

# Raising awareness of cytomegalovirus

*Sharon Wood, who works for the charity CMV Action, discusses cytomegalovirus, a common but often unknown risk during pregnancy*

**C**oronavirus, the first global pandemic in 100 years, has monopolised the public's lives and thinking for over 2 years and everyone has become familiar with the health advice to regularly wash and sanitise their hands to help combat the spread of this disease. However, the charity CMV Action have long urged this simple practice to pregnant women and women planning a pregnancy in order to avoid another very common, but often unheard-of virus: cytomegalovirus or CMV.

Cytomegalovirus is a common virus that belongs to the herpes family and can infect people of all ages. Many people come into contact with cytomegalovirus during early childhood and it is thought that three of every five people in the UK have been infected (Tookey et al, 1992). As with other herpes viruses, the cytomegalovirus is 'persistent'. Once a person has been infected, it stays in their body for life.

Healthy babies, children and adults who acquire cytomegalovirus will have few symptoms and no long-term health consequences. However, if a pregnant woman catches cytomegalovirus for the first time and passes it on to her unborn baby via the placenta (known as congenital cytomegalovirus or cCMV), it can have devastating results (CMV Action, 2022).

Other people who may be at increased risk of significant illness from cytomegalovirus include those with low immunity, for example, people who are on chemotherapy, or who have had a transplant or are living with human immunodeficiency virus infection (Emery, 2001).

Cytomegalovirus is transmitted via bodily fluids such as urine, saliva, blood,



**The charity CMV Action has recently produced new resources to provide guidance on antenatal and postnatal cytomegalovirus infection**

mucus and tears. Pregnant women most commonly acquire a cytomegalovirus infection through exposure to the saliva and urine of young children, especially their own (Cannon and Davis, 2005). If a pregnant woman has had a previous cytomegalovirus infection, it can become reactivated through this exposure (Centers for Disease Control and Prevention, 2020).

The majority of babies born with congenital cytomegalovirus will not have any symptoms at birth and will not suffer any long-term problems. However, it is estimated that 2–3 babies are affected by the cytomegalovirus every day in the UK, almost 1000 babies a year (NHS, 2020). Cytomegalovirus is the most common infection passed from mother to baby before birth (Dollard et al, 2007; Kenneson and Cannon, 2007; Townsend et al, 2011); it can cause miscarriages, stillbirths, disabilities and physical impairments, behavioural and learning difficulties and it is the leading

cause of non-genetic hearing loss (Dollard et al, 2007; Kenneson and Cannon, 2007; Townsend et al, 2011). However, pregnant women in the UK currently receive no counselling about cytomegalovirus and how to reduce their risk of infection.

CMV Action is a registered UK charity, run by parents affected by cytomegalovirus and by professionals with an interest in the virus. Therefore, the charity is uniquely placed to support families affected by cytomegalovirus and to speak about the impact that this virus has. Formed as a support group in 1980 by two parents who were unable to find information and assistance after the diagnosis of their daughter, CMV Action has since developed into the organisation it is today.

The charity has two main aims: to support families faced with a diagnosis or living with cytomegalovirus and to raise awareness among the general public and maternal health professionals who are seen

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CMV Action

as being ideally placed to give advice to pregnant women about the risks of infection.

### Knowledge and attitudes among healthcare professionals

In 2016, CMV Action gathered information from antenatal healthcare professionals about their knowledge of cytomegalovirus and its risk factors, and attitudes towards prevention (Wood, 2017). They explored the knowledge and concerns of three groups of professionals: midwives, GPs and specialists in obstetrics, gynaecology and fetal medicine. Prior knowledge of cytomegalovirus was compared with that of Down's syndrome, rubella, toxoplasmosis and listeriosis, and their knowledge of prevention measures was explored. After being provided with basic information on cytomegalovirus transmission, impact and risk reduction, they were asked about their attitudes towards cytomegalovirus prevention and their views on barriers and enablers to cytomegalovirus risk reduction.

All midwives responding to the survey believed that pregnant women should be given advice about reducing their risk of cytomegalovirus infection, however, only 38% reported that they regularly counselled women (Wood, 2017). The charity believes bridging the knowledge gap for midwives could therefore increase the provision of advice and information about cytomegalovirus infection and prevention.

The main barrier midwives cited to the provision of information was lack of time. However, they also identified simple measures such as training and basic resources that could help increase knowledge and overcome barriers.

### New resources to raise awareness

CMV Action has recently launched a new-look website that is intended to offer a more

user-friendly and streamlined experience, making it easier for visitors, both healthcare professionals and members of the public alike, to navigate and find the information or resources they need (CMV Action, 2022).

The charity has also launched two new key booklets: CMV in pregnancy, a guide to antenatal infection and CMV in children and babies, a guide to postnatal infection.

The charity has developed a new resource to help midwives address the subject of cytomegalovirus with the women they care for, taking into account the identified barrier of the lack of discussion time. Key messages about cytomegalovirus are contained on a simple tear-off page that can be handed to pregnant women at their booking appointment and that carries a summary of the simple hygiene precautions that can reduce risk.

- Avoid sharing food, drinks, cutlery, dummies after they have been in children's mouths
- Wash hands when 'things get messy': after feeding, wiping faces, changing nappies or picking up mouthed toys. The virus is destroyed by soap and water
- Try to avoid kissing children on the mouth. Kiss on the forehead or give them a big hug instead.

Pregnant women are warned about the dangers of toxoplasmosis (from cat litter trays, which affects around 20 babies a year) and listeriosis (from unpasteurised foods, affecting around 30 babies a year), but not about cytomegalovirus, which affects more babies than both of these combined (NHS, 2018; Public Health England, 2021). CMV Action wants midwives to alert all women under their care as to the dangers of cytomegalovirus infection in the same way as they already advise about food and animal-borne infections. The charity hopes that these new resources will help to achieve the mission to limit the devastating impact

of cytomegalovirus for those currently affected and for future generations. **BJM**

*The new tear off pads, as well as the much wider range of resources, can be downloaded or ordered free of charge, by visiting <https://cmvaction.org.uk/resources/publications>*

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