You are being provided with this fact sheet:

☐ because you or your child may have been exposed to cytomegalovirus (CMV). If you believe your child has developed cytomegalovirus, contact your health care provider. Notify your child care provider or preschool if a diagnosis of CMV is made.

☐ for informational purposes only.

What is CMV?
Cytomegalovirus, or CMV, is a very common viral illness in young children. For most healthy people, CMV infection is not a serious problem. One in three children are infected with CMV by the age of 5, and over half of people have been infected by the time they are 40 years old.

What are the symptoms of CMV?
Most people have no symptoms when infected with CMV. Yet, the virus remains in the body for life. It is found in body fluids such as urine, saliva, blood, tears, semen, and breast milk. Occasionally, children or adults with CMV have symptoms that may include fever*, swollen glands, enlarged liver, and fatigue.

How is CMV spread?
CMV is spread from person to person by direct contact with body fluids of an infected person. Up to 70% of children aged 1 to 3 years in group care settings shed CMV virus. Although it is not very contagious, it has been known to spread to household members and among children in child care settings through saliva (such as by kissing, sharing mouthed toys, or sharing eating utensils), and through contact with urine when diaper changing.

Who is at risk from CMV?
For women of child bearing age who previously have not had CMV, there is a potential risk that the unborn child may get infected. This can lead to problems such as hearing loss, vision impairment, seizures, and varying degrees of intellectual disability. Pregnant women working with infants and young children should be informed of the risk of acquiring CMV infection, the possible effects on the unborn child, and the precautions they can take. Pregnant women should be especially careful to wash hands appropriately, and may consider working with older children or in a less direct role while pregnant. All child care facilities should inform pregnant workers of their risk, encourage them to discuss their risk with their health care provider, and consider having them sign a document demonstrating that they understand their risk.

How is CMV diagnosed?
Most infections are not diagnosed because the virus produces few, if any, symptoms. However, a blood test can determine whether a person has been infected with CMV. The virus can be cultured from samples of urine, throat swabs, and tissue samples to detect active infection.
How is CMV treated?
There is currently no treatment for CMV infection in a healthy person. Antiviral drug therapy is used for patients with a weakened immune system or for exposed newborns.

How can the spread of CMV be reduced?
- Use excellent handwashing technique often.
- Avoid sharing personal articles that may be contaminated with saliva, such as drinking cups, eating utensils and mouthed toys.
- Use a sanitizing solution on toys and surfaces.
- Avoid touching your eyes, nose or mouth.
- Practice clean diaper-changing technique and ensure appropriating handwashing and disinfecting after a diaper change.

Exclude from group setting?
Exclusion for CMV is not necessary unless the child has other exclusion criteria, or if the child is unable to participate and staff members cannot care for the child without compromising care to other children.

* Fever is defined as a temperature above 101°F (38.3°C) by any method or above 100.4°F (38.0°C) for infants younger than 2 months old.

References:
American Academy of Pediatrics
- Managing Infectious Diseases in Child Care and Schools, 4th ed.
Centers for Disease Control and Prevention (Website)
- CMV Facts for Pregnant Women and Parents
Centers for Disease Control and Prevention (Website)
- Cytomegalovirus (CMV) and Congenital CMV Infection