

Candida auris Surveillance Report

June 2, 2025



Michigan *C. auris* Case Count:

Total Cases	Clinical Case	Screening Case
1679	415	1264

Cases initially identified as screening cases that later develop a positive clinical culture will solely be reported as a clinical case to avoid double counting the same individuals.
147 individuals converted from a screening to clinical case.

Fig 1. *Candida auris* Cases in Michigan by Case Type^a, 2021 – June 2, 2025

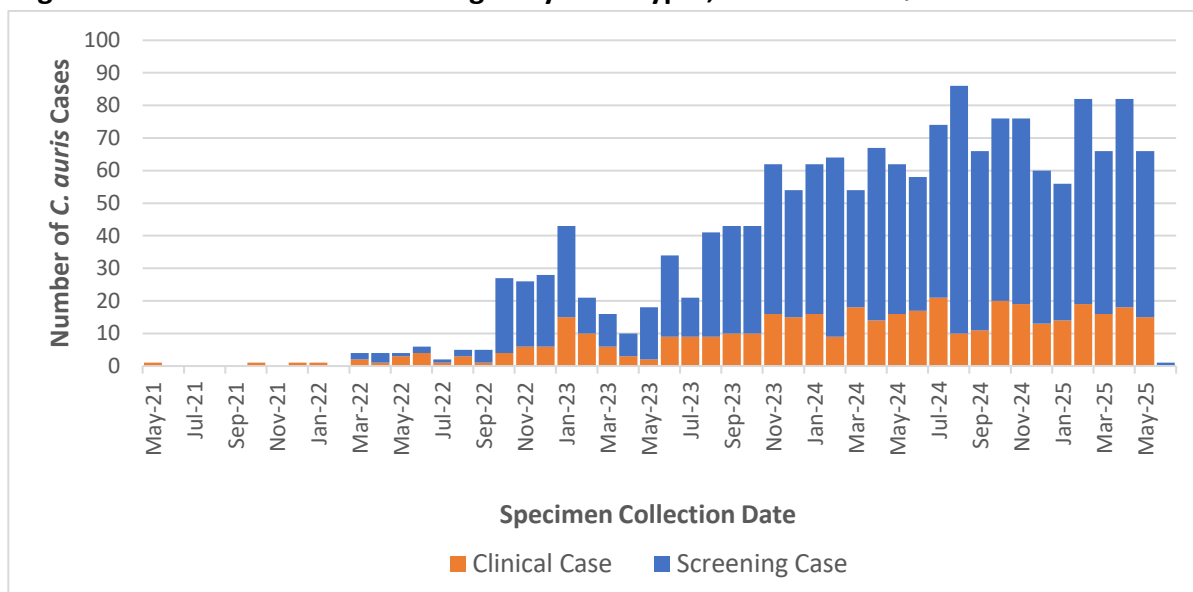
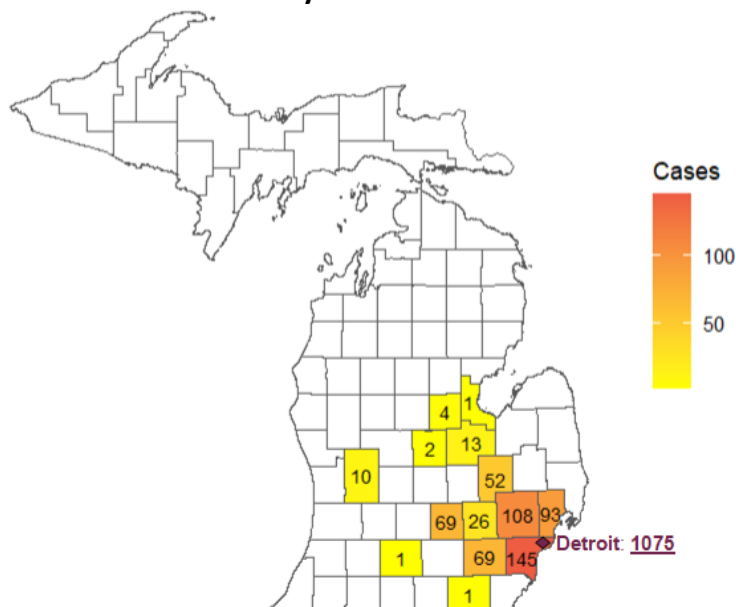


Fig 2. Jurisdiction of Health Care Facility at *C. auris* Case Detection^b



10 cases reported from out-of-state facilities.

