**Table 1. Prevalence of risk factors.**

<table>
<thead>
<tr>
<th>Predispersing factor</th>
<th>Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use of broad-spectrum antibiotics</td>
<td>100% (77)</td>
</tr>
<tr>
<td>Presence of central venous catheter</td>
<td>77.8% (779)</td>
</tr>
<tr>
<td>Surgical intervention/US guided aspiration</td>
<td>100% (13/13)</td>
</tr>
<tr>
<td>Intensive care unit (ICU) admission</td>
<td>35.7% (5/14)</td>
</tr>
</tbody>
</table>

**P235**

**Overview of post-covid mucositis in a tertiary care hospital in South India**

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Poster presenter 2, September 22, 2022, 12:30 PM - 1:30 PM

Introduction: The unprecedented rise of COVID-associated mucositis (CAM) cases even before the havoc caused by COVID-19 pandemic could pose a major challenge to the medical fraternity. COVID-associated mucor infection has been described as a risk factor for the development of CAM, which may impair the oral health of patients and limit their compliance with anti-COVID treatment. The aim of the current study was to analyze the occurrence and risk factors of CAM in a tertiary care hospital.

Methods: An observational study was done on the clinical, microbiological, hematological, imaging, and treatment data of patients with mucor infection in the setting of COVID-19 during the period of 2020-2022 and analyzed. Results: Of the 63 patients analyzed, 27 were male and 9 were female. In all, 75% of patients (27 were diabetic; 24 patients (46%) had severe COVID-19 pneumonia. A total of 20 patients were treated with steroids; 25 patients required supplemental oxygen. The most common type was sinusitis (26 patients) followed by tracheo-orbital disease (13 patients). Patients developed clinical symptoms within 4 to 6 weeks of COVID-19 onset.

Conclusions: Mucor infection is a serious infection that can affect any mucosal tissue. The earliest presentation of CAM may be a good indicator for the development of mucosal infections. The detected risk factors for CAM include diabetes, smoking, and pre-existing respiratory infections. Further research is needed to identify and mitigate these risk factors to improve patient outcomes.

**P236**

**The role of Candida in acute pancreatitis: A deregulated pathogen**

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Poster presenter 2, September 22, 2022, 12:30 PM - 1:30 PM

Background: Acute pancreatitis is a complex neuroendocrine, inflammatory, and coagulopathic process resulting in dysfunction of the exocrine pancreas. The role of microorganisms in acute pancreatitis has been widely explored, but the role of Candida in acute pancreatitis is not well understood. The present study aimed to determine the role of Candida in acute pancreatitis patients.

Methods: A prospective, observational study was conducted in the emergency department of a tertiary care hospital in India. Patients with acute pancreatitis were included in the study, and Candida infection was assessed using blood cultures. The data was analyzed using SPSS statistical software.

Results: A total of 100 patients with acute pancreatitis were included in the study. Candida infection was detected in 23% of the patients. The most common Candida species isolated were C. albicans (50%) and C. tropicalis (30%). Candida infection was associated with a higher severity of acute pancreatitis and a higher incidence of complications. The mortality rate was significantly higher in patients with Candida infection compared to those without.

Conclusions: The role of Candida in acute pancreatitis should be further explored through larger studies to determine the mechanism of Candida infection in acute pancreatitis. It is important to develop effective strategies to prevent and treat Candida infection in acute pancreatitis patients to improve patient outcomes.

**P237**

**Disseminated histoplasmosis from skin to adrenal: a cosmetic catastrophe—a rare case report**

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Poster presenter 2, September 22, 2022, 12:30 PM - 1:30 PM

Background: The various presentations of histoplasmosis are always a diagnostic dilemma for clinicians. Cases of disseminated histoplasmosis can present in multiple specialties like dermatology, medicine, endocrinology, with skin, and mucosal hyperplasia as the only major symptom.

Case Report: Here we present a case of a 54-year-old male with hyperplastic lesion over the body with multiple mucosa involvement. The patient had been investigated and treated for the past 2 years. There was a significant history of loss of weight over a period of 2 years, and the oral lesions were found to be not healing. The histopathological diagnosis showed the presence of Histoplasma capsulatum in the tissue. The patient was treated with antifungal therapy, which resulted in significant improvement.

Conclusion: Histoplasmosis is an important entity, and a lack of information regarding the various clinical presentations and treatment options is challenging. The diagnosis of histoplasmosis should be considered in patients presenting with constitutional symptoms and adrenal masses with or without adrenal insufficiency. Adrenal histoplasmosis can be the only possible presentation in disseminated histoplasmosis.