A Case Report of *Candida auris* Fungemia

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**Abstract**

Since its first identification in Japan in the year of 2009, *Candida auris* has become an emerging global health threat due to the multidrug-resistant profile of this organism. Outbreaks have been reported in many countries, including United Kingdom in 2016. We report a case of *C. auris* fungemia following prolonged hospital stay in a 67-year old lady with traumatic brain injury. She had a febrile episode on day 35 of admission, initially attributed to healthcare-associated pneumonia. Empirical intravenous (IV) Fluconazole was commenced based on preliminary report of yeast identification in blood culture. *C. auris* was identified by molecular method later in another laboratory, with minimum inhibitory concentration (MIC) of >256 µg/ml to Fluconazole and Caspofungin 0.75 µg/ml. As the sample was sent to another laboratory to aid in species identification, the culture report was only made available one week after treatment with Fluconazole. Even though she remained afebrile during a week's course of Fluconazole, she was then switched to IV Caspofungin (in view of high MIC of Fluconazole) while awaiting for repeated fungal culture results. She was treated with 2 weeks of Caspofungin and was afebrile during the remainder of her stay in ward. Repeated blood cultures had no growth. The apparent clinical response to Fluconazole despite high MIC can be possibly explained by low fungal load upon treatment commencement. Through this case report, we would like to highlight need for awareness of this emerging pathogen and the need for rapid identification of this organism.

**Keywords:** *Candida auris*, Drug-resistant

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