Fig. 3. *C. auris* Cases by Health Care Facility Type^c at Detection^b

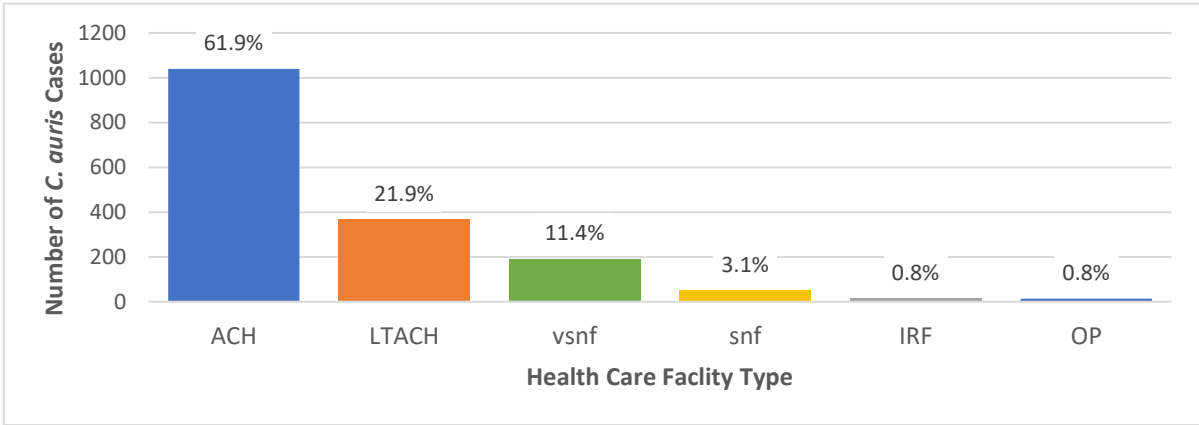


Fig 4. Clinical *C. auris* Cases by Specimen Source, n= 415

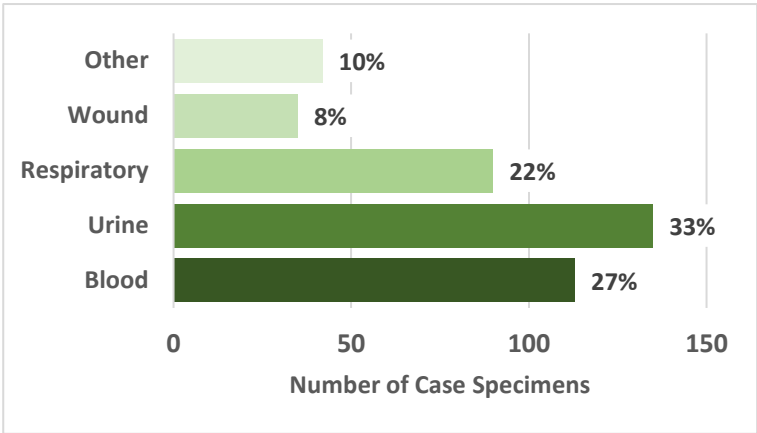


Fig 5. Clinical Isolate Antifungal Susceptibility Testing^d, n = 343

Antifungal Drug	MIC ₅₀ (Range)	% Resistant
Polyene Class:		
Amphotericin B	1 (0.125-3)	0.3
Echinocandin Class^e:		
Anidulafungin	0.5 (0.03-16)	3.8
Micafungin	0.25 (0.03-8)	2.6
Azole Class:		
Fluconazole	128 (4 ->256)	98.5
Itraconazole	1 (0.06-4)	NA
Isavuconazole	2 (0.03-4)	NA
Posaconazole	0.25 (<=0.008-1)	NA
Voriconazole	1 (0.03-8)	NA

