Kiss young children on the forehead, not on or near the mouth.

Don’t put anything in your mouth that has recently been in a child’s mouth.

Wash hands frequently with soap and water.

If you have further questions about CMV we encourage you to talk with your PREP study coordinator or visit:
www.uab.edu/CMVStudy

Have You Heard of CMV?
Did you know you could give CMV to your baby?

Important information for women who are pregnant or considering becoming pregnant.

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Portions of this brochure were adapted with permission from What Women Should Know about Cytomegalovirus, published by the Centers for Disease Control and Prevention.
**Cytomegalovirus (CMV)** is a common virus. In healthy children and adults, this virus usually causes no symptoms and poses no threat to their health. CMV can be a concern for pregnant women because it can lead to health problems when unborn babies are infected.

A woman with a CMV infection can pass on the virus to her unborn child. When this happens it is known as a **congenital CMV infection**.

CMV is the most common infection passed from mother to unborn child in the United States. One out of every 150 babies born will have a CMV infection. **In the United States this adds up to about 30,000 children with a congenital CMV infection every year.**

The majority of these children will have no signs at birth and will never have any problems due to CMV infection. Still, about 1 out of 10 children with congenital CMV infection will have signs of infection at birth and of those without initial signs of infection another 10% will later develop problems as a result of their CMV infection. The most common problem is hearing loss.

**Congenital CMV infection is the second leading cause of hearing loss in young children.** This hearing loss can be mild or severe and it may begin right after birth or later in childhood. Other problems may occur, such as developmental delays or vision problems, but these problems are much less common.

**How do you find out a baby has congenital CMV infection?**

Congenital CMV infection is diagnosed by taking a sample of saliva, urine or blood from the baby during the first 3 weeks of life to check for the virus. After the first 3 weeks a diagnosis of congenital CMV infection cannot be made because a sample taken at that time could also show an acquired infection (CMV that was passed on to the baby during delivery or after delivery).

**How is CMV spread?**

CMV is spread from one person to another only when there is contact with fluids from the body such as saliva or urine. CMV is not in the air and cannot be caught by just being in the room with an infected person. The chance of catching CMV through casual contact is very small.

**What you need to know to protect your unborn baby...**

There is no action that can totally remove your chance of catching CMV; however, there are steps you can take to greatly reduce your risk.

You should avoid contact with the saliva and urine of young children. Here are a few simple steps you can take:

- Do not kiss a young child on or near the mouth. Instead, kiss them on the forehead or the top of the head.
- Do not put anything in your mouth that has recently been in a child’s mouth. Such as:
  - Food
  - Silverware
  - Cups or bottles
  - Toothbrush
  - Pacifier
- Wash hands frequently with soap and water, especially after:
  - Wiping a child’s face
  - Feeding a child
  - Changing diapers

If you do not have soap and water, use an alcohol based hand sanitizer.