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MEMORANDUM

TO: Acute Care Hospitals, Long-Term Acute Care Hospitals, Long-Term Care Facilities, Local Health Departments, Illinois Department of Public Health Regional Health Officers

FROM: Division of Patient Safety and Quality

DATE: April 1, 2019

SUBJECT: Clarification of Pathogens Commonly Confused with *Candida auris*

Recognizing and understanding the differences between organisms with characteristics or names that sound similar to *Candida auris* (*C. auris*) is important because **different infection prevention and control precautions are needed for different pathogens** (see attached table).

C. auris is a type of yeast or fungus that has rapidly emerged as a pathogen of public health importance due to the following:

- 1) *C. auris* can be difficult to treat due to resistance to medicines commonly used to treat *Candida* infections.
- 2) *C. auris* can be difficult to identify by some standard laboratory techniques.
- 3) *C. auris* can cause outbreaks in health care facilities as it readily contaminates patient equipment and the environment.

Candidiasis is a fungal infection caused by yeasts belonging to the genus *Candida*. There are more than 20 *Candida* species that cause human infections, most commonly, *Candida albicans*. Recognizing and understanding the difference between *C. auris* and other *Candida* species is also important as different infection prevention and control precautions are needed for *C. auris*.

C. auris is different from carbapenem-resistant Enterobacteriaceae (CRE), carbapenem-resistant *Pseudomonas aeruginosa* (CRPA), and *Staphylococcus aureus*, which are bacteria. While they often affect a similar population of people, the types of illnesses they cause, and some infection prevention precautions, may be different.

Please contact your [local health department](#) or IDPH at dph.XDRRegistry@illinois.gov with questions.

Clarification of Pathogens Commonly Confused with *Candida auris*

Table of Key Differences between Commonly Confused Pathogens			
Name of Pathogen/Organism			
<i>Candida auris</i> (<i>C. auris</i>)	<i>Candida</i> (most commonly <i>Candida albicans</i>)	carbapenem-resistant Enterobacteriaceae (CRE) and carbapenem-resistant <i>Pseudomonas aeruginosa</i> (CRPA)	Staphylococcus aureus (<i>S. aureus</i>)
Type of germ			
Yeast or Fungus	Yeast or Fungus	Bacteria	Bacteria
Related terms, words, acronyms, and selected notes (list not exhaustive)			
<i>C. auris</i> is a specific type (species) of yeast that is resistant to medicines that are usually used to treat yeast or fungal infections.	<i>Candida</i> are a group (genus) of more than 20 different types of yeast that are often part of the normal human flora but can also cause infections. The medical term for a <i>Candida</i> infection is Candidiasis. These infections are commonly referred to by other names depending on what part of the body is infected (e.g., thrush, vaginal yeast infection, or diaper rash).	Enterobacteriaceae are a group (family) of bacteria and <i>Pseudomonas aeruginosa</i> is a specific type (species) of bacteria . These organisms can be part of normal human flora but can also cause infections. CRE and CRPA are especially concerning because they are resistant to many available antibiotics. Sometimes CRE may be referred to by the type of mechanism that makes these bacteria resistant to certain antibiotics, such as KPC, NDM, VIM, or OXA-48.	<i>S. aureus</i> or “Staph” is specific type (species) of bacteria that can be part of the normal human flora but can also cause infections. Staph infections that are resistant to certain antibiotics are commonly referred to as “MRSA” or “VRSA,” but not all staph infections are resistant to treatment with antibiotics.
Common sites of infections			
Blood, wound, ear (possibly lung or bladder)	Invasive: blood, eye, brain, heart Non-invasive: mouth, throat, vagina, skin	Blood, wound, lung, bladder	Blood, wound, lung, skin, joint, bone, heart

Clarification of Pathogens Commonly Confused with *Candida auris*

	<i>Candida auris</i>	<i>Candidiasis</i>	CRE & CRPA	Staphylococcus aureus
Who is <i>most</i> at risk for infection? (list not exhaustive)				
	Chronically ill people, especially those who: <ul style="list-style-type: none"> • use invasive devices such as mechanical ventilators, tracheostomies, feeding tubes, or central venous catheters; • recently stayed in a hospital or long-term care facility (especially nursing homes that care for ventilated patients); • have a weakened immune system due to conditions such as cancer, organ transplant, or uncontrolled HIV/AIDS; • were recently treated with broad-spectrum antibiotic or antifungal drugs; • have kidney failure; or • have diabetes mellitus. 			Anyone can develop a staph infection, but chronically ill people are at <i>higher risk</i> for types of infections that are more severe and more difficult to treat.
Is a patient able to spread to other people, even if they don't have symptoms of illness?				
	Yes	Yes	Yes	Yes
Are Health Care Workers able to spread between patients?				
	Yes	Yes	Yes	Yes
Is alcohol-based hand rub the <i>preferred</i> method of hand hygiene?				
	Yes	Yes	Yes	Yes
Should Standard Precautions be implemented in a Health Care Facility?				
	Always	Always	Always	Always
Should Contact Precautions be implemented in a Health Care Facility?				
	Always	No	Always	If methicillin resistant, vancomycin intermediate, or vancomycin resistant
What products should a Health Care Facility use to disinfect the patient care environment?				
	Use an EPA List K sporicidal disinfecting agent. When use of products on List K is not feasible, the following products may be used for surface disinfection: <ul style="list-style-type: none"> • Oxivir Tb, Clorox Healthcare Hydrogen Peroxide Cleaner Disinfectant, Prime Sani-Cloth Wipe, and Super Sani-Cloth Wipe 	Use a disinfecting agent approved for health care settings. These may be sporicidal or non-sporicidal cleaning and disinfection products.		