Fig 6. Clinical Isolate Susceptibility Testing by Antifungal Class^f, n = 343

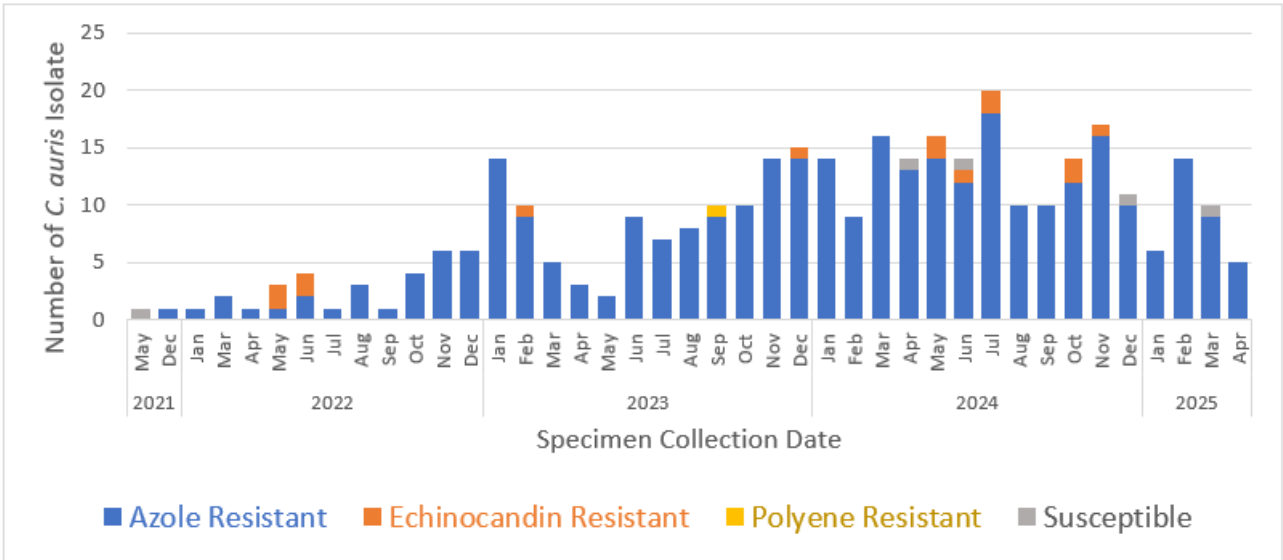


Fig 6. *C. auris* Cases by Race, as of Apr 30, 2025

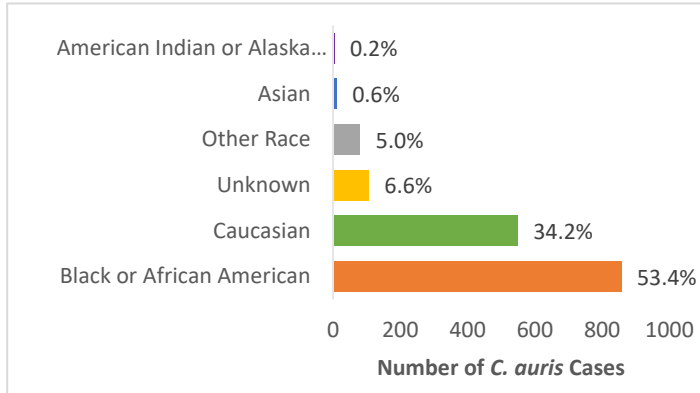


Fig 7. *C. auris* Cases by Sex, as of Apr 30, 2025

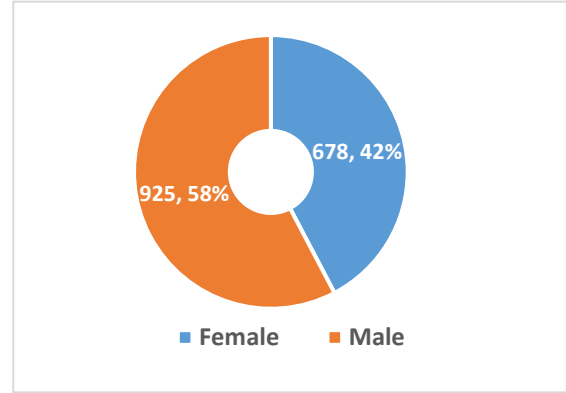
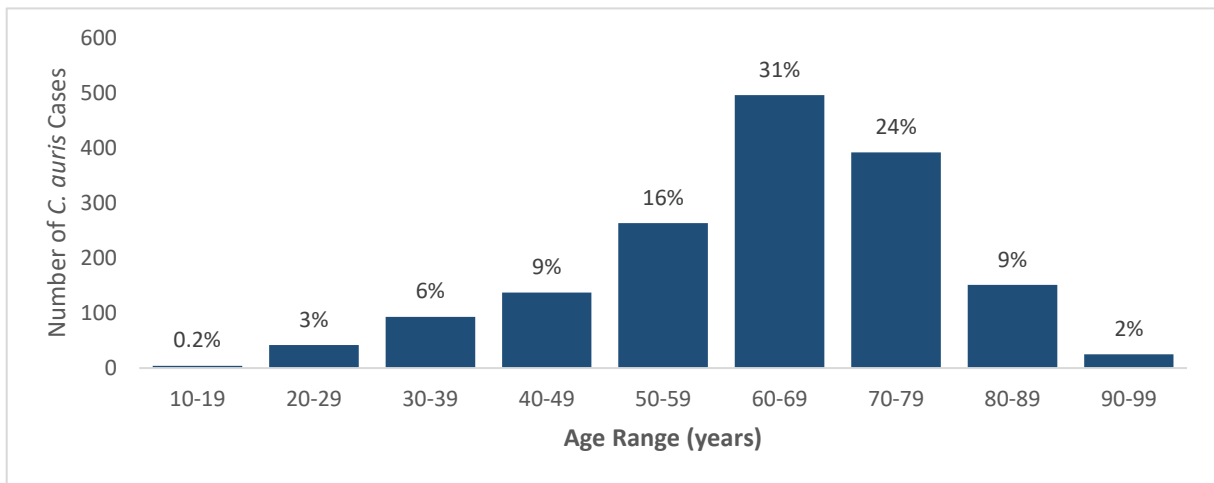


Fig 8. *C. auris* Cases by Age, as of Apr 30, 2025



^a **Case Type:** Clinical Case – *C. auris* identified in a specimen collected during the course of clinical care for the purpose of diagnosis or treatment of disease, such as from a blood, urine, respiratory, wound; Screening Case – *C. auris* identified in a sample collected to detect colonization, such as the axilla and/or groin; *Individuals initially identified as a screening case but whom later develop a positive clinical culture will solely be reported as a clinical case in this report thereafter.*

^b **Location at Detection** – Health care facility where the individual was present at the time the *C. auris* positive specimen was collected, which may or may not reflect the location where *C. auris* was acquired.

^c **Health Care Facility Type:** LTACH – long-term acute care hospital; ACH – acute care hospital; vSNF – ventilator-capable skilled nursing facility; IRF – inpatient rehabilitation facility; SNF – skilled nursing facility; OP – outpatient setting.

^d **Antifungal Susceptibility Testing:** Performed by the CDC Antimicrobial Resistance Laboratory Network. There are currently no established *C. auris*-specific susceptibility breakpoints. Therefore, breakpoints are defined based on those established for closely related *Candida* species and on expert opinion. [Antifungal Susceptibility Testing for *C. auris* | *Candida auris* \(*C. auris*\) | CDC](#)

^e **Echinocandin Resistance:** An echinocandin drug continues to be the recommended initial therapy for treatment of *C. auris* infections. [Clinical Treatment of *C. auris* infections | *Candida auris* \(*C. auris*\) | CDC](#)

^f **Antifungal Class:** Echinocandin resistant and polyene resistant isolates were also azole resistant. Susceptible isolates were susceptible to all three classes of antifungals. Of 14 echinocandin and polyene resistant isolates, 13 (93%) were collected in healthcare facilities in the City of Detroit, and 1 in Grand Traverse County.

MDHHS, Multidrug Resistant Organism (MDRO) Containment Unit updates *C. auris* data weekly. Monthly updates are provided for demographics including age, sex, and race data.