July 15, 2021

Health Alert Network Notification: Candida auris – Kentucky, 2021

The purpose of this letter is to notify you of an emerging public health issue in Kentucky. As of July 2021, Candida auris (C. auris) has been identified in clinical and surveillance specimens in Kentucky healthcare facilities within the Louisville Metropolitan Area and Northern Kentucky Region. The impacted facilities have been in consultation with the Kentucky Department for Public Health (KDPH) and are following all recommendations.

*C. auris* is an emerging pathogenic yeast that can cause invasive infection. *C. auris* can cause a variety of infections, including bloodstream, respiratory tract, wound, and urinary tract infections. Invasive *C. auris* infections have been associated with 30-60% mortality rates among hospitalized patients. Most deaths have occurred in persons with other serious illnesses that increased the risk of death. *C. auris* is an urgent public health threat due to its potential for multi-drug resistance, ability to spread in healthcare settings, and rapid appearance in many parts of the United States. Additional information may be found at the Centers for Disease Control and Prevention (CDC) website. Outbreaks of this organism have occurred in healthcare settings, so early identification and communication about cases are essential to awareness, prevention, and control.

Individuals can carry *C. auris* and may not have any symptoms. These individuals are often already admitted in a healthcare facility with another serious illness or condition and may have risk factors such as mechanical ventilation, tracheostomy, invasive medical devices, and frequent healthcare encounters. Persistence of *C. auris* in both the environment and prolonged skin colonization on patients enables it to spread within healthcare facilities. CDC recommends consultation with an infectious disease physician for patients with *C. auris* infection. In cases identified from non-invasive sites, CDC does not recommend treatment.

Strict adherence to infection control activities is an effective method to prevent the spread of *C. auris*, regardless of source of specimen. It is critical to perform correct environmental cleaning and disinfection to eliminate transmission and exposure risk. Some disinfectants commonly used in healthcare settings are not effective against *C. auris*. Additional guidance from CDC on infection control activities for *C. auris* is also available.

If a case of *C. auris* is identified in a healthcare facility, priority reporting is required by EPID-250 and by electronic laboratory reporting to KDPH through the Kentucky Health Information Exchange within one (1) business day. In addition, submission of all confirmed *C. auris* isolates to the Kentucky Division of Laboratory Services (DLS) for further characterization is required.

KDPH recommends screening patients for *C. auris* who meet any of the following criteria:
Patients presenting from long-term acute care facilities, skilled nursing facilities, or rehabilitation facilities who, within the past 12 months, have history of:

- Multi-drug resistant organisms (MDROs)
- Mechanical ventilation or tracheostomy
- Chronic or unhealing wounds

- Patients hospitalized outside of the United States within the preceding 12 months
- Residents of southern or central Indiana or southern Ohio with extended stays in healthcare facilities (acute care and long-term care) due to recent incidence of *C. auris* in those areas
- Residents of states with historically high incidence of *C. auris*, who also have extended stays in healthcare facilities (acute care and long-term care)

For most up-to-date reporting of cases to the CDC, go to [https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html](https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html). *C. auris* can be difficult to identify when using standard laboratory testing methods. Laboratory professionals are advised that no phenotypic characteristics easily distinguish *C. auris* from other *Candida* species; *C. auris* can be misidentified as other yeasts when using common microbiological methods. The most reliable way to identify *C. auris* is with MALDI-TOF MS. [Yeast identification methods](https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html) used in some laboratories may misidentify *C. auris*.

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