

Impact of Anidulafungin Treatment in Obese Patients with Candidemia: Retrospective Cohort Study

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ABSTRACT

Pharmacokinetic studies suggested the need to increase anidulafungin dose in obesity, but the clinical data are limited. This study aimed to evaluate the impact of anidulafungin in obese adults with candidemia. A retrospective cohort study was conducted between 2015 and 2022. Hospitalized adults who received anidulafungin for at least 72 hours for confirmed candidemia were included. The primary outcome was global response, while the secondary outcomes included clinical response on days 7 and 14, 30-day all-cause mortality, candidemia recurrence within 90 days, and length of hospital stay after culture collection. A total of 190 patients were included (70 in the obese group and 120 in the non-obese group). 74% were admitted to the ICU at the time of candidemia. The most common infection site was intravascular (67%), followed by intra-abdominal (29%). No statistically significant differences were found between the obese group and non-obese group in global response (47.1% vs. 56.7%, respectively; $P=0.204$), clinical response, whether on day 7 (57.1% vs. 60.0%; $P=0.699$) or day 14 (52.9% vs. 58.3%; $P=0.463$), 30-day all-cause mortality (31.4% vs. 31.7%; $P=0.973$), recurrent candidemia within 90 days (7.1% vs. 6.7%; $P=0.900$), or length of hospital stay after *Candida* blood culture collection date (34 days vs. 29 days; $P=0.271$). Obesity was not significantly associated with differences in the global response, clinical response, mortality, recurrence, and length of hospital stay in hospitalized adults with candidemia. Future studies of larger sample sizes, ideally randomized controlled trials, are needed to confirm these findings.

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