



**Department  
of Health**

## **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

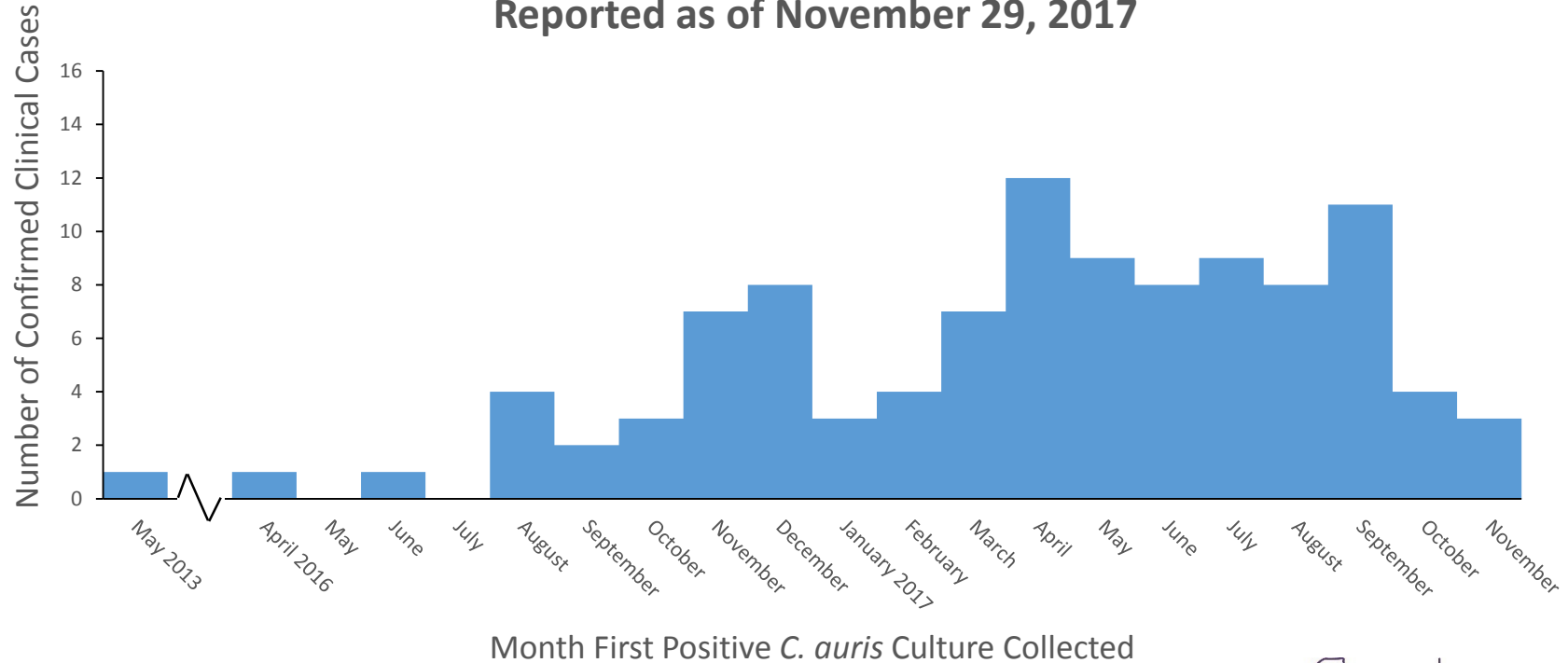
# NYSDOH Activities

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

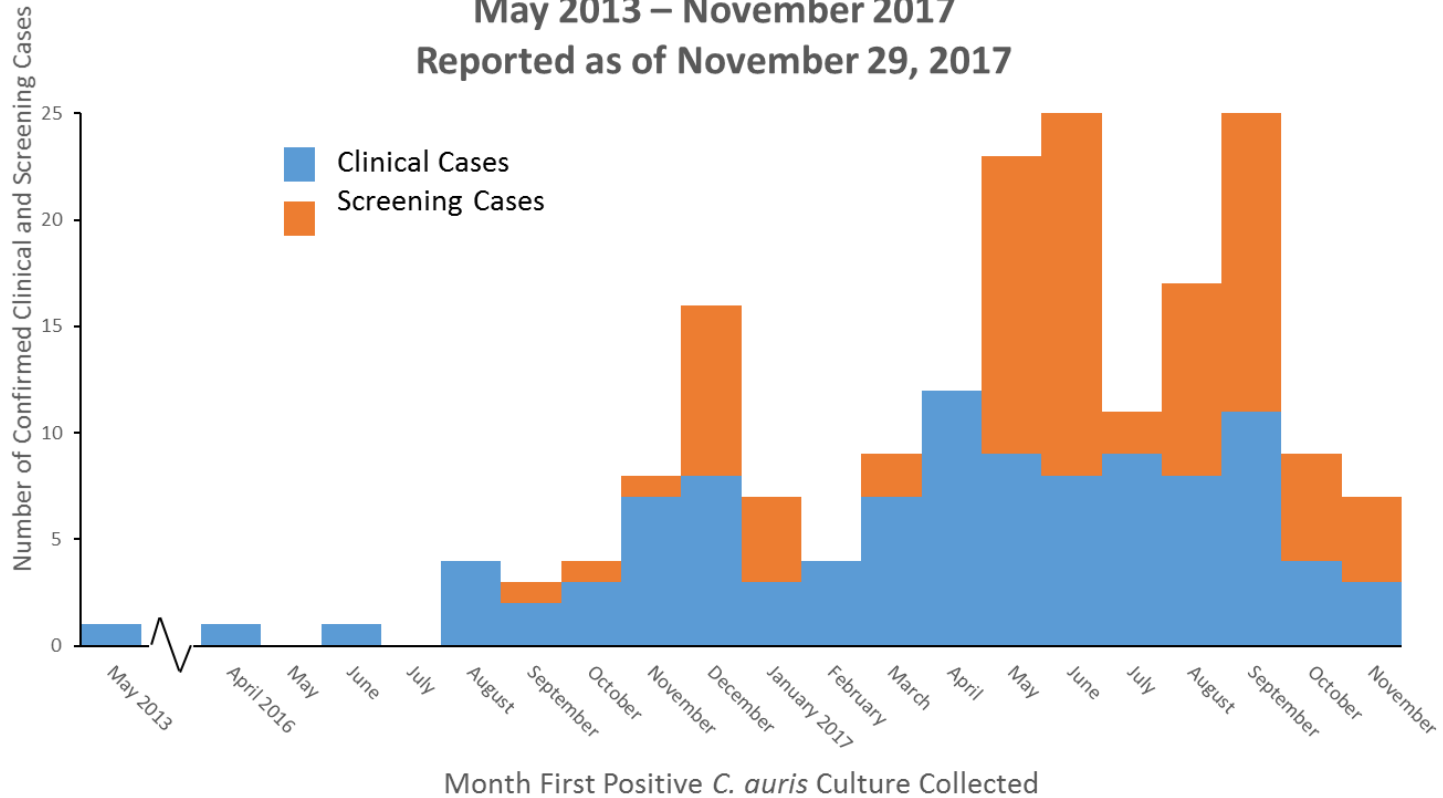
# Case Counts as of November 29, 2017

- 105 clinical cases
  - 117 screening cases
  - 4 probable cases
- } 4 double-counted
- All infected persons had other serious medical conditions

## 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**



# 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

