Candida auris Overview and Resources

**PLEASE DISTRIBUTE WIDELY**

*Candida auris* is an emerging fungal pathogen that is often multidrug-resistant and can cause serious invasive infections. At this point, *C. auris* has not been identified in a Wisconsin resident, but there have been hundreds of cases identified in the United States, including a significant number in neighboring Illinois. Outbreaks of *Candida auris* have proven difficult to contain even with enhanced infection control efforts because of the ability of the fungus to survive in the environment.

**Background**

*Candida auris* was first discovered in Japan in 2009. It emerged nearly simultaneously in several different countries and since then has been found in at least 34 countries worldwide. The majority of cases in the United States have been in the New York City and Chicago areas, and New Jersey. The species is often misidentified when using traditional phenotypic laboratory methods for yeast identification, making *C. auris* tracking challenging.

**Infection Control Measures**

*Candida auris* can colonize patients asymptatically, which can lead to healthcare facility transmission. To prevent transmission of these organisms, facilities should promptly implement infection control measures, including:

- Placing the patient in a single-patient room and promptly implementing contact precautions.
- Adhering to strict hand hygiene.
- Cleaning and disinfecting the patient’s room and reusable equipment with recommended products (i.e., Environmental Protection Agency “List K” products that are also effective against *Clostridioides difficile* spores), including appropriate daily and terminal cleaning.
- Communicating a patient’s *C. auris* status upon transfer to another healthcare facility or when arranging ancillary healthcare services (e.g., home healthcare, dialysis).
- Working with WHAIPP to determine appropriate contact screening for new cases.
- Setting laboratory alerts for new cases to support ongoing case detection and surveillance.
- Setting flags in patient charts to prompt immediate contact precaution implementation for subsequent admissions.

Infection control measures are important because *C. auris* can colonize patients’ skin and body for months after active infections resolve, and it can be shed by colonized people and persist in the
environment for weeks. Infection control measures are the same for those colonized with *C. auris* and those actively infected.

**Screening**

Certain patients are at higher risk for *Candida auris* and should be screened for colonization, including patients who had an overnight stay in a healthcare facility outside the United States in the previous year. In addition, any patients with healthcare exposure in the areas of the United States with high *C. auris* prevalence (Chicago and New York City areas or New Jersey) should also be screened. Screening for *C. auris* uses a composite swab of the patient’s bilateral axilla and groin with swabs provided by the Wisconsin State Laboratory of Hygiene (WSLH) that are tested free of charge. Facilities that would like to screen a patient with *C. auris* risk factors should contact WHAIPP at 608-267-7711 or by email at dhswihaipreventionprogram@wi.gov to coordinate testing.

**Specimen Collection and Laboratory Testing**

To aid detection of this difficult to characterize pathogen, WSLH, as part of CDC’s Antibiotic Resistance Laboratory Network, also tests clinical isolates of *Candida auris*. All yeast isolates unable to be identified by a validated method, uncommon *Candida* species, drug resistant isolates, and invasive isolates from normally sterile sites (except *C. albicans* and *C. glabrata*) can be submitted to WSLH by clinical laboratories. *C. auris* testing at WSLH includes species identification using MALDI-TOF mass spectrometry, antifungal susceptibility testing via broth microdilution, and Amphotericin B susceptibility testing using Etest strips. Antifungal susceptibility is tested for surveillance, but results can be provided upon request.

**Contacts**

WHAIPP: 608-267-7711 or dhswihaipreventionprogram@wi.gov

**References**

- Wisconsin *C. auris* web page
- Wisconsin *C. auris* fact sheet
- WSLH AR Lab Network web page
- CDC *C. auris* web page
- CDC *C. auris* FAQ for healthcare professionals
- CDC *C. auris* information for infection preventionists
- CDC *C. auris* infection prevention and control

*The recommendations in this memo were developed in accordance with Wis. Stat. ch. 252 and Wis. Admin. Code ch. DHS 145.*