

Moderator: take a look at this pictures and tell me what do you think? Do you recognize any of these?

Respondent: this is the fungal infection of the nail and this is the skin fungal infection.

Moderator: are these fungal infection common here? Is it a problem here?

Respondent: they are common.

Moderator: are they bad to the people who gets it? Is it bad for people who are living with this disease?

Respondent: specially people who are coming from remote and in the HIV patients it's common. They are suffering from this.

Moderator: What would you do if People come to you with this?

Respondent: we had an antifungal ointment with for the disease such like this. The ketoconazole cream and. Also we do have the PO antifungal medication, even though they are hepatotoxic. Since they will take it for a prolonged period of time, more than eight weeks and so that will cause the hepatotoxicity. So the patient with the HIV/AIDS will not take because of the side effect it had. So the ART drug they may cause the hepatotoxicity.

Moderator: would you prescribe the oral antifungal for the HIV patients?

Respondent: if it's the local type if not disseminated we can give the topical one. But if it's the systemic type we will give the oral antifungal.

Moderator: do you know wich systemic antifungal you can prescribe?

Respondent: for example, Amphotericin B is available as the IV medication.

Moderator: do you use that commonly?

Respondent: we don't use it commonly. We commonly use the topical antifungal. And the ketoconazole.

Moderator: and the ketoconazole cream is it easy to find?

Respondent: it's easily available. In pharmacy.

Moderator: do they go and buy from the private pharmacy? Or to the hospital?

Respondent: they can have buy from the hospital. And can also buy from the community pharmacy. Sometime they can also buy from the private pharmacy. It's available I think generally.

Moderator: what about the oral antifungal are they available all the time?

Respondent: am not sure.

Moderator: is there a social stigma in the society of people having this?

Respondent: if they have the HIV they will be socially isolated. There is stigma actually if it's known that they have the HIV in the society.

Moderator: if you have a patient like this and they have a radiograph of like this. And they have chronic cough what will be your diagnosis?

Respondent: this can be TB and if it's in immunocompromised individual it can be PCP. It can also be the histoplasmosis.

Moderator: so, if someone is presented to you and you have a radiograph like this what will you do next?

Respondent: I think, I will first check their immune status, their HIV status should be known. Opportunistic infection like the: PCP, histoplasmosis, including pulmonary can be considered. But in the immune competent individuals typical pneumonia of the medial type can be considered.

Moderator: at what stage will you start the treatment for the TB? There will be other test other than this like the sputum test? Or would you start the treatment?

Respondent: in such case if for example the cough is productive, then we will do the gene expert. After the gene expert we will also do the sensitivity test. And possible multi drug resistance for TB. Then we will diagnose and we will treat.

Moderator: if you diagnosed histoplasmosis from this what will be your treatment?

Respondent: I don't specifically agree but the antifungal should be given.

Moderator: would you give IV or PO do you know?

Respondent: I think IV.

Moderator: so the Amphotericin B.

Moderator: and the Amphotericin B, easily available where do you get it?

Respondent: it's not easily available.

Moderator: where do you get it do you know?

Respondent: probably it can be available at the community pharmacy. And at the private pharmacy. It's not found at the government hospital.

Moderator: has it been available? And you will out and search for it?

Respondent: I have to go and search every time.

Moderator: if they are going to buy from the private pharmacy, is it the hospital going to cover the expense or the patient itself?

Respondent: the private pharmacy is obviously expensive and so some patient can't afford that. In the private it's like four or three times of the price of the government. So it's very expensive.

Moderator: what do you think affects the availability of the Amphotericin B at the government hospital?

Respondent: I think it's the nephrotoxic. That is why they are not using it commonly the other thing is it is not diagnosed commonly? There is misdiagnosing of such disease, under diagnosing of such disease. That's why people are not commonly using it.

Moderator: do you think if this is the histoplasmosis do you think it will be misdiagnosed as TB?

Respondent: yea. Because it looks the same.

Moderator: on the X- ray it seems medial tuberculosis. It can easily misdiagnosed with pulmonary Tuberculosis.

Moderator: do you have any issue of resistance regarding the systemic antifungals?

Respondent: we haven't done any research regarding the resistance. But the oral or the systemic fluconazole, hepatotoxicity is very common we do have this problem when treating the tenia capitis, tenia pedis and so on. It will cause severe hepatotoxicity.

Moderator: what is the symptom of that hepatotoxicity? What do you see on the patient?

Respondent: they will have yellowish discoloration of their eyes. Vomiting, nausea, decrease appetite and easily fatigued. These are the sign of acute hepatitis.

Moderator: what do you do when they come to you?

Respondent: we will stop the treatment. And if possible we will shift it the topical antifungal. That side effect can be managed in this way.

Moderator: do people are aware of this that it will transmit from the person to person? Do you give the patient any advice on how to not spread to their families and friends?

Respondent: we don't commonly advise them actually. About this communicable antifungals.

Moderator: when you are choosing what kind of drug to get, so for example topical ketoconazole? Do you have any options of brands?

Respondent: we will only use the generic name.

Moderator: are there options for the topical or only the ketoconazole?

Respondent: ketoconazole only.

Moderator: have a look at this picture. And do you recognize this? In this area?

Respondent: yea. I commonly see this lesions on the horses. I don't think this as clinical cases.

Moderator: and so this one of the cause of the fungal infection, and can be transmitted to human. Do you know if your patient can handle such like horse and can get the disease?

Respondent: no they don't know. But we know that we can acquire fungal infection from horses.

Moderator: when you have your patient for the clinical history will you ask them whether they have horses?

Respondent: no.

Moderator: do people complain about taking the medication, for long period of time?

Respondent: since the patient will take the drug for weeks and months they may not take medication they may forget. That is the very difficult.

Moderator: do they often come back to you for it's not resolved for that reason?

Respondent: they will come back with no resolution and also they can come back with the recurrence.

Moderator: what do you do at that moment?

Respondent: probably we can consider resistance. And we will do the KOH examination.

Moderator: do you get the advertisement from the private company about the antifungal medications? To your hospital?

Respondent: commonly we don't have the advertisement. They simply buy from the PFSA.

Moderator: do you have anything you want to add about the antifungal medication? Or the antifungal infection?

Respondent: fungal infections are actually very common here in Ethiopia, since we are not the developed country. And also the fungal infections are misdiagnosed, mistreated because of the lack of education and attitudes. If training is given for every health professional they can better understand about the disease.

Moderator: do you think there should be any policy changes so that the drugs like the Amphoteric can be available?

Respondent: I think that can help our treatment. If it's available.