

# Polio Frequently Asked Questions (FAQ)

Updated August 24, 2022



## What is polio? ^

Polio (or poliomyelitis) is a disease caused by poliovirus. It can cause lifelong paralysis (cannot move parts of the body), and it can be deadly.

## What are the symptoms of poliovirus infection? ^

Most people who get infected with poliovirus (about 72 out of 100) will not have any visible symptoms. Some people will have flu-like symptoms that can include:

- Sore throat
- Fever
- Fatigue (tiredness)
- Headache
- Nausea
- Vomiting
- Stomach pain

These symptoms usually last 2 to 5 days, then go away on their own.

- Rarely, people with poliovirus infection will develop more serious symptoms that affect the brain and spinal cord, like paresthesia (feeling of pins and needles in the legs), meningitis (infection of the covering of the spinal cord and/or brain), or paralysis (can't move parts of the body) or weakness in the arms, legs, or both.

## Who is at risk of catching polio? ^

People who never received or completed the polio vaccine series are most at risk of contracting and getting sick from poliovirus. The risk of severe disease and death after poliovirus infection in an unvaccinated person increases with increasing age.

## How does polio spread?

Poliovirus is very contagious and spreads through person-to-person contact. It spreads through contact with the stool (poop) of an infected person or droplets from a sneeze or cough. If you get stool or droplets from an infected person on your hands and you touch your mouth, you can get infected. Also, if your child puts objects, like toys, that have stool or droplets on them into their mouth, they can get infected.

An infected person may spread the virus to others immediately before and usually 1 to 2 weeks after developing symptoms. The virus may live in an infected person's intestines for many weeks. They can contaminate food and water when they touch it with unwashed hands.

---

## Could polio spread between countries?

Polio does not respect borders – anyone who is not fully vaccinated against polio is at risk. For every case of paralysis there can be between 200 (for poliovirus type 1) and 2,000 (for poliovirus type 2) children infected without symptoms, so it is hard to detect polio and to prevent the virus from travelling. Unvaccinated people living in areas where immunity levels are low are particularly vulnerable. The best way to protect yourself and your family from polio is through vaccination. Maintaining high vaccination coverage through routine childhood immunization program is critical to keep everyone in the United States safe from polio.

---

## Is there a cure for polio?

No, there is no cure for polio. Polio vaccine is the best way to protect against polio. Safe and effective vaccines exist: the oral polio vaccine (OPV) and the inactivated polio vaccine (IPV), the only vaccine used in the United States since 2000.

OPV is administered orally and can be given by volunteers. OPV protects both the individual and the community because it induced gut immunity, which is essential to stopping poliovirus transmission.

IPV is given by injection and needs to be administered by a trained health worker. IPV is extremely effective in protecting individuals from serious disease caused by poliovirus, but cannot stop the spread of virus in a community because it doesn't induce gut immunity and immunized people can shed the virus in their stool if infected.

---

## What will it take to eradicate polio?

To stop polio we need to:

- Rapidly detect and interrupt any new outbreaks
- Engage entire societies in the effort to reach every last child
- Make special plans to reach children from mobile and migrant populations, in conflict zones, or in remote regions
- Strengthen routine immunization, which is the best national defense against polio
- Ensure sensitive surveillance, especially in hard-to-reach places
- Encourage governments to reach out to the poorest people with other public services
- Continue to receive the highest level of political commitment from national governments and multilateral institutions
- Ensure the needed financial resources are in place to finish the job

Read more about the updated [GPEI Strategy](#)  [PDF - 6MB] 

---

## What if I had polio as a child, do I still need the vaccine?

To be fully protected against polio, CDC recommends that everyone receives the full series of polio vaccine, even if they had polio as a child. There are three types of polioviruses: type 1, type 2, and type 3. Having one type of polio does not protect you from infection with the other types.

Since 2000, the inactivated polio vaccine, or IPV, is the only polio vaccine given in the US and protects against all three types of poliovirus.

If you haven't been vaccinated against polio or received all recommended doses, talk to your healthcare provider about [getting vaccinated](#).

---

## What if I've been vaccinated against polio outside of the US?

If you or anyone in your family has received polio vaccination outside of the United States, then make sure it meets the U.S. recommendations and you have documentation that shows that the polio vaccine you have received protects you from all three polio types, which are type 1, type 2, and type 3.

The documentation should indicate that you have received the age-appropriate polio vaccination series with either inactivated polio vaccine, or IPV, or a trivalent oral polio vaccine, also called tOPV to be considered fully vaccinated against polio. IPV and tOPV are two kinds of vaccines that contain all three polio types. However, if you have only received a bivalent OPV or bOPV that contains only two types of polioviruses, then you will need to complete a vaccination series with IPV (the only polio vaccine used in the U.S.) with three or four doses, depending on the age of the person who needs to get vaccinated.

Only written, dated records are acceptable as evidence of previous vaccination. Anyone who does not have or only has questionable documentation of poliovirus vaccination should be revaccinated according to the U.S. schedule.

Talk with your healthcare provider as their recommendations for poliovirus vaccination for you will depend on how many polio vaccinations you have already received, which types of polio vaccine you have had, and the time available before protection is needed.

---

## Can I get a polio booster?

Adults who completed the polio vaccine series as children and are planning to travel to areas or countries with increased risk of polio or have a higher risk for exposure to polio can receive a lifetime booster dose of IPV.

Talk with your healthcare provider about getting one lifetime booster of IPV.

---

## Who is at higher risk for exposure to polio?

Anyone who is not fully vaccinated against polio is at risk for polio.

However, there are some situations that put people at increased risk for exposure to polio such as:

- Travelers who have recently visited polio endemic countries (Afghanistan and Pakistan) or countries experiencing polio outbreaks.
- Laboratory and healthcare workers who handle specimens that might contain polioviruses.
- Healthcare workers who are treating patients who could have polio or have close contact with a person who could be infected with poliovirus.
- People who are in contact with or caring for a person who could be infected with polio or has been exposed to polio.
- Unvaccinated adults whose children may be receiving oral poliovirus vaccine while living abroad

Talk with your healthcare provider to find out if you may need a booster shot. Their recommendations for poliovirus vaccination will depend on how many doses of polio vaccine you have already received and the time available before protection is needed.

Page last reviewed: August 24, 2022