



Cytomegalovirus (CMV) in the Child Care Setting

What is it?

CMV is a very common infection caused by a virus with which most people eventually become infected. Children and staff in the child care setting are especially likely to be infected.

What are the symptoms?

Children usually have no symptoms when they become infected with CMV. Occasionally, older children in child care will develop an illness with a fever, sore throat, swollen glands (lymph nodes) in the neck, enlarged liver, rash and fatigue. However these symptoms are very rare, especially in young children in child care.

CMV can be dangerous for people with immune problems, and pregnant women who can spread the illness to their unborn babies.

How is it spread?

CMV is spread from person to person by direct contact with bodily (body) fluids such as blood, urine or saliva. Thus it may be spread through close contact such as in diaper changing, kissing, feeding, bathing and other activities where a healthy person comes in contact with the urine or saliva of an infected person. CMV can also be passed from a mother to the child before birth, at birth and after birth (through breastfeeding).

When is it contagious?

Some people infected with CMV are contagious for a very short time; others can spread the virus for months to years.

Should the child stay home?

There is no reason to exclude the child from child care, because the program probably has other children who have CMV.

Is it a problem for pregnant woman?

If infected for the first time during pregnancy, women are at a small risk of delivering an infant with CMV disease, which can cause hearing loss, mental retardation and other birth defects.

Female child care providers who expect to become pregnant should:

- Be tested for antibodies to CMV. If the test shows no evidence of previous CMV infection, reduce contact with infected children by working, at least temporarily, with children age 2 years or older, among whom there is far less virus circulation.
- Carefully wash hands with water and soap after each diaper change and contact with children's saliva.
- Avoid contact with children's saliva by not kissing children on the lips and ask them not to place hands, fingers, toys and other saliva-contaminated (soiled) objects in their mouth.

Remember: Contact with children which does not involve exposure to saliva or urine poses no risk to a mother or child care provider and should not be avoided out of fear of potential infection with CMV.

How can you limit the spread?

- Follow Universal Precautions for the child care setting (see Health & Safety Note on "Universal Precautions in the Child Care Setting").
- Clean and disinfect all mouthed toys and frequently used surfaces on a daily basis.
- Don't kiss children on the mouth.
- Do not share food, pacifiers, bottles, toothbrushes, eating utensils or drinking cups.

Female staff who are pregnant or thinking about getting pregnant should discuss the issue with their health care provider.

References

- Red Book 2000: Report of the Committee on Infectious Disease*, American Academy of Pediatrics, 2000.
- The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers*, Centers for Disease Control and Prevention (CDC), 1997.
- Healthy Young Children: a Manual for Programs*, NAEYC, 1995 Edition.
- Caring for Our Children: National Health and Safety Performance Standards, Guidelines for Out-Of-Home Child Care Programs*, Washington DC, AAP & APHA, 1992.