Congress of the United States
Washington, DC 20515

April 21, 2023

Dr. Rochelle Walensky, MD, MPH
Director
Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30329

Dr. Walensky,

We are writing to draw your attention to the outbreak of *Candida auris (C. auris)* in southern Nevada that has now become the largest in the country, with more than 1,100 infections since August 2021, according to the Nevada State Public Health Laboratory (NSPHL). The Centers for Disease Control and Prevention (CDC) considers *C. auris* to be an urgent threat,[1] the CDC's highest level of concern. However, despite this classification, we remain concerned that CDC has yet to develop a comprehensive plan to prevent further spread of *C. auris* in Nevada and the more than 26 states now reporting infections. We urge the CDC, working alongside interagency partners, to take decisive action against *C. auris* and swiftly deliver necessary resources to the public health professionals and health care providers in Nevada on the front lines of this outbreak.

As you know, *C. auris* is a fungus that can cause invasive infections and is associated with high mortality rates because it is highly resistant to antifungal drugs.[2] *C. auris* was first detected in southern Nevada in August 2021 and has been spreading in Nevada and across more than 26 states nationwide ever since.[3] The COVID-19 pandemic created an environment for *C. auris* to spread rapidly alongside COVID-19, as patients were increasingly exposed to *C. auris* when seeking care for COVID-19 at health care facilities, including hospitals, or while patients were isolated in congregate care settings, such as long term care facilities. In addition, specific decontamination and screening procedures for *C. auris* occurred with less frequency as health care facilities prioritized combatting COVID-19. Each of these factors contributed to a dramatic increase in cases of *C. auris*, which spread in our communities for months with insufficient reporting to many state public health agencies. Nevada now has the highest number of cases of *C. auris* in the country[4] and has experienced a worrying increase in cases over the last two years

[1] https://www.cdc.gov/drugresistance/pdf/threats-report/candida-auris-508.pdf
[2] https://www.ncbi.nlm.nih.gov/books/NBK563297/
[3] https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html
[4] https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html

alone. In fact, according to CDC data, Nevada experienced 384 cases in 2022, up from just 24 cases in 2021, an alarming sixteen-fold increase in just one year.

The NSPHL at the University of Nevada-Reno is tracking even more cases of *C. auris* than CDC, reporting that more than 1,100 Nevadans have been infected and more than 100 Nevadans have died since August 2021. By conducting whole genomic sequencing of *C. auris* isolates, the NSPHL has been able to identify multiple outbreaks of *C. auris* at facilities across southern Nevada. The NSPHL has also been able to detect mutations of *C. auris* that are correlated with drug resistance. These mutations are now occurring with increasing frequency, meaning this infection will become not only more difficult to contain, but also increasingly difficult to treat, with more patients infected with highly drug-resistant *C. auris.*

Without the critical work of both CDC and the NSPHL to identify, detect and track *C. auris* in our communities, we would not be able to monitor an emerging outbreak like this happening in real time. The NSPHL continues to be at the forefront of public health efforts in Nevada, but it may need additional federal support to fight this outbreak. While CDC provided manpower to support contact tracing efforts during the COVID-19 pandemic, there are currently no individuals on the ground specifically dedicated to tracking *C. auris* today*,* despite *C. auris* being detected by local researchers in wastewater across Clark County and the fungus actively and quickly spreading in our communities.[5] The CDC must begin to more actively coordinate with the State of Nevada to develop a comprehensive plan to address this issue. CDC also must make available every tool it has available to Nevada's dedicated public health professionals and health care providers.

While we are incredibly grateful for the support CDC has provided Nevada's state and local health officials over the past several years, *C. auris* case numbers in southern Nevada have been alarmingly trending in the wrong direction. And while CDC provided some level of support to the state last year, it is clear that it was not sufficient to significantly deter what CDC now considers an urgent threat. Nevada consistently struggles with access to health care services and continues to face acute workforce shortages across the health care continuum. An outbreak of *C. auris* will only exacerbate these issues. CDC must act now and work with state officials to develop a comprehensive plan to bolster southern Nevada's response to this outbreak, not limited to direct support to impacted facilities, the creation and dissemination of best practices for decontamination and treatment, and additional resources to support our laboratory testing capacity.

We are focused on ensuring that our state and our nation are prepared to respond to any public health threat, as well as ensuring that Nevadans can safely access the health care they need. We stand ready to work with you to prevent further spread of *C. auris* in southern Nevada and nationwide. We look forward to your response.

Sincerely,

[5] https://www.unlv.edu/news/release/unlv-snwa-study-makes-case-candida-auris-wastewater-surveillance

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