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Diagnosis and Treatment of *Clostridioides difficile*

Guest Editor:

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Deadline for manuscript submissions:
closed (31 December 2023)

Message from the Guest Editor

The approach to the treatment of *C. difficile* has also evolved in the past decade, with a new emphasis on 1. the goal of a sustained clinical response—i.e., clinical improvement without the recurrence of diarrhea; and 2. the role of "normal" intestinal microbiota ("good flora") in preventing infection and relapse through *C. difficile*. These considerations highlight the challenges of treating *C. difficile*, whereby relapse typically occurs in 20% of patients, with repeated recurrences in 5–10% of patients. Thus, the most selective antimicrobials—active against *C. difficile* but sparing normal flora—have demonstrated the greatest sustained clinical response. Furthermore, antibodies against *C. difficile* toxins facilitate the clearance of the organism and decrease relapse. Finally, the restoration of "good microflora" via fecal microbiota transplant (FMT) has demonstrated unprecedented outcomes in the difficult-to-treat population of frequent relapsers.

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Message from the Editor-in-Chief

The worldwide impact of infectious disease is incalculable. The consequences for human health in terms of morbidity and mortality are obvious and vast but, when infections of animals and plants are also taken into account, it is hard to imagine any other disease that has such a significant impact on our lives—on healthcare systems, on agriculture and on world economics. *Pathogens* is proud to continue to serve the international community by publishing high quality studies that further our understanding of infection and have meaningful consequences for disease intervention.

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