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Acute Flaccid Myelitis (AFM) 2020 Case Definition | CDC  
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NOTE:  
A surveillance case definition is a set of uniform criteria used to define a disease for public health surveillance. Surveillance case definitions enable public health officials to classify and count cases consistently across reporting jurisdictions. Surveillance case definitions are not intended to be used by healthcare providers for making a clinical diagnosis or determining how to meet an individual patient’s health needs.  
CSTE Position Statement(s)  
19-ID-05  
Background  
Acute flaccid myelitis (AFM) is characterized by rapid onset of flaccid weakness in one or more limbs and distinct abnormalities of the spinal cord gray matter on magnetic resonance imaging (MRI). AFM is a subtype of acute flaccid paralysis (AFP), defined as acute onset of flaccid weakness absent features suggesting an upper motor neuron disorder. The term ‘AFP’ is a generalized ‘umbrella’ term, and includes multiple clinical entities including paralytic poliomyelitis, AFM, Guillain-Barré syndrome (GBS), acute transverse myelitis, toxic neuropathy, and muscle disorders.  
Clinical Criteria  
An illness with onset of acute flaccid\* weakness of one or more limbs  
Laboratory Criteria  
Confirmatory laboratory/imaging evidence:  
MRI showing spinal cord lesion with predominant gray matter involvement  
†  
and spanning one or more vertebral segments  
Excluding persons with gray matter lesions in the spinal cord resulting from physician diagnosed malignancy, vascular disease, or anatomic abnormalities  
Presumptive laboratory/imaging evidence:  
MRI showing spinal cord lesion where gray matter involvement is present but predominance cannot be determined  
Excluding persons with gray matter lesions in the spinal cord resulting from physician diagnosed malignancy, vascular disease, or anatomic abnormalities  
Case Classification  
Suspect  
Clinically compatible case,  
AND  
Available information is insufficient to classify case as probable or confirmed  
Probable  
Clinically compatible case with presumptive laboratory/imaging evidence,  
AND  
Absence of a clear alternative diagnosis attributable to a nationally notifiable condition  
Confirmed  
Clinically compatible case with confirmatory laboratory/imaging evidence,  
AND  
Absence of a clear alternative diagnosis attributable to a nationally notifiable condition  
Comments  
To provide consistency in case classification, review of case information and assignment of final case classification for all suspected AFM cases will be done by experts in national AFM surveillance. This is similar to the review required for final classification of paralytic polio cases (1).  
\* Low muscle tone, limp, hanging loosely, not spastic or contracted.  
†  
Terms in the spinal cord MRI report such as “affecting gray matter,” “affecting the anterior horn or anterior horn cells,” “affecting the central cord,” “anterior myelitis,” or “poliomyelitis” would all be consistent with this terminology.  
References  
CSTE. National Surveillance for Paralytic Poliomyelitis and Nonparalytic Poliovirus Infection (09-ID-53).  
CSTE. Revision to the Standardized Surveillance and Case Definition for Acute Flaccid Myelitis. https://cdn.ymaws.com/www.cste.org/resource/resmgr/2017PS/2017PSFinal/17-ID-01.pdf.  
CSTE. National Surveillance for Paralytic Poliomyelitis and Nonparalytic Poliovirus Infection. http://c.ymcdn.com/sites/www.cste.org/resource/resmgr/PS/09-ID-53.pdf.  
Related Case Definition(s)  
Acute Flaccid Myelitis (AFM) | 2022 Case Definition  
Acute Flaccid Myelitis (AFM) | 2020 Interim Case Definition, Approved October 9, 2020  
Acute Flaccid Myelitis (AFM) | 2018 Case Definition  
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NNDSS receives and shares case data from state, local, and territorial health departments to help public health monitor, control, and prevent serious diseases.  
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