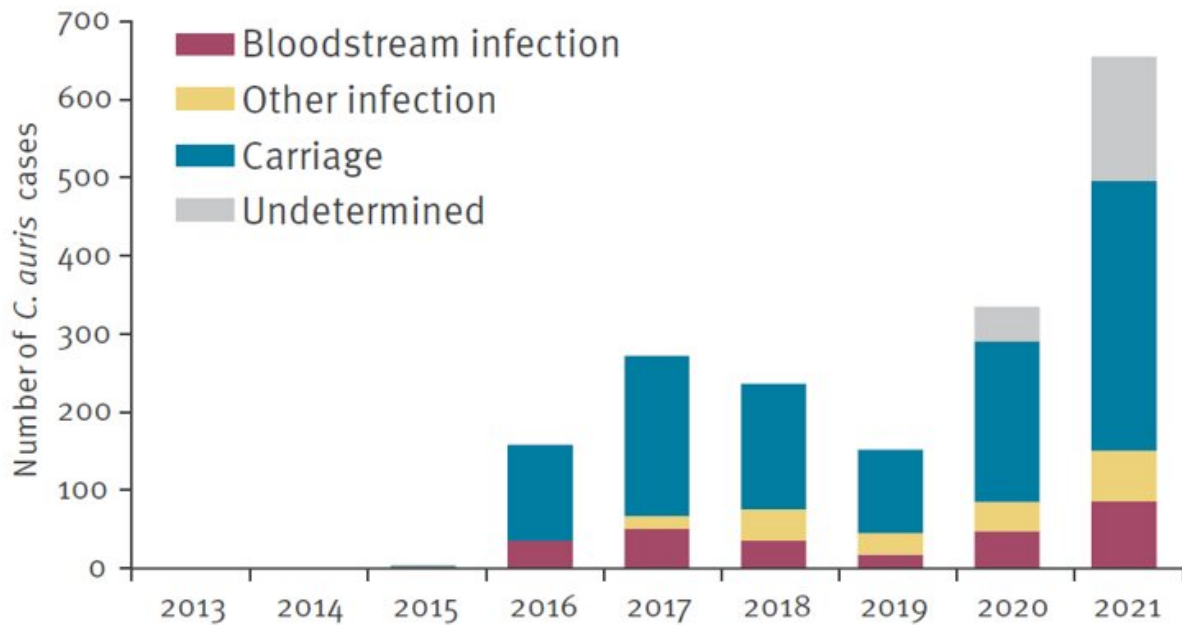


Increase of *Candida auris* in the EU/EEA: Need for better surveillance

November 17 2022



EEA: European Economic Area; EU: European Union.

Most of reported *Candida auris* cases were carriage. Credit: Eurosurveillance

Candida auris (*C.auris*) is an emerging fungal pathogen associated with outbreaks of invasive healthcare-associated infections globally. It is frequently resistant to the commonly used antifungal drugs, which leaves very limited treatment options.

The European Centre for Disease Prevention and Control (ECDC) has been conducting surveys to collect information on the epidemiological situation of *C. auris* in the European Union and European Economic Area (EU/EEA). In their rapid communication published in *Eurosurveillance* to mark European Antibiotic Awareness Day, Kohlenberg et al. analyze the data for the years 2013 to 2021 collected from the three ECDC surveys.

Number of cases almost doubled between 2020 and 2021

Based on the received data, 1,812 cases of *C. auris* infections or carriage were reported by 15 EU/EEA countries between 2013 and 2021. From 2020 (335 cases) to 2021 (655 cases), the number of reported cases almost doubled. At the same time, the number of countries with reported cases went up from 8 (2020) to 13 (2021).

Almost two-thirds (63%) of cases were reported as carriage, 15% as bloodstream infections and 10% as another type of infection. For 11% of cases, there was no available information on either carriage or infection. Cases and *C. auris* outbreaks occurred in several EU/EEA countries only a few years after the first cases were reported. In two countries spread of *C. auris* between healthcare facilities was documented.

In one region in one country, *C. auris* is endemic, meaning that infections and colonisations did not only occur as part of defined outbreaks. Additionally, the authors express concern about the possibility of undetected transmission and outbreaks in the EU/EEA because in four countries there was no available information at national level on whether *C. auris* cases were present in the country or not.

European-level surveillance for early detection needs improvement

Compared to 2019, the findings from the survey indicate a slight improvement in preparedness and response in EU/EEA countries regarding prospective and retrospective surveillance, identifying and testing for the pathogen in laboratories as well as guidance for laboratory testing and for infection prevention and control.

However, given the inter-facility spread as well as endemicity in one region, Kohlenberg et al. discuss that *C. auris* is in the process of establishing itself as a healthcare-associated pathogen in the EU/EEA. The authors state that this, together with the high proportion (97%) of cases with no information on importation or local spread, underlines the need to further improve monitoring and surveillance of *C. auris* infections and outbreaks.

Kohlenberg et al. state that "local control of *C. auris* as soon as possible after introduction to delay the establishment of *C. auris* in healthcare facilities will have a nationwide benefit for patients by reducing future healthcare-associated infections with *C. auris*." They conclude that early detection of *C. auris* is crucial since [disease control](#) becomes more challenging when the [infection](#) has already spread between [healthcare facilities](#) or regions.

More information: Increasing number of cases and outbreaks caused by *Candida auris* in the EU/EEA, 2020 to 2021, *Eurosurveillance* (2022). [DOI: 10.2807/1560-7917.ES.2022.27.46.2200846](https://doi.org/10.2807/1560-7917.ES.2022.27.46.2200846). [www.eurosurveillance.org/content/2022/27.46.2200846](https://www.eurosurveillance.org/content/2022/27/46/2200846)

Provided by European Centre for Disease Prevention and Control (ECDC)

Citation: Increase of *Candida auris* in the EU/EEA: Need for better surveillance (2022, November 17) retrieved 24 April 2024 from <https://medicalxpress.com/news/2022-11-candida-auris-eueea-surveillance.html>

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