Severe Respiratory Illness Associated with Human Metapneumovirus in Nursing Home, New Mexico, USA

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maintaining adequate staffing, maintaining supplies necessary for implementation of infection control precautions, the psychological hardship of restricting residents to their rooms, and difficulties controlling the movement of residents with dementia. The last reported case was on March 16, 2018.

Prompt identification of the pathogen within 2–3 days of specimen collection assisted providers and the facility in coordinating an effective response. Anecdotally, facility staff noted that pathogen identification also promoted credibility. Although diagnostic laboratory testing can be an additional expense, pathogen identification can be invaluable and cost can be reduced by not testing every case-patient once a pathogen has confidently been identified and other pathogens have been ruled out.

We report a large outbreak of HMPV-associated severe respiratory illness in a nursing home that affected 62% of residents. Respiratory illness outbreaks in nursing homes present unique challenges because of needs of the residents and structural configuration of the facility, which must be considered when implementing infection control measures. This outbreak demonstrates the need for considering and testing for HMPV during respiratory outbreaks in nursing homes and other residential care settings. Prompt recognition of respiratory outbreaks and institution of outbreak control measures are key to preventing disease spread, hospitalizations, and deaths.

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About the Author
At the time of this study, Ms. Peña was an infectious disease epidemiologist at the New Mexico Department of Health, Santa Fe, NM. She is currently a physician in the Healthcare Associated Infections Program at the Tennessee Department of Health, Nashville, TN. Her research interests include community outreach, education, and response to emerging infectious diseases.

References