

Protecting, Maintaining and Improving the Health of All Minnesotans

Notification Letter to Minnesota Hospital and Reference Laboratories Regarding Reporting of Extrapulmonary Nontuberculous Mycobacteria (ENTM)

Dear Reference or Hospital Microbiology Laboratorian:

The Minnesota Department of Health (MDH) will be adding extrapulmonary nontuberculous mycobacteria (ENTM) as sentinel laboratory surveillance on October 1, 2019. MDH is conducting this surveillance pursuant to Minnesota Rules 4605.7000 to 4605.7900. Specifically, Minnesota Rules, 4605.7046 (sentinel surveillance), permits the Commissioner of Health to require reporting of newly recognized or emerging diseases and syndromes suspected to be of infectious origin or previously controlled or eradicated infectious disease if certain criteria are met.

Nontuberculous mycobacteria (NTM) are opportunistic acid-fast bacteria that are widespread and naturally occurring in the environment, especially in soil and water, from which humans may acquire these organisms. Healthcare-associated transmission has occurred due to contaminated medical equipment. NTM causes both pulmonary and extrapulmonary disease (ENTM), depending on the body site of the infection. Extrapulmonary disease occurs in any body site outside of the lungs and may result from direct inoculation. ENTM can cause an extremely broad range of infections that vary depending on the specific NTM species and the person who is infected. Extrapulmonary infections include cervical lymphadenitis, which predominantly occurs in young children; disseminated infection, which occurs in immunosuppressed patients that requires treatment with long complicated regimen of antibiotics; and opportunistic disease, which occurs as a result of contamination of NTM from the environment or health care equipment and most often presents as infected cutaneous wounds, soft tissue infections, or prosthetic joint infections. ENTM infection can cause a wide variety of symptoms; the specific symptoms of ENTM infection will depend on the site inoculated by the bacterium.

The prevalence of human disease caused by ENTM has increased over the last decade. Whether the increase in cases is real or whether more cases are being recognized and diagnosed remains unclear due to a lack of surveillance for ENTM. Implementing surveillance will allow for better tracking and understanding the epidemiology of ENTM throughout the state of Minnesota. Numerous national and global outbreaks of different strains of ENTM have occurred in the last several years causing serious morbidity. In 2016 an outbreak of ENTM occurred in Minnesota with patients experiencing skin lesions after self-administration of human chorionic gonadropin (HCG) injections.

Reporting Requirements:

- What: MDH is requiring laboratories to report cases of extrapulmonary nontuberculous mycobacteria (ENTM).
- When: Similar to other reportable communicable diseases, you must report to MDH within one working day after the test result is finalized.
- How: Clinical and reference laboratories that have the capability to identify ENTM will need to report all cases of ENTM among Minnesota residents using a designated case report form. Clinical and

reference laboratories that have the capability to identify ENTM will also need to send weekly line lists of identified cases to MDH.

Your participation in this surveillance program is greatly appreciated. Thank you for all you do to protect the health and safety of Minnesotans. You can find documentation on why this surveillance is necessary and what laboratories need to know about reporting these cases at https://www.health.state.mn.us/diseases/ntm.

If you have any questions about this letter, please contact Laura Tourdot (<u>laura.tourdot@state.mn.us</u>) at 651-201-4881 or Paula Snippes Vagnone (<u>paula.snippes@state.mn.us</u>) at 651-201-5581.

Sincerely,

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