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**Fusarium Infection in a Lung Transplant Patient and a Simultaneous Heart-Kidney Transplant Patient.**

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*Fusarium* spp. constitute a genus of filamentous fungi found ubiquitously in the environment. Occasionally, they can lead to invasive fungal infections in immunocompromised individuals. Despite the high mortality rate associated with invasive fusariosis, no well-established treatment protocol exists. There are only a limited number of case reports in Korea. This study presents two recent cases of *Fusarium* lung infections occurring in a simultaneous heart-kidney transplant recipient and a lung transplant recipient at Pusan National University Yangsan Hospital. case1. A 64-year-old man with idiopathic pulmonary fibrosis received lung transplantation in February 2023. The patient received empirical voriconazole prophylaxis for 3 months. Following a bronchoscopy conducted at the 3-month post-transplantation follow-up, *Fusarium* spp. was detected in bronchial washing. Two nodules with reversed halo signs were observed in the right upper lobe in the chest CT, suggesting invasive fungal infection. Subsequently, the patient initiated amphotericin B treatment, and the target level of tacrolimus was also downwardly adjusted. The patient developed acute kidney injury, so from amphotericin to posaconazole was changed and he was discharged without complications. Case2 was a 64-year-old man with a medical history of heart failure, CAOD, and ADPKD. He underwent a simultaneous heart-kidney transplant in April 2023. In a chest CT scan performed one month after transplantation, multiple nodules of variable size were observed in both lungs. Invasive fungal infection was suspected, and voriconazole treatment was started. After using voriconazole for 7 days, variable-sized nodules and patchy GGO in both lungs increased, and cavitary lesions in the left lower lobe worsened. *Fusarium* spp. was identified in the sputum culture test and replaced with amphotericin B. Unfortunately, he developed pneumonia, septic shock, and eventually expired. Since *fusarium* can cause serious infections that can lead to death in immunocompromised patients, early detection and appropriate treatment are necessary, and antifungal drugs should be discussed.