Update: *Candida auris* in New York State

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Review

• Cases first reported in summer 2016
  – First was from 2013, retrospectively identified in 2016
• Increased cases throughout 2016, then steady in 2017
• Intensive investigation and response
NYSDOH Activities

- Infection control assessments of hospitals and nursing homes in Brooklyn and Queens
- Roundtables, webinars, presentations
- Laboratory support
  - Pilot admission screening
  - Point prevalence surveys
Case Counts as of November 29, 2017

- 105 clinical cases
- 117 screening cases
- 4 probable cases

All infected persons had other serious medical conditions

4 double-counted
Candida auris: Confirmed Clinical Cases in New York State
May 2013 – November 2017
Reported as of November 29, 2017
Candida auris: Confirmed Clinical and Screening Cases in New York State
May 2013 – November 2017
Reported as of November 29, 2017

Month First Positive C. auris Culture Collected
Geographic Distribution

• Outbreak remains concentrated in NYC area
• One diagnosed in Rochester hospital
  – Recent admission to involved NYC hospital
• A few cases diagnosed in surrounding metropolitan area counties
• Increasing “pass-through” facilities in surrounding metropolitan area counties
Prevention and Control

• Goals
  – Prevent transmission and further spread in affected facilities
  – Define the extent of the problem
  – Delay and blunt the impact of this organism in New York and the US
Prevention and Control

• Strategy
  – Intensive case investigation and tracking, point prevalence surveys and environmental sampling in affected facilities
  vs.
  – Blanket improvement in infection control, ring containment, consideration for admission screening in critical units