

中文題目：非 HIV 肺部隱球菌感染病人之臨床與影像學表現

英文題目：Clinical presentations and radiological findings of pulmonary cryptococcosis in non-HIV patients.

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Background: Pulmonary cryptococcosis in non-human immunodeficiency virus (HIV)-infected population is uncommon. The aim of this study is to clarify the clinical characteristics of this population.

Material and Method: We retrospectively investigated the Non-HIV infected patients who had been diagnosed with pulmonary cryptococcosis at Taichung Veterans General Hospital between 2005 and 2019. Subjects with extrapulmonary involvement were allowed. The clinical presentations and radiological manifestations were examined.

Results: A total of 321 patients were identified. 65.4% of these patients were symptomatic. Cough (40.2%) was the most common presenting symptom, followed by fever (13.1%), shortness of breath (7.2%), and chest pain (6.5%). Twenty-two patients (6.9%) had extrapulmonary involvement, and the central nervous system was the most frequent infective site (n = 18). With regards of radiological findings, amongst 305 patients who underwent computed tomography at diagnosis, 185 (60.7%) and 120 patients (39.3%) had single lobe and multiple lobe involvement, respectively. The most common findings were multiple nodules or masses with or without cavitation (n = 161, 52.8%), consolidation (n = 52, 17.0%), and solitary nodule or mass with or without cavitation (n = 48, 15.7%). In our population, 204 patients (63.6%) had at least one underlying comorbidities, whether 67 patients (20.9%) had two or more. The most common comorbidities were diabetes mellitus, malignant solid tumor, and autoimmune disease. Patients with comorbidity, particularly those with multiple comorbidities, had a higher multilobar and extrapulmonary involvement (P < 0.001 and = 0.004, respectively), which explained the more symptomatic of these patients.

Conclusion: A significant portion of non-HIV pulmonary cryptococcosis patients were asymptomatic. The most common radiological findings were masses and nodules. Underlying comorbidities correlated with the radiological and clinical presentations.