According to the Centers for Disease Control and Prevention (CDC), congenital CMV (cytomegalovirus) is the most common viral cause of birth defects and developmental disabilities in the U.S. Each year, 30,000 children (1 in 200) are born with congenital CMV, resulting in 400 deaths and 6,000 children with permanent disabilities.

More children will have disabilities due to congenital CMV than other, well-known infections and syndromes, including Down Syndrome, Fetal Alcohol Syndrome, Spina Bifida, and Pediatric HIV/AIDS.

- Children born with congenital CMV may develop permanent medical conditions and disabilities, such as deafness, blindness, cerebral palsy, mental and physical disabilities, seizures, and death.
- CMV can cause symptoms when they are born or later in the baby’s life. In some infants, symptoms and problems can arise months or years after birth.

**TRANSMISSION**

Anyone can become infected with CMV. Most people don’t realize that they have been infected with CMV.

- One of the highest risk groups are pregnant women who have not yet contracted CMV prior to pregnancy, as they will possibly pass the virus to their developing child, causing potential birth defects.

CMV is very common in home and daycare settings. Healthy children 1 to 3 years of age are at high risk for contracting CMV from their peers.

- CMV is found in bodily fluids, including urine, saliva, blood, mucus, and tears.
- Mothers and women who work with infants and young children should be educated about the risks of CMV and the precautions they can take to prevent infection.

**Prevention**

Simple steps for pregnant women to prevent exposure to saliva and urine that might contain CMV:

- Wash your hands often with soap and water for 15-20 seconds, especially after changing diapers, feeding a young child, wiping a young child’s nose or drool, and handling children’s toys.
- Do not share food, drinks, or eating utensils with young children.
- Do not put a child’s pacifier in your mouth.
- Do not share a toothbrush with a young child.
- Avoid contact with saliva when kissing a child.
- Clean toys, countertops, and other surfaces that come into contact with children’s urine or saliva.

**TESTING AND DIAGNOSIS**

Congenital CMV infections are more common than the combined metabolic or endocrine disorders currently in the US core newborn screening panel.

- Congenital CMV can be only diagnosed if the virus is found in an infant’s urine, saliva, blood, or other body tissues during the first three weeks of life.
- Children born with congenital CMV who go undiagnosed may go on to have developmental or medical problems later in life with no diagnosis of origin.

**TREATMENTS**

- CMV hyperimmune globulin (IVIG) – for pregnant women with primary CMV infection
- Ganciclovir and Valganciclovir – for newborns with symptomatic congenital CMV