Acute Flaccid Myelitis (AFM) in Children A Fact Sheet for Parents

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

Rare symptoms include numbness or tingling in the limbs and being unable to pass urine. A child may also have difficulty breathing due to muscle weakness that requires ventilator (a machine to help them breathe) support.

How is AFM diagnosed?

A doctor will 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.

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 determine whether each case is confirmed, probable, or not a case according to a specific case definition for this condition. 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 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.

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



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, and sometimes diarrhea, 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 is 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 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 infections by having him/her:

- wash hands often with soap and water,
- avoid touching his/her face with unwashed hands, and
- 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, and
- keeping sick children home.

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