

HEALTH ADVISORY



Public Health
Prevent. Promote. Protect.

REGION IV PUBLIC HEALTH

Clark, Cowlitz, Skamania, Wahkiakum
counties and Cowlitz Tribe

TO: Physicians and other Healthcare Providers

Please distribute a copy of this information to each provider in your organization.

Questions regarding this information may be directed to the following Region IV health officers:

Alan Melnick, MD, MPH, CPH

Clark County Public Health, (564) 397-8412
Skamania County Community Health, (509) 427-3850

Teresa Everson, MD, MPH

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Jennifer Vines, MD, MPH

Cowlitz County Health & Human Services, (360) 414-5599
Wahkiakum County Health & Human Services, (360) 795-6207

Alert categories:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; no immediate action necessary.

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**HEALTH
ADVISORY**
Oct. 10, 2018

**Increase in suspected cases of Acute
Flaccid Myelitis in Washington since
August 2018**



Current situation in Washington

- A cluster of suspected acute flaccid myelitis (AFM) has been reported among Washington residents.
- As of Oct. 9, five Washington cases are being evaluated by Centers for Disease Control and Prevention neurologists and other AFM experts.
- All cases are among children between 7 months and 5 years of age who presented with acute paralysis of one or more limbs. All had a prodrome that included respiratory symptoms in the week prior to presentation with symptoms of AFM. Four of the five had fever of 100.4 F or greater.
- The earliest onset of limb weakness was on Aug. 28 and the most recent on Oct. 5.
- The cases are residents of King County (2), Pierce County (1), Lewis County (1), and Snohomish County (1).

Actions requested

Report suspected cases of AFM promptly (see case definition below) to your local health department (contact information below). Your local health department will provide assistance with the following:

- **Complete the AFM patient summary form** when reporting patients to your local health department (<https://www.cdc.gov/acute-flaccid-myelitis/downloads/patient-summary-form.pdf>).
- **Collect surveillance specimens** from patients suspected of having AFM as early as possible in the course of illness (see details below).
- **Provide the following information:** 1) brain and spinal MRI images on a disc 2) MRI reports, 3) H&P notes, 4) neurology consult notes, 5) infectious disease consult notes, and 6) diagnostic laboratory reports.
- **Order viral respiratory and viral stool cultures to be performed locally** if not already done.

Also, please notify your local health department if you are aware of patients of any age that previously presented to your facility and fit the case definition (please have CSF results or MRI report available).

Resources

CSTE case definition

Clinicians should be vigilant and consider AFM in patients presenting with:

- Onset of acute limb weakness **AND**

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- MRI showing spinal cord lesion largely restricted to gray matter and spanning one or more spinal segments **OR** cerebrospinal fluid (CSF) showing pleocytosis (white blood cell count >5 cells/mm3)

Specimen collection guidance

Collect surveillance specimens from patients suspected of having AFM as early as possible in the course of illness. Route the following specimens to the Washington State Public Health Laboratory:

- Cerebrospinal fluid (collected within 24 hours of the serum)
- Serum (collected within 24 hours of the CSF)
- Two stool specimens separated by 24 hours (whole stool)
- Upper respiratory tract sample nasopharyngeal swap or oropharyngeal swab
- Oropharyngeal swab should always be collected in addition to the nasopharyngeal specimen on any patient suspected to have polio.

In addition, order a viral respiratory and a viral stool culture to be performed locally if not already done.

Contact your local health department for questions, sampling and shipping details.

Background

From Jan. 1 to Sept. 30, a total of 38 people in 16 states across the United States have been confirmed to have AFM. Most of these have been in children. More information about national surveillance for suspected AFM cases, which started in 2014, can be found [here](#). No etiology for AFM has been established although potential associations with enteroviruses (including EVD68 and EVA71), adenovirus, herpes viruses, arboviruses (including West Nile virus) and other viruses have been reported. Non-infectious causes have not been ruled out.

Thank you for your partnership.

LHJ	Phone	Fax
Clark County Public Health:	(564) 397-8182	(360) 397-8080
Cowlitz County Health Department:	(360) 414-5599	(360) 425-7531
Skamania County Community Health:	(509) 427-3850	(509) 427-0188
Wahkiakum County Health and Human Services:	(360) 795-6207	(360) 795-6143

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