Date: Oct. 25, 2024
From: Kansas Department of Health and Environment – Division of Public Health
To: **Healthcare Providers and Local Health Departments**
RE: *Mycoplasma Pneumoniae* Infections Increasing in Kansas, Especially Among Children

Summary

- Respiratory infections caused by the bacteria *Mycoplasma pneumoniae* (*M. pneumoniae)* are increasing nationwide and in Kansas, especially among children.
- Emergency department visits for pneumonia have been increasing in Kansas, particularly among children and young adults.
- Healthcare providers should consider *M. pneumoniae* as a cause of pneumonia and test when indicated.
- Macrolides are the first-line treatment for this infection. Some first-line antibiotics used to treat pneumonia, like penicillin, will not treat *M. pneumoniae*.
- Use transmission-based precautions (droplet and contact) to reduce spread in health care and community settings. Promote respiratory hygiene and encourage symptomatic individuals to stay at home. Encourage vaccination for influenza and other respiratory viruses to reduce the risk of coinfections.
- Report unusual clusters or outbreaks of respiratory illnesses within 4 hours by calling the Kansas Department of Health and Environment (KDHE) Epidemiology Hotline at 877-427-7317 or your local county public health department. Individual cases of *M. pneumoniae* are not reportable in Kansas.

Background

The Centers for Disease Control and Prevention (CDC) and KDHE have seen an increase in respiratory infections caused by the bacteria *M. pneumoniae* nationwide and in Kansas. Emergency department visits for pneumonia have been increasing in Kansas, particularly among children and young adults.

M. pneumoniae infections can occur at any age, but they most often occur among children ages 5–17 years and young adults. *M. pneumoniae* infections are generally mild and mostly present as a chest cold but may also present as pneumonia. Younger children may have different symptoms (e.g., diarrhea, wheezing, or vomiting). Symptom onset is typically gradual and can include fever, cough, and a sore throat. While uncommon, serious complications from infection can occur that require hospital care, including new or worsening asthma, severe pneumonia, and encephalitis (brain disease).

M. pneumoniae bacteria are spread by inhaling respiratory droplets produced when an infected person coughs or sneezes. Other people can get infected if they breathe in those droplets. Strategies that prevent respiratory viruses, such as handwashing and covering coughs and sneezes, also prevent these bacteria from spreading. Outbreaks occur mostly in crowded environments such as schools, college residence halls and nursing homes.

Individual cases of *M. pneumoniae* are not reportable in Kansas. **Mandated Reporters, including clinicians, are required by Kansas Administrative Regulation (K.A.R. 28-1-2) to report outbreaks within 4 hours to the 24/7 KDHE Epidemiology Hotline (877-427-7317, option 5).**

Recommendations for Clinicians and Public Health Practitioners

- Ensure that healthcare providers are aware of increasing *M. pneumoniae* infections.
- Consider *M. pneumoniae* as a possible cause of infection among children hospitalized with community-acquired pneumonia.
    - Have increased suspicion of *M. pneumoniae* among patients with community-acquired pneumonia who are not clinically improving on antibiotics that are known to be ineffective against *M. pneumoniae*, such as beta-lactams.
- Perform laboratory testing when *M. pneumoniae* infection is suspected, especially among hospitalized children, to ensure appropriate antibiotic therapy is administered.
- Consider swabbing both the throat and the nasopharynx to improve the likelihood of detection in respiratory swab specimens.
- Consider using a second-line antibiotic regimen, such as fluoroquinolones or tetracyclines, to treat patients with suspected or confirmed *M. pneumoniae* infection who are not improving on macrolides.
- Consider potential adverse effects in children or pregnant people when using fluoroquinolones or tetracyclines.
- Promote the judicious use of antibiotics and minimize the risk of antibiotic resistance by not prescribing antibiotics unless indicated by clinical and/or laboratory evidence.
- Promote CDC recommendations for core prevention strategies to prevent respiratory illness, including practicing good hand hygiene and covering coughs and sneezes.

For More Information

- *Mycoplasma Pneumoniae* Infections Have Been Increasing (CDC.gov)
- *Mycoplasma pneumoniae* Infection Surveillance and Trends (CDC.gov)
- Fact sheet: *Mycoplasma Pneumoniae* Infection