



Enterovirus D68 (EV-D68) Health and Monitoring Factsheet

October 9, 2014: Update

*From mid-August to October 9, 2014, CDC or state public health laboratories have confirmed a total of **678 people in 46 states** and the District of Columbia with respiratory illness caused by EV-D68. This indicates that at least one case has been detected in each state identified, but does not indicate how widespread infections are in each state.*

Definition

Enterovirus D68 (EV-D68) is one of more than 100 enteroviruses. The virus was first identified in California in 1962. Until now, it has only been tied to smaller clusters of disease around the U.S.

In general, a mix of enteroviruses circulates every year, and different types of enteroviruses can be common in different years. Small numbers of EV-D68 have been reported regularly to CDC since 1987. However, this year the number of people reported with confirmed EV-D68 infection is much greater than that reported in previous years.

Transmission

Since EV-D68 causes respiratory illness, the virus can be found in an infected person's respiratory secretions, such as saliva, nasal mucus, or sputum. EV-D68 likely spreads from person to person when an infected person coughs, sneezes, or touches a surface that is then touched by others.

In the United States, people are more likely to get infected with enteroviruses in the summer and fall. Cases are likely to decline later in the fall.

In general, infants, children, and teenagers are most likely to get infected with enteroviruses and become ill, primarily because they do not yet have immunity (protection) from previous exposures to these viruses.

Symptoms

EV-D68 can cause mild to severe respiratory illness:

- Mild symptoms may include fever, runny nose, sneezing, cough, and body and muscle aches.
- Severe symptoms may include wheezing and difficulty breathing.

Adults are more likely to have no symptoms or mild symptoms.

Children with asthma may have a higher risk for severe respiratory illness caused by EV-D68 infection.

Anyone with respiratory illness should contact their doctor if they are having difficulty breathing or if their symptoms are getting worse.

Diagnosis

EV-D68 can only be diagnosed by doing specific lab tests on specimens from a person's nose and throat.

Many hospitals and some doctor's offices can test ill patients to see if they have enterovirus infection. However, most cannot do specific testing to determine the type of enterovirus, like EV-D68. CDC and some state health departments can do this sort of testing.



CDC recommends that clinicians only consider EV-D68 testing for patients with severe respiratory illness and when the cause is unclear.

Treatment

There are no antiviral medications currently available for people who become infected with EV-D68.

There is no specific treatment for people with respiratory illness caused by EV-D68.

For mild respiratory illness, symptoms can be relieved by taking over-the-counter medications for pain and fever. Aspirin should not be given to children.

Some people with severe respiratory illness may need to be hospitalized.

Vaccination

There are no vaccines for preventing EV-D68 infections.

Prevention

Individuals can help prevent getting and spreading EV-D68 and other respiratory illnesses by following these steps:

- Wash hands often with soap and water for 20 seconds.
- Avoid touching eyes, nose and mouth with unwashed hands.
- Avoid close contact such as kissing, hugging, and sharing cups or eating utensils with people who are sick.
- Cover their coughs and sneezes with a tissue or shirt sleeve, not their hands.
- Clean and disinfect frequently touched surfaces, such as toys and doorknobs, especially if someone is sick.
- Stay home when sick.