

Data suggest viral etiology for pediatric acute flaccid myelitis

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(HealthDay)—Surveillance data for acute flaccid myelitis (AFM)

suggests a viral etiology, according to a study published online Oct. 7 in *Pediatrics*.

Tracy Ayers, Ph.D., from the U.S. Centers for Disease Control and Prevention in Atlanta, and colleagues characterized the disease burden of AFM and explored potential etiologies and epidemiologic associations using surveillance data. From Jan. 1, 2015, through Dec. 31, 2017, persons meeting the clinical case criteria of acute flaccid limb weakness were classified as having confirmed or probable AFM. Clinical, radiological, laboratory, and epidemiologic findings in [pediatric patients](#) with confirmed AFM are described.

The researchers found that 193 children had confirmed cases and 25 had probable cases of AFM. Among the confirmed cases, 61 percent of the patients were male with a median age of 6 years. Seventy-nine percent had an antecedent respiratory or febrile illness, with a median of five days before limb weakness. Coxsackievirus A16 was detected in the [cerebrospinal fluid](#) and serum of one case patient and enterovirus D68 was detected in the serum of a second patient among the 153 sterile-site specimens. Twenty-eight percent of 167 non-sterile-site specimens tested positive for enterovirus or rhinovirus.

"The clinical symptoms shortly before weakness onset in most patients and detection of pathogens in sterile and nonsterile sites suggest viruses play a key role in the pathogenesis of AFM," the authors write.

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