

**Alabama Department of Public Health  
Alabama Emergency Response Technology (ALERT)  
Health Alert Network (HAN)**

**May 23, 2023**

**Call for Cases: Outbreak of Suspected Fungal Meningitis in U.S. Patients who Underwent Surgical Procedures under Epidural Anesthesia in Matamoros, Mexico**

The Centers for Disease Control and Prevention (CDC) is investigating an outbreak of suspected fungal meningitis among U.S. patients hospitalized in Texas after undergoing cosmetic procedures under epidural anesthesia in the city of Matamoros, Mexico. A fungal etiology is suspected based on elevated cerebrospinal fluid (CSF) levels of the fungal biomarker (1,3)-beta-D-glucan in at least one patient. As of May 12, 2023, five U.S. patients have been diagnosed with suspected fungal meningitis; all five were hospitalized, and one has died. Affected patients underwent procedures in at least two clinics in Matamoros, Mexico, including River Side Surgical Center and Clinica K-3.

**Recommendations for Healthcare Providers**

- For patients who underwent a medical or surgical procedure under epidural anesthesia in Matamoros, Mexico, after January 1, 2023, and who have developed symptoms consistent with fungal meningitis (e.g., fever, headache, stiff neck, nausea/vomiting, photophobia, altered mental status), healthcare providers should perform brain imaging (i.e., computerized tomography [CT] or magnetic resonance imaging [MRI]) and a diagnostic lumbar puncture (LP) unless contraindicated (e.g., because of skin infection over the puncture site, brain mass causing increased intracranial pressure).
  - Because some patients with fungal meningitis may initially present with mild or non-specific symptoms, healthcare providers should have a low threshold for performing brain imaging and LP.
- Healthcare providers can consider ordering bacterial and fungal cultures of CSF fluid, as well as serum and CSF levels of (1,3)-beta-D-glucan. Healthcare providers can consider ordering other diagnostic tests including serum and CSF *Aspergillus* galactomannan and fungal polymerase chain reaction (PCR) testing.
- If fungal meningitis is suspected, treatment should be initiated as soon as possible after obtaining CSF; treatment should not be withheld because of negative fungal culture or (1,3)-beta-D-glucan results. Consultation with an infectious disease specialist is recommended.
- Treatment should involve broad-spectrum antifungal medications that have adequate central nervous system penetration. Dual agent antifungal therapy can be considered and has been used in previous fungal meningitis outbreaks.
- Healthcare providers should immediately report suspected fungal meningitis cases to their state health department's Healthcare-associated Infections (HAI) Program Coordinator, Melanie Roderick, at [Melanie.Roderick@adph.state.al.us](mailto:Melanie.Roderick@adph.state.al.us)

**For More Information:**

- [Meningitis](#)
- [Fungal Meningitis](#)
- [Diagnostic and clinical guidance for clinicians](#)