TO: Hospitals, Healthcare Facilities, Healthcare Providers, and Local Health Departments (LHDs)  
FROM: New York State Department of Health, Bureau of Communicable Disease Control

HEALTH ADVISORY:  
RAPIDLY-GROWING NONTUBERCULOUS MYCOBACTERIUM INFECTIONS ASSOCIATED WITH TRAVEL TO THE DOMINICAN REPUBLIC FOR COSMETIC SURGERY PROCEDURES

Please distribute to all Primary Care, Family Medicine, Emergency Medicine, Internal Medicine, Infectious Disease, General and Plastic Surgery, Dermatology, Laboratory Medicine (including Mycobacteriology Laboratory staff) and Infection Control Staff.

SUMMARY

- The New York State Department of Health (NYSDOH) has been working with other states (Maryland, Connecticut, and Massachusetts) and the Centers for Disease Control and Prevention (CDC) on an investigation of a cluster of rapidly-growing nontuberculous *Mycobacterium* (RG-NTM) cutaneous infections among East Coast residents following surgical procedures performed in the Dominican Republic (DR).
- Fifteen confirmed or probable cases have been identified to date; all are female, and report undergoing elective surgery in the DR after April 1, 2013.
- Healthcare providers should be aware of these cases and obtain cultures for mycobacterial culture from patients with cellulitis, soft tissue infection or cutaneous abscess who had a surgical procedure in the DR after April 1, 2013.
- Providers should notify their local health department (LHD) if a case is identified and work with the LHD to send cultures to the state public health laboratory (Wadsworth Center) for testing.

BACKGROUND

The NYSDOH has been notified of a cluster of RG-NTM infections associated with travel to the DR for cosmetic surgery procedures. The initial cases were reported by the Maryland Department of Health and Mental Hygiene on August 26, 2013. Additional cases have been identified in Connecticut, Massachusetts, and New York.

To date, a total of 15 confirmed or probable cases have been identified. All reported patients are women (age range: 18–50) who have undergone elective surgery procedures, including liposuction, abdominoplasty, and breast lifts or reduction, in the DR after April 1, 2013. Symptoms have included abdominal abscesses, pain, wound discharge, and fever. No deaths have occurred. Nine are laboratory confirmed cases with positive cultures of RG-NTM—
predominately *Mycobacterium abscessus*, but also including *M. chelonae* and *M. fortuitum*. Treatment has included hospitalization, surgical debridement, and intravenous antibiotics.

Outbreaks of RG-NTM infections associated with cosmetic surgery in the DR have occurred in the past:


**EPIDEMIOLOGY AND CLINICAL PRESENTATION**

RG-NTM include *Mycobacterium abscessus, M. chelonae,* and *M. fortuitum* and are associated with nosocomial disease. Previous investigations of nosocomial outbreaks and pseudo-outbreaks have identified tap water sources and distilled water as sources of infection. These bacteria are capable of presenting as lung, soft tissue and wound infections. Cosmetic surgery has also been identified as a potential source of infection.

In total, 9 (60%) of the 15 patients reported having cosmetic surgery at the same surgical center; the rest either attended another facility in the DR or the facility name is not currently known. Procedure dates range from April 2 through September 19, 2013. Of those patients for whom information is available at this time, 11/15 (73%) required hospitalization, 13/15 (87%) required surgery for diagnostic or therapeutic purposes and 12/15 (80%) received long courses of anti-Mybocacterium treatment. Others are being watched to see if a positive culture will be obtained.

**DIAGNOSIS, TESTING, AND REPORTING**

A proven link to a single clinic facility in the DR has not been confirmed, but there is a concern that other NYS residents who may have undergone surgical procedures in the DR may be at risk for RG-NTM infections.

Healthcare providers should be aware of these cases and obtain cultures for mycobacterial culture from patients with cellulitis, soft tissue infection or cutaneous abscess who had a surgical procedure in the DR after April 1, 2013. Providers should notify their LHD once these cases are identified and work with the LHD to send cultures to the state public health laboratory, Wadsworth Center, for testing.

Information on communicable disease reporting, including the list of reportable diseases, reporting guidance, and contact information for LHDs, can be found at: http://goo.gl/FBccq.

If you have any questions regarding this information, please contact your LHD or the NYSDOH Bureau of Communicable Disease Control via email at: bcdc@health.state.ny.us or call (518) 473-4439.