Report Possible Cases of Acute Flaccid Myelitis to the NDDoH

The North Dakota Department of Health (NDDoH) encourages providers to be aware of acute flaccid myelitis (AFM) symptoms. Resources are provided in this Health Advisory to help with the identification and reporting of suspected AFM cases and specimen collection. Surveillance has shown that AFM cases generally peak in the months of September and October. In the last five years, the majority of cases were reported in 2014, 2016, and 2018, and smaller numbers reported in 2015 and 2017 throughout the United States. In 2018, one case was identified in North Dakota. So far in 2019, there have been 11 confirmed AFM cases from eight states.

AFM appears to start with a prodromal respiratory or gastrointestinal illness about one week before limb weakness onset. Pain in the neck or back often directly precedes weakness in one or more limbs, and cranial nerve findings such as slurred speech, difficulty swallowing, and eyelid or facial droop may occur. On exam, the weak limb(s) displays poor tone and diminished reflexes. Cerebrospinal fluid may show a lymphocytic pleocytosis and elevated protein. MRI findings in AFM cases include lesions in the central, or gray matter, of the spinal cord. Because AFM is a relatively new condition, information on all patients is needed to help us better understand the spectrum of illness, and all possible causes, risk factors, and outcomes for AFM.

Effective October 1, 2019, AFM become a reportable condition (North Dakota Administrative Code 33-06-01). The NDDoH is requesting that providers report suspect cases of AFM with an acute onset of flaccid weakness in one or more limbs, AND MRI showing spinal cord lesion in at least some of the gray matter and spanning one or more vertebral segments, excluding persons with gray matter lesions in the spinal cord resulting from physician diagnosed malignancy, vascular disease, or anatomic abnormalities. There is no age restriction for reporting suspected cases. The case definition includes people of all ages to allow for full spectrum information of the condition in both children and adults. For more information about the case definition for AFM, please see www.cdc.gov/acute-flaccid-myelitis/hcp/casedefinition.html.

Attached to this HAN is a Frequently Asked Questions (FAQs) about AFM and sample collection and shipping, and a clinician “job aid” to walk providers through the process of reporting a suspected AFM patient and sample collection, storage, and shipping. Call the NDDoH Division of Disease Control at 701.328.2378 with questions or email the CDC AFM team at AFMinfo@cdc.gov. To notify us of any patients who you are evaluating for acute onset of flaccid limb weakness, please call the Division of Disease Control at 701.328.2378.

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**Categories of Health Alert Network messages:**

**Health Alert** Requires immediate action or attention; highest level of importance

**Health Advisory** May not require immediate action; provides important information for a specific incident or situation

**Health Update** Unlikely to require immediate action; provides updated information regarding an incident or situation

**HAN Info Service** Does not require immediate action; provides general public health information

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##This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations##