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TACROLIMUS AS A POTENTIAL RISK OF ORAL CANDIDIASIS

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Successful transplantation of organs depends on the quality of the donor organ, surgical procedure and proper immunosuppressive regimen. Immunosuppressive therapy in transplantology is divided due to its duration and indications in three groups-induction therapy, maintenance therapy and anti-rejection treatment. Immunosuppressants are medicants with a range of effects, some of them are adverse. Use of immunosuppressants can cause reactivation of virus disease or can lead to oral candidiasis manifestation due to its infuence on immunity. Long-term immunosuppression consists mainly inhibitors of calcineurin-tacrolimus or cyclosporin A, usually in combination with steroids or other immunosuppressants. Tacrolimus is one of the main immunosuppressants in transplantology. Nystatin is a well-known antifungal drug. We would like to present some experiences with using nystatin suspension in treatment of oral candidiasis in transplanted patients with combined immunosuppressive therapy (mainly consist from tacrolimus and steroids).

Biography

Markéta Janovská completed her study from Charles University in Prague, and started to work in the Department of Oral Medicine of Všeobecná fakultní nemocnice v Prague, Institute of Dental Medicine. She is Lecturer of Medical Students of First Faculty of Medicine, External Lecturer of Dental Hygienists and Profimed s.r.o. in Oral Medicine. She has been a Speaker in international symposiums – Prague Dental Days, Slovakia Dental Days (2017), and lectures on postgraduate education courses for Otorhynolaryngologists and Dermatologists. She cooperates in research of recurrent aphthous stomatitis. She is currently preparing for her PhD studies.

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