CMV & Pregnancy

What you need to know

CMV is common

Congenital Cytomegalovirus, or CMV, is the most common viral infection, and the leading non-genetic cause of hearing loss, that infants are born with in the United States.

1 in 200 children are born with congenital CMV each year and 9% of women know about it.

This virus is common and typically presents with symptoms similar to the common cold. It can also be asymptomatic. Every pregnant woman is at risk of acquiring CMV. Pregnant women who already have young children, or who work with young children are at highest risk of catching CMV.

1 in 3 pregnant women who are infected will pass it on to their baby.

CMV is serious

CMV can have devastating effects on an unborn child. Not all babies show symptoms of CMV at birth. In fact, 90% of babies appear healthy at birth. The majority of children will not have long-term issues. However, health problems and disabilities caused by the virus can appear after 2 or more years after birth.

Talk to your provider

Ask about CMV testing during pregnancy and after birth.

Testing before and during pregnancy

IgG testing reveals past CMV exposure. IgM antibody testing reveals recent active infection. Wait until levels are undetected before trying to conceive to prevent transmission to baby.

Newborn screening at birth

CMV is not yet routinely screened at birth. Newborns can be screened for CMV through the standard blood spot test. Ask your provider to include this test in your baby's screening.

CMV is preventable

Prevention tips

- Wash your hands often, especially after contact with bodily fluids
- Don't share utensils, drinks or toothbrushes with children under the age of 6
- Avoid contact with saliva- kiss kids under the age of 6 on the forehead instead of lips or cheek

Treatment

Early detection and treatment are critically important and can prevent or lessen the severity of some effects on the newborn. Treatments and trials during pregnancy are available if a mother is identified with CMV infection for the first time that may reduce effects of the virus in the unborn baby. Treatments after birth include antiviral medications for 6 weeks to 6 months.

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