# Challenges faced in managing the rhino-cerebral mucormycosis (RCM) during COVID-19 pandemic in resource limited settings

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**Introduction:**

- Rhino-cerebral mucormycosis is a rare, potentially fatal, opportunistic fungal infection
- Early diagnosis, extensive surgical debridement, prolonged antifungal therapy, and control of underlying co-morbidities are essential for favorable outcome

- All 5 patients had COVID-19 pneumonia and had received steroid within 3 months prior to onset of RCM
- Three had poor glycaemic control
- All presented with localising symptoms like headache, visual changes, proptosis, and cranial nerve palsies

**Diagnosis:**

All the patients were commenced on Amphotericin B based on clinical suspicion

**CT scans**: showed paranasal sinus involvement, with or without evidence of intracranial extension

**Rigid nasal endoscopy:** evidence of tissue destruction with fungal debris

**MRI scans:** Confirmation of initial diagnosis and extent of disease

**FESS:** Histological and Microbiological diagnosis

**Outcome:**

3 patients recovered with surgical interventions and antifungal treatments and 2 patients died

- **The limited availability MRI scans results in delay in confirming the diagnosis**
- **Facilities for fungal cultures and anti-fungal sensitivity testing are not available on site, hence result in further delays**
- **No newer antifungals available for combination and inadequate facilities for therapeutic drug monitoring**