

# **Mucormycosis- A Case Report**

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## **ABSTRACT:**

Mucormycosis, an aggressive and opportunistic fungal infection caused by *Rhizopus* sp., *Mucor*, and *Lichtheimia*, poses a significant challenge in the post-COVID era. Previously considered a rare occurrence, mucormycosis has witnessed a surge in cases, particularly affecting the nose, paranasal sinuses, and cerebral tissue. These fungal pathogens exhibit a destructive behaviour, eroding small blood vessels and leading to thrombosis, ischemia, and tissue necrosis. Patients with compromised systemic health, such as diabetes mellitus, leukemia, and immunosuppressive therapy, are particularly susceptible to this infection due to impaired immunity.

The various clinical manifestations of mucormycosis are categorized into rhinocerebral, pulmonary, cutaneous, gastrointestinal, and disseminated forms. Within the rhinocerebral form, subdivisions based on the affected tissues further refine the classification like rhino-orbital, rhino-sino-orbital, rhino-orbito-cerebral.

Fungal culture remains a cornerstone for identifying the causative organism, while magnetic resonance imaging is the gold standard for radiological evaluation, offering detailed imaging of the affected regions. Computed tomography scans also play a crucial role in the diagnostic pathway.

With dental practitioners encountering an increasing number of mucormycosis cases, Cone Beam Computed Tomography has emerged as a valuable diagnostic tool. Recent advancements have led to the development of diagnostic criteria based on CBCT findings, aiding in the accurate and timely diagnosis of mucormycosis. We report a case of mucormycosis affecting maxilla highlighting the importance of CBCT in addition to conventional diagnostic methods thereby improving its management and clinical outcome.

**KEYWORDS:** mucormycosis; COVID-19; CBCT.