MEMORANDUM

TO: Dr. Mary Ellis
   Superintendent, Union County Public Schools

FROM: Phillip Tarte, MHA
       Director, Union County Division of Public Health

DATE: September 30, 2014

SUBJECT: Enterovirus D68 (EV-D68)

Since our last correspondence, the North Carolina Division of Public Health received laboratory confirmation that EV-D68 was present in this state. We currently have no confirmation if we are a county with positive test results.

As before, this memo is intended to provide general information regarding EV-D68 and recommendations to prevent its spread in the Union County Public Schools.

Enteroviruses are very common viruses. There are more than 100 types of enteroviruses. They cause about 10 to 15 million infections in the United States each year.

Anyone can get infected with enteroviruses but infants, children, and teenagers are more likely to get infected and become seriously ill because they do not yet have immunity from previous exposures to the viruses. Most non polio enterovirus infections in the United States occur seasonally during the summer and fall, and outbreaks often occur in several-year cycles.

There is no specific treatment or vaccine for non-polio enterovirus infection yet most people only need symptom treatment. They usually recover completely. However, some illnesses caused by non-polio enteroviruses can be severe enough to require hospitalization.
Symptoms of mild illness may include:

- fever
- runny nose, sneezing, cough
- skin rash
- mouth blisters
- body and muscle aches
- difficulty breathing
- wheezing

Some non-polio enterovirus infections can cause:

- viral conjunctivitis,
- hand, foot, and mouth disease,
- viral meningitis (infection of the covering of the spinal cord and/or brain).

Less commonly, a person may develop:

- myocarditis (infection of the heart)
- pericarditis (infection of the sac around the heart)
- encephalitis (infection of the brain)
- paralysis

Non-polio enteroviruses can be found in an infected person's

- feces (stool),
- eyes, nose, and mouth secretions (such as saliva, nasal mucus, or sputum), or
- blister fluid.

Exposure usually comes from touching the eyes, nose, or mouth before washing hands after someone

- had close contact, such as touching or shaking hands, with an infected person,
- touched objects or surfaces that had the virus on them,
- changed diapers of an infected person, or
- drank water that had the virus in it.

Non-polio enterovirus can be shed (passed from a person's body into the environment) from stool for several weeks or longer after someone has been infected. The virus can be shed from the respiratory tract for 1 to 3 weeks or less. Infected people can shed the virus even if they don't have symptoms.

Since many infected people do not have symptoms, it is difficult to prevent non-polio enteroviruses from spreading particularly in a communal setting such as classroom.
To reduce the risk of infection, individuals should

- wash hands often with soap and water for 20 seconds;
- avoid touching eyes, nose, and mouth with unwashed hands;
- avoid kissing, hugging, and sharing cups or eating utensils with people who are sick;
- disinfect frequently touched surfaces, such as toys and doorknobs, especially if someone is sick; and
- and stay home when feeling sick, and obtain consultation from your health care provider.

Additional information is available at http://www.cdc.gov/non-polio-enterovirus/about/EV-D68.html. This is an evolving situation and recommendations may change as new information becomes available. Public Health will continue to monitor the situation.