**Candida auris Infection**

*Candida auris* is a new form of yeast that is easily spread between patients and can be very difficult to treat.

**What Is Candida auris?**

Yeast can infect people, and one of the common types of yeast is called *Candida*. The *Candida auris* species was unrecognized before 2009. Many genetically unrelated forms of *C auris* have emerged in different parts of the world for unknown reasons. Use of antifungal drugs in people or animals or fungicides in agriculture may play a role. This yeast has caused outbreaks of infection in hospitals and nursing homes. Unlike other yeasts that originate in human bodies, *C auris* can be acquired from the health care environment and spread from patient to patient. *Candida auris* can cause serious infections of the bloodstream, gut, wounds, and other sites. Some infections are resistant to all antifungal drugs and do not respond to treatment; death rates from this infection can reach 60%. Some patients may have *C auris* on their skin or in their rectum, wounds, or mouth, but they feel well and have no symptoms of infection. This condition is called **asymptomatic colonization**, and treatment with antifungal drugs does not eliminate *C auris* colonization.

**Acquisition of C auris**

People who get *C auris* infection are frequently very sick, have many illnesses, and tend to remain in health care facilities for a long time. Patients with impaired immunity or who require feeding tubes and intravenous or urinary catheters have a high risk of acquiring *C auris* infection. Healthy people, including health care workers, with very rare exception do not become colonized or infected with *C auris*. As a result, routine screening of contacts of patients with *C auris* is not recommended unless they also are admitted to a health care facility.

**Controlling and Preventing Spread of C auris**

Detection of *C auris* is difficult in most hospitals. Most clinical laboratories do not have the ability to differentiate *C auris* from other yeasts. Physicians must suspect *C auris* infection specifically and send cultures of yeast to special laboratories for confirmation. When being admitted to the hospital, patients (or their families) should alert physicians if they have had a diagnosis of *C auris* or stayed in a health care facility where *C auris* was present. If there is concern that a patient has been exposed to *C auris*, they must be placed in isolation as a precaution until the diagnosis is confirmed.

Isolation for *C auris* requires placing patients in private rooms or placing patients with diagnosis of *C auris* together. All health care personnel and visitors must wear gowns and gloves when entering the room and wash their hands frequently. The room environment is cleaned frequently with special disinfectants. Cultures of specimens obtained from patients may grow *C auris* for up to 3 months after it is first detected. Repeat cultures may be done to see if isolation can be discontinued.

In nursing facilities, patients infected with *C auris* may attend group activities if they can wash their hands, wear clean clothing, and have wounds that can be contained by clean bandages, and if common areas are frequently disinfected.

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