A Case of Candida Auris

Emory University Resources:

- Session Resources
 - Post session resources (podcast of webinar, presentation slides, responses to unanswered questions) can be found on our website
 - https://med.emory.edu/departments/medicine/divisions/infectiousdiseases/serious-communicable-diseases-program/covid-19-resources/accesspast-echo-recordings.html
- Region 4 Situation Report
 - https://med.emory.edu/departments/medicine/divisions/infectious-diseases/seriouscommunicable-diseases-program/covid-19-resources/region-4-situation-reports1.html
- Register for upcoming sessions on our website
 - https://med.emory.edu/departments/medicine/divisions/infectious-diseases/seriouscommunicable-diseases-program/covid-19-resources/echo-upcoming-session.html
- HHS Region IV Emory University SCDP
 - o https://med.emory.edu/departments/medicine/divisions/infectious-diseases/seriouscommunicable-diseases-program/covid-19-resources/index.html
- Region IV Concept of Operations (CONOPS) Regional Partners and Contacts
 - https://netec.org/about-netec/partners-regional-contacts/#regional-contacts
- Emory Serious Communicable Diseases Unit
 - o https://med.emory.edu/departments/medicine/divisions/infectious-diseases/seriouscommunicable-diseases-program/ebola-resources/index.html
- NETEC
 - o https://netec.org/
- NETEC National Special Pathogens System of Care (NSPS)
 - o https://netec.org/nsps/

External Resources:

Disclaimer - Our program provides additional resources that may be of use to our session attendees. This list is not inclusive, nor does our program endorse specific organizations.

- Healthmap.org (Location based alerts)
- Outbreaknewstoday.com
- Center for Infectious Disease Research and Policy (CIDRAP), University of Minnesota (UNM)
- The University of Nebraska Medical Center (UNMC) Global Center for Health Security: The Transmission
- Global Biodefense.com
- CDC Division of High-Consequence Pathogens and Pathology
- CDC Infection Prevention and Control for Candida Auris
 - o https://www.cdc.gov/fungal/candida-auris/c-auris-infection-control.html
- Georgia Department of Public Health Travel Clinical Assistant (TCA)
 - o https://dph.georgia.gov/TravelClinicalAssistant
- ProMED International Society for Infectious Diseases

- MSGERC Grand Rounds Webinar Series, Episode 6—Candida auris: Everything you always wanted to know about this superbug (but were afraid to ask!)
 - https://funguseducationhub.org/msgerc-grand-rounds-webinar-series-episode-6candida-auris/

Please continue to check your local and state public health websites for additional resources and guidance.

Session Reminders:

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- Candida auris is a dangerous pathogen, whether it is a colonization organism or contributing to an active infection infection prevention precautions are the same.
- Contact precautions in LTC/other facilities
 - Indefinite contact precautions are recommended, regardless of the level of interaction.
- CHG Bathing and reducing colonization
 - CHG bathing has not been shown to be consistently effective at reducing colonization.
 - Concern for other Candida species with high levels of antifungal resistance
 - Other species tend to not be as transmissible between patients, even if resistant.
- Candida auris and infection of the general public
 - Less concern for the public.
 - Patients in healthcare settings are primarily at risk, especially chronically acute, or ill patients.
- Prophylaxis and topical decolonization
 - Currently no data to support that either work.
- Infection prevention and control precautions in long term care settings
 - Enhanced barrier precautions are an option for nursing homes if there is not an outbreak, in which case, it might be recommended to use contact precautions.
 - Ongoing research required to understand additional facilities.
- Repeated swabbing does not provide confidence for removing precautions
 - A patient can have 1-3 negatives, and then a positive.
- Targeted screening for facilities with a Candida auris case(s)
 - Depends on facility and risk
 - Facilities with longer lengths of stay and sick vulnerable patients have higher transmission.
 - Higher acuity post-acute care facilities.
 - LTAC (long term acute care) hospitals and ventilator capable skilled nursing facilities.
 - Point-prevalence surveys and admissions screenings can assist with targeting high risk patients and identifying a case(s) prior to spread.
- PCR and Culture Sensitivity
 - Reliability is difficult to determine.
 - Change in test results (i.e., testing positive, then negative, then positive, etc.), can stem from various elements such as test sensitivity, a patient re-acquiring the pathogen, fluctuation of burden based on the swabbing of different body sites, etc.

- PCR is not recommended because of sensitivity; it is recommended because it is quick.
- o Additional research needed