

**Information on the subject
of the**

Cytomegalovirus

and pregnancy

*Thank you very much for your
interest*

www.cmv-selbsthilfegruppe.de

*A flyer providing information
with regard to children
suffering from CMV is
available for download on my
website*

Additional links

Deutsches Grünes Kreuz e.V.

www.dgk.de

Initiative ICON

www.icon-cmv.de

Stop CMV

www.stopcmv.org

Sabine Leitner
CMV Support Group

Kruseweg 6
12279 Berlin
www.cmv-selbsthilfegruppe.de

**Sabine Leitner
CMV Support Group**

**Information
about
Cytomegaly
during
pregnancy**

**Run by parents
for parents**

**1st German CMV Support Group
based in Berlin**

Dear reader,

you have gathered lots of information on childbirth or you are already pregnant. In this context, you heard about the cytomegalovirus. This ensues questions with regard to diagnostic and possibly therapeutic action. The following information should help you better understand the facts.

CMV is a viral infection. The virus belongs to the group of the herpes viruses and is widely spread.

It is mostly transmitted through genital secretions, saliva, urine and blood. In healthy people, the infection usually passes unnoticed and without causing any problems. In people with a weakened immune system and especially in foetuses of mothers infected for the first time, there may be complications.

It is the most common viral infection causing damages in the child, even more common than rubella and toxoplasmosis. If the initial infection of the mother occurs during pregnancy, the following damages may, in some cases, result. The symptoms in infected newborns include hearing damages, changes in organs, including liver and spleen enlargement, changes in the brain, including calcifications and cysts, or even subepidermal purpuric spots, pneumonia or thrombocytopenia.

CMV is not part of the obligatory examinations during prenatal care, gynaecologists are not yet obligated to inform their patients about it. Every woman has the right to subject herself to a self-financed blood test (approx. 23 euros) that will give information about her own immune status before, during and after pregnancy.

The blood test determines CMV IgG and IgM. These laboratory test results describe the antibodies found in the body. Increasing CMV IgG and IgM levels are found during the initial infection. The correct diagnosis, i.e. whether it is the initial infection or an already existing, reactive infection, is reached on the basis of the ratio between the number of antibodies and cytomegalic cells found.

1. Your test was seronegative:

You have not yet acquired the virus in your life. It is advisable to now take the test every 4 to 6 weeks during pregnancy in order to make sure that you remain seronegative. Adhere to any prevailing hygiene rules in order to avoid infection. These are some examples: frequent washing of hands, particularly before meals / avoid infants' urine as well as recently used toys / do not share cutlery, glasses and plates with others / do not eat leftovers of others / have your partner tested / distance to people with severe colds / prohibition to work of pregnant women working with infants aged under 3 or handicapped children (including older children).

Please refer to your gynaecologist, your public health officer or responsible authority to enquire about the completeness of the above list.

2. Your test was seropositive:

1. You have already acquired the CMV virus some time ago.

This is the best protection for your child as you have a stable antibody system. Reinfections are rare, but it needs to be mentioned that there are individual cases of reinfections the course of which is similar to the initial infection.

2. You are having an initial infection. You did not have the virus before your pregnancy. This means the greatest risk for the unborn child. There is a greater number of infections than diseased children, but your pregnancy must now be monitored at close intervals. There are various continuative diagnostic procedures in order to find out whether the unborn child is infected. These include:

- Virus culture: Urine / amniotic liquor
- Polymerase chain reaction PCR: Blood / urine / amniotic liquor
- A cell culture and a sensitive PCR test for amniotic liquor analysis. After the 21st week of pregnancy, the test offers maximum safety for the diagnosis of an infantile CMV infection
- Ultrasound tests at close intervals.

A CMV hyperimmunglobulin therapy or an antiviral therapy of mother and/or foetus may be an option in the case of an infection. The CMV hyperimmunglobulin therapy includes a high concentration of CMV antibodies which, due to the passive immunisation of the mother, are transferred to the child in order to decrease the rate of infection. This prenatal procedure, however, has not yet been approved and is consequently allowed by health insurance companies only after personal consultation about the costs. Please discuss this matter with your gynaecologist.

With kindest regards, S. Leitner