day 42</b>				
Complete response	0	0	0	0
Partial response	3 (14%)	1 (9%)	0	4 (11%)
Stable disease	9 (43%)	4 (36%)	3 (60%)	16 (43%)
Progression of disease	1 (5%)	0	0	1 (3%)
Death	7 (33%)	4 (36%)	2 (40%)	13 (35%)
Missing data	1 (5%)	2 (18%)	0	3 (8%)
<b>DRC-assessed overall response at day 84</b>				
Complete response	1 (5%)	1 (9%)	0	2 (5%)
Partial response	1 (5%)	3 (27%)	1 (20%)	5 (14%)
Stable disease	9 (43%)	0	2 (40%)	11 (30%)
Progression of disease	0	1 (9%)	0	1 (3%)
Death	9 (43%)	4 (36%)	2 (40%)	15 (41%)
Missing	1 (5%)	2 (18%)	0	3 (8%)
<b>DRC-assessed overall response at EOT†</b>				
Complete response	3/19 (16%)	2 (18%)	0	5/35 (14%)
Partial response	3/19 (16%)	2 (18%)	1 (20%)	6/35 (17%)
Stable disease	6/19 (32%)	2 (18%)	2 (40%)	10/35 (29%)
Progression of disease	7/19 (37%)	5 (45%)	2 (40%)	14/35 (40%)
<b>DRC-assessed success rate at EOT</b>				
Clinical response	10/18 (56%)	2/9 (22%)	2/4 (50%)	14/31 (45%)
Mycological response	6/19 (32%)	4/11 (36%)	2/5 (40%)	12/35 (34%)
Radiological response	3/18 (17%)	2/10 (20%)	1/5 (20%)	6/33 (18%)
All-cause mortality through day 42‡	7 (33%)	5 (45%)	2 (40%)	14 (38%)
All-cause mortality through day 84‡	9 (43%)	5 (45%)	2 (40%)	16 (43%)

# Isavuconazole et mucormycose

	Vital study 1st line Isavuconazole N=21	AmBizygo study L AmB high dose N=33
<b>Chirurgie</b>	<b>43%</b>	<b>71%</b>
<b>Response W4</b>		<b>31%</b>
Partial response		13%
Complete response		19%
Décès		21%
<b>Response W6</b>	<b>14%</b>	
Partial response	0	
Complete response	14%	
Stable	43%	
Décès	33%	
<b>Response W12</b>	<b>10%</b>	<b>48%</b>
Partial response	1 (5%)	19%
Complete response	1 (5%)	29%
Stable	9 (43%)	6%
Décès	43%	38%

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# Conclusion

Mucormycosis suspicion

- Radio-clinical presentation and Risk factors: diabetes mellitus

Diagnosis emergency

- Serum PCR
- Specimen at infection site

Therapeutic emergency:

- Surgery
- Antifungal:
  - Liposomal Amphotericin B  $\geq 5$  mg/kg
  - Isavuconazole if not tolerated

When to step down?

- Negative PCR
- Radio clinical stabilization

Which antifungal to step down with?

- Isavuconazole
- Posaconazole

# Remerciements

- Réseau RESSIF
- CCNRMA
- Mycoses study group
- CNRMA: Françoise Dromer, Dea Garcia-Hermoso, Olivier Lortholary, Stéphane Bretagne, Gregory Jouvion, Fabrice Chretien, Alexandre Alanio
- Service de maladies infectieuses: Hôpital Necker, Olivier Lortholary, , mycologie: Dr Bougnoux, hématologie, transplantation hépatique
- Service d'ORL: Hopital Lariboisière Pr Kania, Dr Vironneau