



**Vigilance for Cases of Acute Flaccid Myelitis (AFM)**

**TO: West Virginia Healthcare Providers, Hospitals and other Healthcare Facilities**

**FROM: Rahul Gupta, MD, MPH, FACP, Commissioner for Public Health and State Health Officer, WVDHHR, Bureau for Public Health**

**DATE: September 09, 2015**

**LOCAL HEALTH DEPARTMENTS:** PLEASE DISTRIBUTE TO COMMUNITY HEALTH PROVIDERS, HOSPITAL-BASED PHYSICIANS, INFECTION CONTROL PREVENTIONISTS, LABORATORY DIRECTORS, AND OTHER APPLICABLE PARTNERS

**OTHER RECIPIENTS:** PLEASE DISTRIBUTE TO ASSOCIATION MEMBERS, STAFF, ETC.

The Centers for Disease Control and Prevention (CDC) continues to receive reports of acute flaccid myelitis (AFM). As of August 2015, a total of 120 children from 34 states have been reported. No cases have been reported from West Virginia. Many of the cases were hospitalized and most presented with acute onset of limb weakness following a febrile or respiratory illness. On MRI, all the cases had distinct findings on the central gray matter of the spinal cord. Despite extensive testing, the cause of this illness remains unclear.

To better understand AFM and monitor its increase, the Division of Infectious Disease Epidemiology (DIDE), requests that clinicians and healthcare facilities report any illness to public health authorities that meets all of the following criteria:

- A person with onset of acute focal limb weakness, AND
- A magnetic resonance image showing a spinal cord lesion largely restricted to gray matter, and spanning one or more spinal segments, OR
- Cerebrospinal fluid (CSF) with pleocytosis (CSF white blood cell count >5 cells/mm<sup>3</sup>, may adjust for presence of red blood cells by subtracting 1 white blood cell for every 500 red blood cells present); CSF protein may or may not be elevated.

If acute flaccid myelitis is suspected:

- Collect specimens (CSF, whole blood, sera, stool, NP swab, NP wash, NP aspirate, or oropharyngeal swab) as early as possible in the course of illness. Testing may be available through the West Virginia Office of Laboratory Services (OLS).
- Clinicians and healthcare facilities should report cases to their local health department within a week of diagnosis. Local health departments should coordinate disease investigation and specimen collection and submission with DIDE and OLS, respectively.

Information about AFM can be found at [www.dhhr.wv.gov/oeps/disease/atoz/pages/acute-flaccid-myelitis.aspx](http://www.dhhr.wv.gov/oeps/disease/atoz/pages/acute-flaccid-myelitis.aspx)

For more information, contact your local health department or DIDE at (800)-423-1271, ext. 1 or (304)-558-5358, ext. 1.

This message was directly distributed by the West Virginia Bureau for Public Health to local health departments and professional associations. Receiving entities are responsible for further disseminating the information as appropriate to the target audience.

**Categories of Health Alert messages:**

**Health Alert:** Conveys the highest level of importance. Warrants immediate action or attention.

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