

MLS Laboratory Update: Request for Information on *Cladophialophora bantiana* Identifications

OCTOBER 22, 2026

Purpose of this Message:

To provide awareness and ask Minnesota laboratories to notify the Minnesota Department of Health (MDH) of patients with *Cladophialophora bantiana* identified from a clinical specimen since January 1, 2020 (if possible).

Action Item:

Please review your laboratory records for *Cladophialophora bantiana* detected or identified since January 1, 2020, including testing performed by reference laboratories for your facility, and notify MDH of any patients identified.

Background:

On October 2, 2026, CDC published an MMWR Report [Notes from the Field: Molecular Detections of *Cladophialophora bantiana* at a Clinical Reference Laboratory – United States, 2009-2026](https://www.cdc.gov/mmwr/volumes/75/wr/mm7540e1.htm) (<https://www.cdc.gov/mmwr/volumes/75/wr/mm7540e1.htm>) describing an increase in *Cladophialophora bantiana* detections at the University of Washington (UW) clinical reference laboratory. From 2009 through July 2026, 48 confirmed and one probable case were identified from 21 states and the District of Columbia; 88% were detected from intracranial CNS tissue and 12% from lung specimens.

Detections increased in recent years, from 1-5 cases annually during 2009–2023 to 8 cases in 2024 and 14 in 2025. After accounting for CNS testing volume, the detection rate increased approximately fourfold from 2023 to 2025.

C. bantiana is a neurotropic dematiaceous mold that primarily causes brain abscesses and can infect immunocompetent persons. Reported case-fatality rates are 60%–70%. Its environmental reservoir and route of infection remain uncertain, and routine national surveillance does not exist. MDH is participating in a national effort to identify additional cases and better characterize the epidemiology of infection. No Minnesota cases are currently known to MDH.

Action Item Details:

Review your records and reply: MDH requests that clinical laboratories review their records for patients with *C. bantiana* identified from January 1, 2020, through the present.

- Include detections or identifications made by your laboratory or by a reference laboratory to which your institution submitted the specimen. This review should include *C. bantiana* identified from **any clinical specimen**, including tissue, respiratory specimens, or body fluids.
- If you have detected or identified *C. bantiana* since January 1, 2020, we request that you **contact arlnmn@state.mn.us** with your contact information and we will connect with you to ask for additional information, such as collection date of each *C. bantiana* positive specimen, source of specimen, location of patient (MN or other state), for organisms identified by your laboratory or a reference laboratory, if utilized. MDH staff will call you back to gather additional information.

Laboratory Considerations

C. bantiana may be identified through fungal culture or molecular methods. In the recent an MMWR Report [Notes from the Field: Molecular Detections of Cladophialophora bantiana at a Clinical Reference Laboratory – United States, 2009-2026](https://www.cdc.gov/mmwr/volumes/75/wr/mm7540e1.htm) (<https://www.cdc.gov/mmwr/volumes/75/wr/mm7540e1.htm>), cases were identified using broad-range fungal PCR performed on fresh or formalin-fixed paraffin-embedded tissue or body fluids. Importantly, most cases were detected from CNS tissue rather than cerebrospinal fluid; in the one reported UW patient who also underwent CSF broad-range fungal PCR, CSF testing was negative despite infection identified from brain tissue.

Additional Information:

As a reminder, healthcare providers should report infections that might be associated with a medical product to FDA's [MedWatch Program](https://www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program) (<https://www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program>) and to the product manufacturer. Of note, this reporting is not limited to the case-finding period specified above.

Questions:

For questions about this investigation or to report a possible case, please contact Epidemiologists Jerrica L. Werner and Malia Ireland at Jerrica.Werner@state.mn.us and Malia.Ireland@state.mn.us,

For any laboratory questions, please contact Paula Snippes Vagnone at Paula.snippes@state.mn.us

Thank You,

Paula M. (Snippes) Vagnone, MT (ASCP)
Microbiology Unit Supervisor, AR Lab Network Central Region Coordinator

Public Health Laboratory, Minnesota Department of Health
Phone: 651-201-5581
Paula.snippes@state.mn.us

THIS IS AN UPDATE FROM THE MINNESOTA DEPARTMENT OF HEALTH – PUBLIC HEALTH LABORATORY (MDH-PHL) AND THE MINNESOTA LABORATORY SYSTEM (MLS). THIS MESSAGE IS BEING SENT TO MLS LABORATORY CONTACTS SERVING MINNESOTA RESIDENTS. YOU ARE NOT REQUIRED TO REPLY TO THIS MESSAGE.

PLEASE FORWARD THIS TO ALL APPROPRIATE PERSONNEL WITHIN YOUR INSTITUTION AND HEALTH SYSTEM

THE CONTENT OF THIS MESSAGE IS INTENDED FOR PUBLIC HEALTH AND HEALTH CARE PERSONNEL AND RESPONSE PARTNERS WHO HAVE A NEED TO KNOW THE INFORMATION TO PERFORM THEIR DUTIES. IT IS FOR OFFICIAL USE ONLY. DO NOT DISTRIBUTE BEYOND THE INTENDED RECIPIENT GROUPS AS DESCRIBED IN THIS MESSAGE.

Minnesota Laboratory System
Minnesota Department of Health, Public Health Laboratory
601 Robert St. N, St. Paul, MN 55164-0899
651-201-5200
health.mnlabsystem@state.mn.us
www.health.state.mn.us/diseases/idlab/mls/index.html

To obtain this information in a different format, call: 651-201-5200.