

ACUTE FLACCID MYELITIS (AFM) IN CHILDREN

A FACT SHEET FOR PARENTS

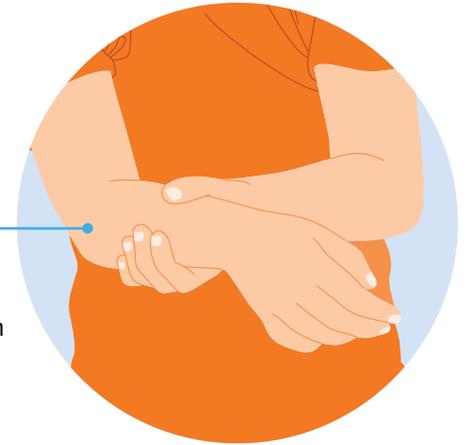
Acute flaccid myelitis (AFM) is an uncommon but serious neurologic condition that causes weakness in the arms or legs. If your child develops these symptoms, you should seek medical care for them right away.

What are the symptoms of AFM?

AFM affects a child's nervous system, specifically their spinal cord. It usually starts with sudden onset of limb weakness and loss of muscle tone and reflexes. Some may also experience:

- facial droop or weakness,
- difficulty moving the eyes,
- drooping eyelids, or
- difficulty with swallowing or slurred speech.

Less common symptoms of AFM include numbness or tingling in the limbs and neck or facial weakness. A child may also have difficulty breathing due to muscle weakness that requires ventilator (a machine to help them breathe) support.



Most children with AFM will have sudden onset of arm or leg weakness.

How is AFM diagnosed?

A doctor will review a patient's medical history. They will also make a careful examination of the nervous system and the spinal cord, looking at the location of the weakness, muscle tone, and reflexes. Magnetic resonance imaging (MRI), lab testing of the cerebrospinal fluid, and tests to measure how nerves are functioning may also be used to diagnose AFM.

What causes AFM?

CDC is working closely with national experts, healthcare providers, and health departments to figure out what causes children to get AFM. We think viruses likely play a role in AFM. Since 2014, most of the children with AFM (more than 90%) had a respiratory illness or fever before they developed arm or leg weakness.

There have been increases in AFM cases every two years since 2014. Most cases of AFM occur between August and October. At this same time of year, many viruses commonly circulate, including enteroviruses. We are trying to better understand the annual circulation of enteroviruses, including enterovirus D68 (EV-D68), and what role this circulation may play in AFM.

CDC and its partners are also investigating why only a small number of people go from having a respiratory illness or fever to developing AFM. Respiratory illnesses and fever from viral infections are common, especially in children, and most people recover.

You may hear AFM referred to as a "polio-like" condition, but we do know that none of the AFM cases have been caused by poliovirus.

How is CDC involved in AFM cases?

Doctors send medical information and test results to their health departments, who then send this information to CDC. AFM experts at CDC review this information and classify patients as having a confirmed or probable case of AFM based on case definitions. If a patient does not meet the criteria, they are classified as "not a case" of AFM. We send this information back to the health department to be shared with the doctor and patient. Since we need complete information to classify a case, it can take a month or more to complete this process. However, CDC's classification process should not delay treatment of a child with AFM. Parents should talk to their child's health care professional about the best treatment available for their child.



Centers for Disease Control and Prevention
National Center for Immunization and Respiratory Diseases

How is AFM treated?

There is no specific treatment for AFM, but a doctor who specializes in treating brain and spinal cord illnesses (neurologist) may recommend certain treatments on a case-by-case basis. Doctors will also recommend physical or occupational therapy to help with arm or leg weakness caused by AFM. CDC is working closely with national experts to better understand how to treat AFM, how many people with AFM recover, and how many have ongoing muscle weakness.

Although CDC does not make treatment recommendations for individual cases, we do have information available online to help clinicians and public health officials manage the care of individuals with AFM. However, they are not recommendations or official guidelines.

How can I protect my child against AFM?

Since we don't know the cause of most of these AFM cases or what triggers this condition, we cannot recommend any specific action to take to prevent AFM. However, most children had a respiratory illness or fever consistent with a viral infection before they developed AFM. **You can decrease your child's risk of getting viral respiratory infections by having him or her**

- wash hands often with soap and water, for at least 20 seconds
- avoid touching his/her face with unwashed hands
- avoid close contact with people who are sick

You can decrease the risk of spreading a viral infection by

- cleaning and disinfecting frequently touched surfaces, including toys and doorknobs
- having your child cover coughs and sneezes with a tissue or upper shirt sleeve, not hands
- keeping sick children home

For more information on acute flaccid myelitis, visit www.cdc.gov/afm.