

# THIS IS AN OFFICIAL NH DHHS HEALTH ALERT

Distributed by the NH Health Alert Network  
[Health.Alert@nh.gov](mailto:Health.Alert@nh.gov)  
September 9, 2014, 2100 EDT (9:00 PM EDT)  
NH-HAN 20140909



## Cluster of Enterovirus-D68 Respiratory Illness in Multiple States

### NH Division of Public Health Services (NH DPHS) recommends the following:

1. Awareness of reported clusters of patients with severe respiratory illnesses in the Mid-West United States with many patients requiring intensive care support; the predominant pathogen identified is Enterovirus-D68.
2. Understanding that these cases have occurred primarily in children and young adolescents, the majority with an underlying history of asthma or wheezing.
3. Recognition that there are no confirmed clusters of Enterovirus respiratory infections in pediatric nor adult patients in New Hampshire to date.
4. Consider laboratory testing for Enterovirus if you care for a patient that is severely ill with an unknown respiratory illness, or if you are aware of a cluster of respiratory illnesses with unknown etiology.
5. Report cases of severe respiratory illness or clusters of respiratory infections with an unknown etiology to the NH DPHS at 603-271-4496.
6. Awareness that further information and guidance (HAN) will be forthcoming from the Centers for Disease Control and Prevention.

In August 2014, the Centers for Disease Control and Prevention (CDC) initiated an investigation in Kansas City, MO and Chicago, IL, after reports of an increase in severe respiratory illness in children aged 16 years or younger, with many requiring intensive care support. The majority of patients had a history of wheezing or asthma. Initial testing revealed an increase in specimens positive for Rhinovirus/Enterovirus, and testing at the CDC identified Enterovirus-D68 in the majority of specimens submitted. Investigations in other states for clusters of respiratory illnesses are ongoing with additional information forthcoming from the CDC. Further information on the initial investigation by the CDC can be found at: [http://www.cdc.gov/mmwr/preview/mmwrhtml/mm63e0908a1.htm?s\\_cid=mm63e0908a1\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm63e0908a1.htm?s_cid=mm63e0908a1_e)

Enteroviruses are non-enveloped viruses and are a common cause of seasonal infection usually in the summer and fall months. The majority of infections occur in children younger than 15 years of age. There are over 100 types of Enteroviruses, and Enterovirus-D68 was first identified in California 1962. Enterovirus-D68 is less commonly isolated or reported and the full spectrum of disease is not known. Usually Enteroviruses cause mild febrile or upper respiratory tract illnesses. Symptoms can include fever, cough, sneezing, rhinorrhea, myalgias, and rash, but less commonly Enteroviruses can also cause central nervous system infection including meningitis and encephalitis. In the reported clusters of Enterovirus-D68 respiratory infection in Illinois and Missouri, the majority of patients have NOT had a fever.

Enteroviruses can be shed in respiratory secretions and the main mode of transmission of Enterovirus-D68 is felt to be from person-to-person via respiratory secretions including saliva, mucus, and sputum. Prevention of transmission should focus on good hygiene including hand washing, avoiding contact of respiratory secretions with a person who is ill, and decontamination of environmental surfaces. For hospitalized patients, standard, contact, and droplet precautions should be used. Hand hygiene should be ideally performed with soap and water as Enteroviruses are resistant to alcohol-based hand rubs. There are no vaccines available for Enteroviruses, and treatment is supportive in nature.

Testing for Enteroviruses includes virus culture, fluorescent antibody (FA), respiratory virus panel (RVP) detection system and Real-time RT-PCR. If any of these methods are positive for Enterovirus, further molecular typing should be performed to look for the Enterovirus-D68 strain. The Public Health

**NH DHHS-DPHS**

NH-HAN Enterovirus-D68

---

Laboratories (PHL) offers virus culture and FA testing. If molecular testing for Enteroviruses is desired, the PHL can assist with the coordination and submission of specimens to CDC.

For any questions regarding the contents of this message, please contact NH DHHS, DPHS, Bureau of Infectious Disease Control at 603-271-4496 (after hours 1-800-852-3345 ext.5300).

To change your contact information in the NH Health Alert Network, contact Denise Krol at 603-271-4596 or email Denise.Krol@dhhs.state.nh.us

Status: Actual  
Message Type: Alert  
Severity: Moderate  
Sensitivity: Not Sensitive  
Message Identifier: NH-HAN 20140909 Enterovirus-D68  
Delivery Time: 12 hours  
Acknowledgement: No  
Distribution Method: Email, Fax  
Distributed to: Physicians, Physician Assistants, Practice Managers, Infection Control Practitioners, Infectious Disease Specialists, Community Health Centers, Hospital CEOs, Hospital Emergency Departments, Nurses, NHHA, Pharmacists, Laboratory Response Network, Manchester Health Department, Nashua Health Department, Public Health Network, DHHS Outbreak Team, DPHS Investigation Team, DPHS Management Team, Northeast State Epidemiologists  
From: Benjamin P. Chan, MD – State Epidemiologist  
Originating Agency: NH Department of Health and Human Services, Division of Public Health Services

**Attachments:** None

**Follow us on Twitter @NHIDWatch**