

Talking with Pregnant Patients about CMV: A Resource for Healthcare Providers

Most babies with congenital cytomegalovirus (CMV) infection do not have long-term health problems. However, for some babies, CMV infection can cause birth defects or other health problems.

A pregnant woman infected with CMV can pass it to her baby at any time during pregnancy

A woman can pass CMV to her baby when she has a first-time infection during pregnancy or when she gets re-infected or a previous CMV infection becomes active again.

Most babies born with a CMV infection will be healthy

About 4 out of 5 babies born with CMV infection will not have health problems. However, about 1 out of 5 (20%) babies with CMV infection at birth have long-term health problems. That means of the 20,000 or so babies born with CMV infection each year, most will never have health problems. About 4,000 babies will have long-term health problems.



Pregnant women are not routinely tested for CMV in the United States

It is not recommended that obstetricians routinely test pregnant women for CMV infection. This is because laboratory tests used to diagnose a first-time infection are not reliable. These tests can be difficult to interpret and may not help a mother understand her or her child's risk of CMV infection.

Contact with young children's saliva and urine is a common way CMV is passed to adults

CMV is common in children and can be found in especially high amounts in young children's saliva and urine. Avoiding contact with saliva and urine from young children might reduce the risk of CMV infection, although research studies don't provide a clear answer. Some examples of how to avoid contact include kissing children on the cheek or head rather than the lips and washing hands after changing diapers. These cannot eliminate a woman's risk of catching CMV, but may lessen her chances of getting it. Reducing contact with saliva and urine will not prevent a previous CMV infection from becoming active again.

Child care workers have a higher risk of CMV infection because they work closely with many young children and should be counseled about CMV and its risks.

Babies with signs of CMV infection at birth are more likely to suffer long-term health problems

About 1 in 10 (10%) babies with CMV infection at birth will have noticeable signs, such as a small head, jaundice, or an enlarged liver or spleen. These babies may also have long-term health problems such as hearing loss, developmental delay, and vision loss.

Babies with signs of CMV infection at birth who are diagnosed and treated early may have better health outcomes

Because the signs of CMV infection at birth are similar to other medical conditions, the diagnosis must be confirmed by laboratory testing within two to three weeks after birth. Babies who are diagnosed with CMV infection and have signs can be treated with medications called antivirals, which may improve hearing and developmental outcomes.



Babies with no signs of CMV infection at birth may still have hearing loss

About 1 in 7 (15%) babies born with CMV infection may develop hearing loss, from birth up to age 5 years, even though they have no noticeable signs at birth. Treatment with antivirals for these babies is not currently recommended, but is being evaluated to assess safety and possible benefit. Early detection and interventions such as hearing aids and speech therapy can help their development. These babies do not appear to have other long-term health problems.

Additional CMV Resources

AAP Redbook: Cytomegalovirus Infection:

<https://redbook.solutions.aap.org/chapter.aspx?sectionid=88187134&bookid=1484>

CDC Website: Babies Born with CMV

<https://www.cdc.gov/cmvcongenitalinfection.html>