

Health Advisory

Acute Flaccid Myelitis: Recognition, Testing, and Reporting Requirements

December 5, 2022

Acute flaccid myelitis (AFM) is now an immediately, [reportable condition](#) in the City of Philadelphia. In early September, the Centers for Disease Control (CDC) reported a higher proportion of enterovirus D68 (EV-D68) positivity in children who were rhinovirus and/or enterovirus positive in 2022 compared to previous years. EV-D68 has been associated with AFM, a rare but serious neurologic complication involving limb weakness. Additionally, a case of paralytic polio was identified through routine AFM surveillance in Rockland County, NY in July 2022. Healthcare providers should consider AFM and testing for poliovirus infection in patients with unexplained acute flaccid limb weakness, particularly those who have not received the polio vaccine series. Providers also should promote measures to protect patients from respiratory viruses (e.g., hand hygiene, respiratory etiquette, etc.) and ensure patients are up-to-date with all recommended vaccines including the polio vaccine series.

SUMMARY POINTS

- Acute flaccid myelitis (AFM) is now an immediately, reportable condition in Philadelphia.
- Healthcare providers should report any suspect cases of AFM or poliovirus infection to PDPH immediately by calling 215-685-6741.
- Cerebrospinal fluid (CSF), blood, stool, and respiratory specimens should be collected as close to illness onset as possible for laboratory testing. PDPH can facilitate testing of clinical specimens for AFM and polio.

Clinical Syndrome: Both AFM and polio cause lesions in grey matter of the spinal cord and acute flaccid limb weakness that can result in paralysis. AFM generally presents with a prodromal respiratory or gastrointestinal illness for 1 week and neck or back pain followed by onset of weakness of one or more limbs. Other neurologic symptoms include cranial nerve findings such as slurred speech, difficulty swallowing, eyelid or facial droop, poor tone, and diminished reflexes. Weakness can also affect respiratory muscles, leading to respiratory failure. There is no specific treatment for AFM. Most patients recover with supportive care and physical and occupational therapy, but severe neurologic complications can result in death.

Reporting Guidelines: Clinicians should notify PDPH's Division of Disease Control immediately of any patient you are evaluating for AFM or poliovirus by calling 215-685-6741. **Approval from PDPH is required for specimen testing.** To receive approval clinicians must complete the patient summary form (<https://www.cdc.gov/acute-flaccid-myelitis/hcp/data-collection.html>) and include (if available) admission and discharge notes, neurology and infectious diseases consults, magnetic resonance imaging (MRI) images and reports, and vaccination history. Laboratory results including initial hospital or commercial laboratory testing for enteroviruses, arboviruses, and adenoviruses should also be provided. **Information should be submitted to PDPH regardless of any laboratory or MRI results.** AFM neurology experts at CDC will review case information and results to determine case classification.

Specimen Collection and Testing Recommendations: Coordinate with PDPH to send specimens to CDC for AFM and polio testing. PDPH advises collecting specimens from patients as early as possible after symptom onset, preferably on the day that limb weakness develops. Specimens to collect for submission to CDC include: **CSF, serum, stool (2 specimens collected 24 hours apart), and nasopharyngeal (NP) or oropharyngeal (OP) swabs. Stool is critical for ruling out polio, therefore all stool specimens submitted will also automatically be tested for poliovirus. Specimens must be accompanied by the [CDC Form 50.34](#).** 'Picornavirus Special Study' must be selected for test order name. Additional instructions regarding specimen collection and shipping to CDC can be found at <https://www.cdc.gov/acute-flaccid-myelitis/hcp/specimen-collection.html>.

For more information:

- PDPH AFM Resources: <https://hip.phila.gov/disease-control/diseasesconditions/acute-flaccid-myelitis/>
- AFM Surveillance in the US: <https://www.cdc.gov/acute-flaccid-myelitis/cases-in-us.html>
- Materials for Clinicians & Health Departments: <https://www.cdc.gov/acute-flaccid-myelitis/hcp/clinicians-health-departments.html>