CMV: New Utah Law Requires Targeted Testing

By Paul Bufano

After two-year-old Daisy Doutre developed profound bilateral hearing loss from a common herpes virus she had at birth, her grandmother, Utah Rep. Ronda Rudd Menlove, R-Garland, took steps to raise public awareness of one of the leading causes of hearing loss in children.

Rep. Menlove successfully sponsored House Bill 81, leading to the July launch of a cytomegalovirus (CMV) education and prevention initiative in Utah—the first of its kind in the country.

The new law requires the Utah Department of Health (UDOH) to educate pregnant women and women who may become pregnant about the health complications of CMV and how to prevent the virus. It also requires medical practitioners to test newborns for congenital CMV before they’re 21 days old if they fail two hearing tests.

This public health movement is very important because it deals with a virus that can easily be avoided with good hygiene, said Stephanie McVicar, AuD, director of UDOH Early Hearing Detection and Intervention.

“The education component is carried out in two ways: through an active conversation with patients and through the distribution of informative flyers. “Our department assembled a committee of experts to produce a set of evidence-based facts on CMV. It includes topics like risks and prevention, and tells mothers to wash their hands after changing diapers and feeding.

Governor Gary R. Herbert signed into law House Bill 81, which requires the Utah Department of Health to educate women about cytomegalovirus and medical professionals to test newborns for congenital CMV before they’re 21 days old if they fail two hearing tests.

“The other part involves doctors and nurses talking to their patients about CMV because many of them have never heard of it before.”

Most children and adults with strong immune systems don’t show any signs or symptoms after being infected with CMV. Serious health complications, however, such as hearing loss and developmental disabilities can arise if an infected pregnant woman transmits the virus to her unborn baby.

Of the 30,000 babies born with congenital cytomegalovirus in the United States every year, about 5,000 develop permanent problems because of it, according to the Centers for Disease Control and Prevention (CDC).

“While the screening process is a step in the right direction, about half of the babies infected with CMV will pass the hearing tests and initially go undiagnosed because of its frequent late onset,” Dr. McVicar said.

Even though the campaign won’t identify every newborn with congenital CMV, it will make a difference in the fight against a leading cause of hearing loss, said Karen Fowler, DrPH, of the University of Alabama at Birmingham.

“There are certainly some precautionary steps we can take like conducting additional hearing screenings throughout a child’s adolescence to make sure nothing has changed,” she said.

“While there is still no vaccine for CMV today, there is an increased awareness, and maybe someday soon we
will have the answer. It will be a challenge, and we will need political support, more parental awareness, and more scientific research.”

While studies testing the use of antiviral treatments to slow or halt the progression of CMV-related hearing loss in newborns are ongoing, there currently is no cure for the condition.

Another major obstacle to mandatory screening for congenital CMV is the cost, which could reach $400 million every year, Dr. McVicar said.

“The poor sensitivity of dried blood spot testing for the detection of CMV in newborns does not make it a good mass screening tool,” she added. “Conversely, saliva samples tested using a PCR [polymerase chain reaction] assay are very sensitive.

“I’m still very hopeful that our efforts are going to inspire people around the country to take action because, plain and simple, this is a virus that nobody has heard of, but it wreaks havoc every day.”