To: LCI Voorwacht[ 5.1.2e @rivm.nl]

From: 5.1.2e .1.2 5.1.2e

Sent: Wed 12/16/2020 9:13:41 AM Subject: FW: Burkholderia aenigmatica

Received: Wed 12/16/2020 9:13:00 AM

ECDC Coronavirus disease 2019 (COVID19) and supply of substances of human origin in the EU EEA second update.pdf

Dit kan er dan ook in – maar misschien is er al een casus van? Groet, 5.1.2e

From: LCI Voorwacht < 5.1.2e @rivm.nl>

Sent: donderdag 10 december 2020 17:07

To: 5.1.2e 5.1.2e < 5.1.2e @rivm.nl>; 5.1.2e 12 5.1.2e < 5.1.2e @rivm.nl>

Subject: Burkholderia aenigmatica

Hoi.

Hierbij het stukje in het RTR rapport van 10.12.2020 over Burkholderia aenigmatica. <sup>5.1.2e</sup> vroeg of jullie onderstaande situatie nog wilde beoordelen.

## Burkholderia aenigmatica, UK-England

Source: EPIS, Public Health England

During August to December 2020, 10 isolates of *Burkholderia aenigmatica* from 10 patients were reported to Public Health England. The isolates were from the same strain as identified by pulsed-gel electrophoresis (PFGE). Most patients experienced clinically significant illness. 7/10 isolates were from blood, 1 from cerebrospinal fluid. The patients were in 8 hospitals geographically-dispersed in UK-England, suggestive of a common source outbreak.

Prior to detection of *B. aenigmatica*, most cases spent some time in an intensive care/high dependency unit. No epidemiological links between cases have been identified to date.

Burkholderia aenigmatica is a newly described species within the Burkholderia cepacia complex (Bcc). Due to limitations in identification methods, it is unlikely that hospitals in UK-England will specifically identify this organism. MALDI-TOF mass spectrometry has variously identified it as B. cepacia, B. cenocepacia, B. lata and B. contaminans.

PHE has alerted hospital microbiology departments to encourage case finding, issued trawling questionnaires for cases, and posted in ECDC EPIS AMR-HAI. PHE hypothesises that the common source may be a pharmaceutical/medical product that currently has an unknown identity and distribution.

Assessment: Currently, cases have only been reported by UK-England. If there is a common source that is a contaminated product, then countries that used a product, that was contaminated, will be likely to report cases. This EPIS post will increase the capability of EU/EEA hospitals to correctly identify cases of infection by this newly-described BCC species. The EPIS post states <sup>3</sup>Most patients experienced clinically significant illness <sup>1</sup> and does not include mention of any fatal cases.

Action: ECDC will continue to monitor this event through EPIS AMR HAI.

Met vriendelijke groet,

5.1.2e 5.1.2e 5.1.2e

RIVM- Centrum infectieziektebestrijding

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