

that show septate hyphae in tissues. The organism is difficult to differentiate from *Aspergillus* species in tissues; thus, identification with culture is imperative. An extremely helpful diagnostic clue is growth in blood cultures, which are positive in as many as 50% of patients with disseminated fusariosis.

Treatment and Prognosis *Fusarium* species are resistant to many antifungal agents. A lipid formulation of AmB, voriconazole, or posaconazole is recommended. Many physicians use both a lipid formulation of AmB and either voriconazole or posaconazole because susceptibility information is not standardized and is not always predictive of clinical response. Serum drug levels should be monitored with either azole to ensure that absorption is adequate and with voriconazole to avoid toxicity. Mortality rates for disseminated fusariosis have been as high as 85%. With the improved antifungal therapy now available, mortality rates have fallen to ~50%. However, if neutropenia persists, the mortality rate approaches 100%.

■ SCEDOSPORIOSIS AND LOMENTOSPORIOSIS

Etiologic Agent, Epidemiology, and Pathogenesis *Scedosporium apiospermum* complex, which is composed of several related species, is reported more often as a cause of human infection than *Lomentospora prolificans*, formerly *Scedosporium prolificans*, but both are major pathogens in immunocompromised hosts, causing pneumonia, disseminated infection, and brain abscess. Organisms of the *S. apiospermum* complex are found worldwide in temperate climates in tidal flats, swamps, ponds, manure, and soil. *L. prolificans* also is found in soil but is more geographically restricted. Infection occurs predominantly through inhalation of conidia, but direct inoculation through the skin or into the eye also can occur.

Clinical Manifestations Among immunocompetent persons, *Scedosporium* and *Lomentospora* species are a prominent cause of eumycetoma. Keratitis as a result of accidental corneal inoculation is a sight-threatening infection. In patients who have hematologic malignancies (especially acute leukemia with neutropenia),