**Acute Flaccid Myelitis**

**Definition:**

Acute flaccid myelitis (AFM) is a condition that affects the nervous system, specifically the spinal cord, which can result from a variety of causes including viral infections.

**Symptoms:**

Most patients will have sudden onset of limb weakness and loss of muscle tone and reflexes. Some patients may also experience facial droop/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. In rare cases, a patient may have difficulty breathing due to muscle weakness and require urgent ventilator support.

**Causes of AFM:**

Acute flaccid myelitis is associated with a variety of pathogens, including several viruses such as enteroviruses (polio and non-polio), West Nile virus (WNV) and viruses in the same family as WNV, specifically Japanese encephalitis virus and Saint Louis encephalitis virus, and adenoviruses.

AFM is one of a number of conditions that can result in neurologic illness with limb weakness. Such illnesses can result from a variety of causes, including viral infections, environmental toxins, genetic disorders, and Guillain-Barre syndrome, a neurologic disorder caused by an abnormal immune response that attacks the body’s nerves. Oftentimes, however, despite extensive laboratory testing, providers are unable to identify a cause for AFM.

**Diagnosis:**

A diagnosis of AFM can only be made by clinician. AFM is diagnosed after an examination by a health care provider using a combination of clinical symptoms and special studies of the brain and spine.

**Role of the School Nurse:**

**Prevention**

* Maintaining accurate and up to date vaccine records for students and staff
* Recommending vaccines to student’s parents or staff members as needed
* Encouraging the use of mosquito repellent for students and staff when outdoors
* Recommending the removal of standing or stagnant water from school property to minimize the number of mosquitos
* Encouraging excellent hand hygiene practices within the school
* Encouraging sick students and staff to stay home
* Encouraging students and staff to avoid close contact with sick people
* Using a disinfectant cleaning product within the school

**Treatment Recommendations**

There is no specific treatment for AFM, but a neurologist may recommend certain interventions on a case-by-case basis. If a student or staff member is having problems walking or standing, or develops sudden weakness in an arm or leg, they should seek medical attention right away.

**Exclusions**

It is not recommended to exclude any cases of AFM from school or school related activities once they have been cleared to return by their health care provider. The school may have to make environmental or educational modifications for the child or staff member upon return based on their level of function.

There are no exclusion recommendations for contacts of AFM cases.

**Reporting Requirements**

Acute Flaccid Myelitis (AFM) is reportable within 48 hours on recognition or strong suspicion of disease.

**Resources:**

* Maine CDC AFM page [www.maine.gov/dhhs/afm](http://www.maine.gov/dhhs/afm)
* Federal CDC Acute Flaccid Myelitis information page <http://www.cdc.gov/acute-flaccid-myelitis/index.html>
* Federal CDC Acute Flaccid Myelitis ‘Frequently asked questions for healthcare professionals’ <http://www.cdc.gov/acute-flaccid-myelitis/hcp/faqs.html>
* Federal CDC AFM References and Resources <https://www.cdc.gov/acute-flaccid-myelitis/hcp/references-resources.html>