



New Jersey Department of Health

Enterovirus-D68 (EV-D68) Talking Points for Schools/Childcare

September 16, 2014

What are enteroviruses?

Enteroviruses are common viruses; there are more than 100 types. It is estimated that 10-15 million enterovirus infections occur in the US each year. Most people infected with enteroviruses have no symptoms or only mild symptoms, but some infections can be serious. People are more likely to get infected with enterovirus infections in the summer and fall.

What is Enterovirus-D68 (EV-D68)?

Enterovirus-D68 (EV-D68) is a type of enterovirus first detected in 1962 in California. EV-D68 is thought to occur less often than other types of enteroviruses.

What are symptoms of EV-D68 infection?

Symptoms may range from mild to severe. Mild symptoms may include runny nose, sneezing, cough, body and muscle aches and sometimes fever. Severe symptoms include difficulty breathing, wheezing and worsening of asthma. Hospitalization in an intensive care unit may be required.

How is EV-D68 infection spread?

EV-D68 is spread through close contact with infected people. The virus likely spreads from person to person when an infected person coughs or sneezes. You can also become infected by touching objects or surface that have the virus on them and then touching your mouth, nose or eyes. Enteroviruses are also present in poop (stool) and can be passed on to others when a person touches poop and does not wash their hands.

Who is at risk for EV-D68?

Infants, children and teenagers are most likely to get infected with enteroviruses and become sick. This is most likely because they do not have protection (immunity) or previous exposure to this virus. Children with asthma seem to have a higher risk for severe respiratory illness. Infants and people with weakened immune systems have a greater chance of complications. Adults can get infected with enteroviruses and are more likely to have no symptoms or mild symptoms.

How is EV-D68 treated?

There is no specific antiviral medication for EV-D68 infections. Mild infections require only treatment of symptoms. Aspirin should not be given to children. Those with severe respiratory illness may need to be hospitalized and receive intensive care.

How can I protect myself from becoming infected with EV-D68?

There is no vaccine to prevent EV-D68 infections. However, you can protect yourself from EV-D68 and other enterovirus infections if you:

- Wash hands often with soap and water for 20 seconds, especially after changing diapers
 - Enteroviruses is in poop (stool). Good hand hygiene is important for anyone who comes into contact with poop.
 - Hand sanitizer is not effective against enteroviruses
- Avoid touching eyes, nose and mouth with unwashed hands
- Use good respiratory hygiene; coughing and sneezing into a tissue or elbow and properly disposing of tissues. For more information about respiratory hygiene see the CDC website at <http://www.cdc.gov/flu/protect/covercough.htm>
- Avoid kissing, hugging and sharing cups or eating utensils with people who are sick
- Clean and disinfect frequently touched surfaces, such as toys and doorknobs, especially if someone is sick.
 - Routine disinfection procedures are effective for enteroviruses. For more information on cleaning and disinfecting see the NJDOH “General Guidelines for the Control of Outbreaks in Schools and Daycare Settings” (control measure section) at <http://www.nj.gov/health/cd/outbreaks.shtml>
- Stay home when feeling sick and consult your health care provider
 - Since people with asthma are at higher risk for respiratory illnesses, they should take their medicine as directed by their health care provider
- Stay up to date with immunizations, especially influenza

What should parents of children with asthma know about EV-D68?

It is important that asthma is well-treated and controlled. Children with asthma should follow their asthma treatment plan. Healthcare providers should be consulted in the development of asthma treatment plans.

For more information about asthma treatment plans, see the Pediatric/Adult Asthma Coalition of NJ website at www.pacnj.org. As per New Jersey Administrative Code NJAC 6A:16, all children with asthma, must have a treatment plan.

If a child is diagnosed with enterovirus or EV-D68, should they be excluded from school/daycare?

Children without a fever should be excluded until symptom free. Children with a fever (oral temperature of >100°F) must stay home until they are fever free for 24 hours without fever-reducing medication and symptom free.

For school exclusion guidance, go to: <http://www.nj.gov/health/cd/outbreaks.shtml>

If a child is hospitalized with enterovirus or EV-D68, when can they return to school/daycare?

Children without a fever should be excluded until symptom free. Children with a fever (oral temperature of >100°F) must stay home until they are fever free for 24 hours without fever-reducing medication and symptom free.