<u>CHP follows up on two clusters of</u> <u>Candida auris carrier cases</u>

The Centre for Health Protection (CHP) of the Department of Health is today (January 19) following up on two clusters of Candida auris carrier cases involving a total of 13 residents from two residential care homes for the elderly (RCHEs), and reminded members of the public about the proper use of antimicrobials and maintaining personal hygiene against infection.

The first cluster involved ten residents of an RCHE in Prince Edward. The first five cases were related to wards with Candida auris outbreaks and confirmed cases in Kowloon Hospital, Tung Wah Group of Hospitals Wong Tai Sin Hospital, and Queen Elizabeth Hospital. After investigations, another five carrier cases of the RCHE were identified. The CHP believed that they were infected at the RCHE. The CHP has immediately conducted investigations and carried out site inspection at the RCHE, and found that the lapses in infection control measures and physical limitations have caused transmission in the RCHE. The ten carrier cases involved seven males and three females aged between 55 and 91 who all have no symptoms of infection. Among them, a 91-year-old female carrier case passed away on December 28 last year due to her underlying illnesses and the remaining nine patients have been discharged. In light of the ten cases, the CHP has contacted the Social Welfare Department and the Community Geriatric Assessment Team of the Hospital Authority to strength the relevant support to the RCHE and assist the RCHE to implement appropriate infection control measures.

The second cluster involved an RCHE in Tsuen Wan with a total of three cases. The first case of this RCHE was a 79-year-old male resident with underlying illnesses, who was confirmed to have carried Candida auris during his stay at the Hong Kong Buddhist Hospital and returned to the RCHE afterwards. Subsequent investigations found that two female residents aged 90 and 93 of the same RCHE were confirmed to have carried Candida auris upon testing. The CHP cannot rule out that the duo were infected at the RCHE. They are both with underlying illnesses and have no symptoms of infection. One of them has been discharged. Investigations by the CHP revealed that the RCHE has already taken appropriate infection control measures, and the overall hygiene condition is satisfactory. The CHP has reminded the RCHE to continue to strengthen infection control measures.

Investigations revealed that the two Candida auris clusters are not epidemiologically linked and the CHP will continue to closely follow-up on them. In addition to the above follow-up measures, the CHP has provided infection control advice and training to staff of the RCHEs. The RCHEs are advised to follow the prevailing guidelines to enhance infection control measures including appropriate placement of carrier residents, strict implementation of contact precautions, enhancement of environmental cleansing and disinfection, use of dedicated medical equipment, toilet and bathing facilities to prevent the spread of Candida auris. The CHP will keep in close liaison with the RCHEs concerned and monitor the situation of the residents, and ensure the RCHEs have carried out the various infection control measures.

A spokesman for the CHP explained that Candida is a fungus commonly found in the natural environment, particularly in moist and warm environments. In humans, it is commonly found in body sites such as the oral cavity, the digestive tract, skin and the vagina. It is a common fungus living on or in the human body but can occasionally cause infections, especially in individuals with impaired immunity.

Among the different candida species, Candida auris is more drugresistant. Infections vary from being mild to potentially life-threatening or fatal, depending on which part of the body is affected and the general health condition of the patient. The spokesman stressed that proper use of antimicrobials and maintaining personal hygiene, especially hand hygiene, are crucial to the prevention of emergence and cross-transmission of Candida auris.