



March 30, 2023

To: North Carolina Clinicians and Laboratories  
From: Zack Moore, MD, MPH, State Epidemiologist  
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**Subject: Update - *Candida auris* transmission in North Carolina (Replaces version dated February 24)**

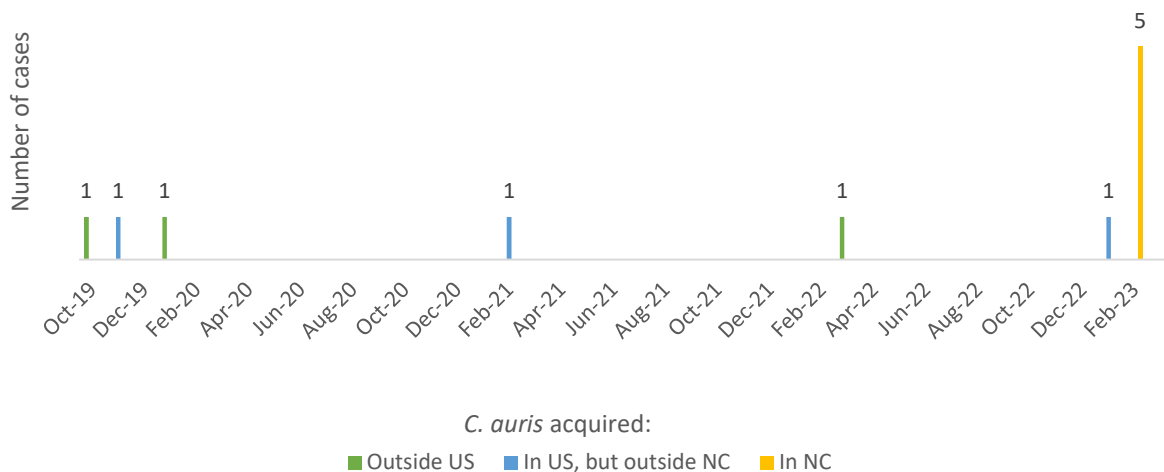
In light of [CDC's press release](#) about the rise in *Candida auris* cases and an increase in the number of *C. auris* cases acquired in North Carolina, this memo is intended to update healthcare providers and laboratorians about the current state of *C. auris* in NC and provide information about recommended screening and response measures.

**Background:**

*C. auris* is a multidrug-resistant fungus that spreads easily in healthcare settings and can cause invasive infections associated with mortality rates of up to 60%. *C. auris* can also cause prolonged asymptomatic colonization, during which time it can still be transmitted to others. Over 90% of isolates are resistant to at least one class of antifungal, and reports of pan-resistant strains are increasing. *C. auris* can be spread from person to person via touch and through contact with contaminated medical equipment or environmental surfaces.

Prior to February 2023, six *C. auris* cases had been reported in NC, all in patients who had acquired the organism in another state or country. Since February 2023, there have been five *C. auris* cases identified in NC residents who had no prior diagnosis or known exposure outside the state. Three of these cases were identified through screening in response to a known exposure, while two of the cases have no identified links to other reported cases. All cases occurred in individuals with serious comorbid health conditions and/or a history of prolonged hospitalization. No deaths have occurred.

*Candida auris* cases in North Carolina



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### **NC Division of Public Health Response:**

The NC Division of Public Health (NC DPH) is working closely with CDC, the NC State Laboratory of Public Health (SLPH), local health departments, and numerous other partners to coordinate a response to the increase in *C. auris* cases. Over 500 people have been screened to date, with screening provided through the Antimicrobial Resistance Laboratory Network (ARLN) at no cost to patients or facilities. NC DPH is developing resources for the *C. auris* response, including updated screening protocols and testing support for high-risk facilities. Additional information will be distributed about these resources as they are finalized.

### **Recommendations:**

The NC DPH's Communicable Disease Branch and SLPH ask that clinicians and laboratories consider the following recommendations.

#### Surveillance

- Ensure a system is in place to rapidly notify infection prevention and public health of any suspected or confirmed *C. auris* cases.
- Consult with clinical laboratories to determine capacity for *C. auris* identification and be aware of any potential misidentifications.
- Inquire about high-risk exposures and consider screening in patients who have had an overnight stay in a healthcare facility outside the United States in the past 12 months for *C. auris*. This screening, including collection devices and shipping, is available through the ARLN at no cost to facilities or patients. Please contact [nchai@dhhs.nc.gov](mailto:nchai@dhhs.nc.gov) to coordinate screening.
- Screening recommendations may change as we learn more about *C. auris* prevalence and transmission in NC. Changes to these recommendations will be communicated in future provider memos.

#### Infection Prevention

- Place any patients with suspected or confirmed *C. auris* on contact precautions in a single-patient room immediately.
- *C. auris* is known to widely contaminate the environment and can persist in the environment for several weeks. Conduct daily and terminal environmental cleaning using a disinfectant on [EPA's List P](#).
- For additional information, please see CDC's [infection prevention recommendations for C. auris](#).

#### Identification

*C. auris* can be difficult to identify by standard laboratory methods and may be misidentified as other *Candida* species. Laboratorians should be aware of potential misidentifications. If any of the species listed on the CDC's [Identification of Candida auris](#) website are identified, or if the species identity cannot be determined, please contact the SLPH Mycology Laboratory at 919-807-8605 for guidance on identification.

#### Reporting

Any clinician or facility that suspects *C. auris* infection and laboratories that suspect or identify *C. auris* should notify the SHARPPS Program at [nchai@dhhs.nc.gov](mailto:nchai@dhhs.nc.gov) or call the 24/7 NC Communicable Disease epidemiologist on call at 919-733-3419.