Acute Flaccid Myelitis Task Force Update

Co-Chairs: Ruth Lynfield and Tina Tan

Board of Scientific Counselors, Deputy Director for Infectious

Diseases,

December 5, 2019

AFM Task Force - Terms of Reference

Present findings, observations, and outcomes to CDC Board of Scientific Counselors (BSC) for the Deputy Director for Infectious Diseases for discussion, deliberation, and decision

- Etiologies and pathogenesis
 - Evaluate current understanding and the pathogenic mechanisms of AFM
 - Review available data and develop hypotheses about possible or likely etiologies and the pathogenesis of AFM
 - Propose new studies, study designs, laboratory techniques, assays, and other activities to address specific hypotheses on AFM etiologies and pathogenesis
 - Develop and prioritize findings and observations for the BSC to utilize in the development of recommendations for areas of further study or investigation

Clinical treatment

- Build on existing information on clinical practices by seeking information on clinical experience with the treatment of AFM
- Identify research gaps in the diagnosis and treatment of AFM
- Develop potential findings and observations on patient management

BSC Members

- Emily Erbelding, National Institutes of Health
 Div. of Microbiology & Infectious Diseases (Ex Officio)
- Ruth Lynfield, Minnesota Dept. of Health
- <u>Tina Tan</u>, Ann & Robert H. Lurie Children's Hospital of Chicago

• AFM Clinical and Research Experts

- <u>Leslie Benson</u>, Boston Children's Hospital, Dept. of Neurology
- Benjamin Greenberg, University of Texas Southwestern
 Medical Center, Dept. of Neurology and
 Neurotherapeutics
- Bryan Grenfell, Princeton University, Ecology and Evolutionary Biology and Public Affairs, Woodrow Wilson School
- <u>Tory Johnson</u>, Johns Hopkins University School of Medicine, Dept. of Neurology
- Bonnie Maldonado, Stanford University School of Medicine, Depts. of Pediatrics and Health Research and Policy
- Kevin Messacar, University of Colorado School of Medicine
 Dept. of Pediatrics

- John Modlin, Bill & Melinda Gates Foundation, Polio Research and Policy
- Avi Nath, National Institutes of Health, National Institute of Neurological Disorders and Stroke
- <u>Carlos Pardo-Villamizar</u>, Johns Hopkins University School of Medicine, Dept. of Neurology, Johns Hopkins Transverse Myelitis Center
- Cristina Sadowsky
 Kennedy Krieger Institute
 International Center for Spinal Cord
- Matthew Schniederjan, Emory University School of Medicine, Dept. of Pathology
- Nate Smith, Arkansas Dept. of Health
- <u>Jill Taylor</u>, New York State Dept. of Health, Wadsworth Laboratory
- Ken Tyler, University of Colorado School of Medicine Chair, Dept. of Neurology
- Arun Venkatesan, Johns Hopkins University School of Medicine, Div. and Physical Medic of Neuroimmunology and Neuroinfectious Diseases

AFM Task Force – Activities Since May 2019 BSC Meeting

- May, June, September, October 2019: conference calls
 - Discussion of outcome measures
 - Updated CSTE case definition
 - CDC communications including AFM Vital Signs
 - Lab updates
 - Epidemiology Updates
 - Update on the NIH natural history study
 - Transverse Myelitis Association/Siegel Rare Neuroimmune Association
- November 2019: in-person meeting
 - Reviewed CDC preparedness activities for 2020 season
 - Reviewed ongoing research projects and other activities
 - Prioritized research questions

AFM Task Force – Main Categories for Action and Research

- Communication and education
- Surveillance
- Diagnostic tool development
- Pathogenesis
- Risk factors studies
- Therapeutics and vaccines
- Treatment and rehabilitation

AFM Task Force – High Priority Activities by Category

Category	Priority Activities
Communication & education	 Strengthen communication and education efforts targeting health care providers, parents, and general public
Surveillance	 Identify cases and investigate temporal and geographic correlations of AFM cases with circulating viruses through the use of strong, integrated surveillance systems Better characterize the molecular epidemiology of EV-D68 by collecting strains from AFM and non-AFM patients and conducting whole genome sequencing Measure national seroepidemiology of EV-D68 Integrate viral surveillance and serology with computational models to analyze and predict EV-D68 epidemiologic dynamics and relationships to AFM epidemiology*

^{*}Activities may be done by partners

AFM Task Force – High Priority Activities by Category (cont.)

Category	Priority Activities
Risk factor studies	 Identify risk factors through the epidemiologic and natural history studies Identify genetic determinants of risk
Diagnostic tool development	 Develop immunologic assays(e.g., EV-D68 IgM) in CSF or serum for rapid diagnostics Characterize exposure to infectious agents in sera and CSF using novel diagnostic platforms such as peptide arrays
Pathogenesis	 Determine viral molecular determinants of neurotropism, cell death, paralytic potential, and unique receptors used by EV-D68 strains* Characterize viral pathogenesis using animal models Identify other humoral factors (e.g., decreased mucosal IgA antibodies) associated with increased risk of AFM

^{*}Activities may be done by partners

AFM Task Force – High Priority Activities by Category (cont.)

Category	
Therapeutics & vaccines*	 Initiate early stage EV-D68 vaccine development Screen FDA-approved panels for potential antiviral activity Develop EV-D68 therapeutic monoclonal antibodies
Treatment & rehabilitation	 Standardize outcome measures (strength, QoL, community participation) Evaluate long term outcomes of AFM patients Long term follow-up of AFM patients

^{*}Activities may be done by partners

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- Steve Oberste
- Mark Pallansch
- William Weldon
- Jennifer Anstadt
- Allan Nix
- Nancy Messonnier

Questions for BSC

- Preparedness
 - Any other considerations for CDC's response plan?
 - Does BSC endorse the response plan?
- Research agenda
 - Additional suggestions to make the CDC research agenda more robust?
- Priorities
 - Any other high priority areas for consideration?
- Other recommendations?