

Date: March 5, 2014
To: Medical Care Providers
From: Julie Vaishampayan, MD, MPH
Assistant Health Officer

**Please distribute to all
providers and relevant medical
staff in your office.**

Health Advisory: Acute Flaccid Paralysis Cases in California

Since August 2012 the California Department of Public Health (CDPH) has been following several cases of unexplained acute flaccid paralysis throughout the state. To date, over 20 cases have been identified, primarily affecting younger age groups (median age 12 years). Initial diagnoses for these patients have included subacute or acute flaccid paralysis, transverse myelitis, hemiplegia, paraplegia, or acute quadriplegia. Magnetic resonance imaging (MRI) findings have indicated involvement of spinal cord grey matter. Clinical and imaging findings are similar to those seen in poliomyelitis. Patients have suffered from long-term disability with minimal improvement after diagnosis.

Several of the clinical and laboratory features of these cases are consistent with an infectious etiology. The CDPH Viral and Rickettsial Disease Laboratory (VRDL) has tested specimens from several patients for arboviruses, enteroviruses, parechoviruses, and herpesviruses; no single etiology has emerged. Testing has been hampered by incomplete specimens submitted for testing, collection of samples taken late after symptom onset, or serum drawn after administration of intravenous immunoglobulin (IVIG).

CDPH is requesting that patients meeting the following case definition be reported and specimens be submitted for testing. **Collection of specimens should be taken as early as possible after onset of symptoms, and before any IVIG is administered.**

CASE DEFINITION:

Patient (without prior neurologic illness) who presents with:

- Acute flaccid paralysis, including absent or significantly diminished reflexes in one or more limbs
- AND**
- EMG showing anterior horn cell disease **OR**
 - MRI showing grey matter involvement of the spinal cord
 - With or without accompanying mental status changes
 - Without a confirmed traumatic, neoplastic, or vascular etiology

Report the case to San Joaquin County Public Health Services (SJCPHS)

FAX: (209) 468-8222 Phone: (209) 468-3822

Confidential Morbidity Report: http://www.sjcphs.org/disease/disease_control_reporting.aspx

Specimen submission:

Call Public Health Services Laboratory at 209-468-3460 for more information.

- Cerebral Spinal Fluid - 2-3cc
- Acute serum (pre-IVIG administration) - 2-3cc in red or tiger top tube
- Nasopharyngeal/Throat swab in viral transport media
- Stool (quarter-sized amount in sterile wide-mouth container)

For more information call SJCPHS 468-3822.