



Technical Bulletin

Division of Public and Behavioral Health



Date: September 11, 2014

Topic: Enterovirus D68 (EV-D68)

Contact: Julia Peek, Manager, Office of Public Health Informatics and Epidemiology

To: All Providers and Medical Facilities

Current Situation

Enterovirus D68 (EV-D68) is one of many non-polio enteroviruses. Enterovirus D68 (EV-D68) infections are thought to occur less commonly than infections with other enteroviruses. EV-D68 was first identified in California in 1962. Compared with other enteroviruses, EV-D68 has been rarely reported in the United States for the last 40 years.

In August 2014, hospital officials in Kansas City, MO and Chicago, IL notified the Centers for Disease Control and Prevention (CDC) of an increase in severe respiratory illness among children seen in the emergency rooms and admitted to the hospitals. Specimens were initially tested positive for rhinovirus and enterovirus. CDC did further testing and identified enterovirus D68 (EV-D68) in specimens from patients in both hospitals in Kansas City and Chicago. CDC is working closely with MO, IL and other state health departments as they continue to investigate suspected clusters of respiratory illness in other facilities.

Symptoms and Transmission

EV-D68 has been reported to cause mild to severe respiratory illness. However, the full spectrum of EV-D68 illness is not well-defined.

EV-D68 is not frequently identified, so it is less studied and the ways it spreads are not as well-understood as other enteroviruses. EV-D68 causes respiratory illness, and the virus can be found in respiratory secretions such as saliva, nasal mucus, or sputum. The virus likely spreads from person to person when an infected person coughs, sneezes, or touches surfaces.

Prevention

There are no vaccines for preventing EV-D68 infections. You can help protect yourself from respiratory illnesses by following these steps:

- Wash hands often with soap and water for 20 seconds, especially after changing diapers.
- Avoid touching eyes, nose and mouth with unwashed hands.
- Avoid kissing, hugging, and sharing cups or eating utensils with people who are sick.
- Disinfect frequently touched surfaces, such as toys and doorknobs, especially if someone is sick.

Treatment

There is no specific treatment for EV-D68 infections. Many infections will be mild and self-limited, requiring only treatment of the symptoms. Some people with severe respiratory illness caused by EV-D68 may need to be hospitalized and receive intensive supportive therapy. No antiviral medications are currently available for treating of EV-D68 infections.

Reporting/Guidelines for Health Care Professionals

Healthcare Professionals should:

- Be aware of EV-D68 as a potential cause of clusters of severe respiratory illness, particularly in young children.
- Consider laboratory testing of respiratory specimens for enteroviruses when the cause of infection in severely ill patients is unclear. State health departments or CDC can be approached for typing enterovirus.
- Report cases and clusters of severe respiratory illnesses to state and local health departments for further guidance.
- Contact your local health department to obtain information on laboratory testing for individual patients with severe respiratory illness and clusters of severe respiratory illness.

Please see the contact information below for the state and local health jurisdictions in Nevada to report unusual numbers of cases of respiratory illness or unusual severity of respiratory illness and to obtain laboratory testing information.

Las Vegas area: Southern Nevada Health District, 702.759.1300

Reno/Sparks area: Washoe County Health District, 775.328.2447

Carson City, Douglas, Lyon County area: Carson City Health and Human Services, 775.887.2190

Other counties: Rural Community Health Services, 775.687.5162 (business hours) or 775.434.4358 (after hours)

State of Nevada Epidemiology Duty Officer (24 hours): 775.400.0333



Tracey D. Green, MD
Chief Medical Officer

Richard Whitley, MS
Administrator