



قال الله تعالى:

( وَعَلَّمَكَ مَا لَمْ تَكُنْ تَعْلَمُ وَكَانَ فَضْلُ اللَّهِ عَلَيْكَ عَظِيمًا )

سورة النساء آية (١١٣)

## Dedication

*First and foremost I pray to ALLAH ALMIGHTY to bless my humble efforts with his  
grace and acceptance.*

*Then I would like to express thanks covered with love to my parents, I can barely find  
words to express all the wisdom, love and support given to me for that I'm eternally  
grateful to them for their unconditional love, fidelity, endurance and encouragement.*

*They have been selfless in given me the best of everything  
Brothers who always being there with some form of advice that I will take wereever I  
go.*

*Samia*

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### **Abstract**

This study was conducted during the period from March to June 2014 at Aldoha Specialized Hospital for Ear, Nose and Throat, Khartoum ENT Hospital and Africa Specialized Hospital in Khartoum to determine the frequency and etiology of otomycosis.

A total of 100 ear swabs were collected from patients suffering of ear infection, and investigated by conventional microbiological techniques.

The study population age range was 3-80 years with mean 38.50 years, and most of them were females (54%).

Out of the total, the frequency of otomycosis was 59 (59%), among the total fungal isolates *Aspergillus niger* was 22 (37%), followed by *A. flavus* 21 (36%), *A. terreus* 6 (10%), *C. glabrata* 5 (8%), *C. krusei* 2 (3%), *C. albicans* 1 (2%), *A. nidulans* 1 (2%) and *Alternaria* 1 (2%).

This finding concluded that the laboratory investigations are very important in diagnosis of otomycosis, especially culture techniques for differentiation between otomycosis agents which assist in the selection of appropriate treatment according to the type of fungal isolates.

## المستخلص

هذه الدراسة أجريت خلال الفترة من مارس إلى يونيو ٢٠١٤ في مستشفى الدوحة التخصصي للأذن والأنف والحنجرة، مستشفى الخرطوم للأذن والأنف والحنجرة ومستشفى أفريقيا التخصصي في الخرطوم لتحديد وتيرة ومسببات الفطار الأذني.

تم جمع عدد ١٠٠ مسحة أذن من المرضى الذين يعانون من خمج الأذن، وتم الفحص بواسطة التقنيات الميكروبيولوجية التقليدية.

وشملت الدراسة الفئة العمرية ٣-٨٠ سنة مع متوسط عمري ٣٨,٥٠ سنة، ومعظمهم من الإناث (٥٤٪).

اجمالا، كان تواتر الفطار الأذني ٥٩ (٥٩٪)، وقد كان عزل فطريات الرشاشية السوداء ٢٢ (٣٧٪)، تليها الرشاشية الصفراء ٢١ (٣٦٪)، الرشاشية الأرضية ٦ (١٠٪)، المبيضة الجرداء ٥ (٨٪)، المبيضة الكروية ٢ (٣٪)، المبيضة البيضاء ١ (٢٪)، الرشاشية المعششة ١ (٢٪) والنوباء ١ (٢٪).

وخلص هذا الاستنتاج الى أن الفحوصات المخبرية مهمة جدا في تشخيص الفطار الأذني، وخاصة تقنيات التزريع للتمايز بين مسببات الفطار الاذني التي تساعد في اختيار العلاج المناسب على حسب نوع الفطر المعزول.

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