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Poliovirus, Paralytic Poliomyelitis and Nonparalytic Poliovirus Infection 2024 Case Definition | CDC  
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National Notifiable Diseases Surveillance System (NNDSS)  
Explore Topics  
Search  
Search  
Clear Input  
For Everyone  
About About National Notifiable Diseases Surveillance System  
What is Case Surveillance?  
Case Surveillance Modernization  
Infectious Disease Tables  
Non-Infectious Disease Data  
Technical Resource Center  
Case Surveillance in Action  
Contact Us  
View all  
Related Topics:  
NDC Application  
View All  
search  
close search  
search  
National Notifiable Diseases Surveillance System (NNDSS)  
Menu  
Close  
search  
For Everyone  
About About National Notifiable Diseases Surveillance System  
What is Case Surveillance?  
Case Surveillance Modernization  
Infectious Disease Tables  
Non-Infectious Disease Data  
Technical Resource Center  
Case Surveillance in Action  
Contact Us  
View All  
Related Topics  
NDC Application  
View All  
National Notifiable Diseases Surveillance System (NNDSS)  
About About National Notifiable Diseases Surveillance System  
What is Case Surveillance?  
Case Surveillance Modernization  
Infectious Disease Tables  
Non-Infectious Disease Data  
Technical Resource Center  
Case Surveillance in Action  
Contact Us  
View All  
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Case Definitions  
Message Mapping Guides  
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Poliovirus, Paralytic Poliomyelitis and Nonparalytic Poliovirus Infection  
2024 Case Definition  
Poliovirus, Paralytic Poliomyelitis and Nonparalytic Poliovirus Infection  
2024 Case Definition  
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)  
23-ID-07  
Subtype(s)  
Poliovirus, Nonparalytic Poliovirus Infection  
Poliovirus, Paralytic Poliomyelitis  
Background  
Poliomyelitis is characterized by the acute onset of flaccid paralysis caused by one of the 3 types of polioviruses, whether wild-type or vaccine-associated. Paralysis is typically asymmetrical, often affecting the lower limbs. The majority of poliovirus infections are asymptomatic or subclinical, and fewer than 1% are paralytic. The onset of paralysis is rapid, and usually does not progress after 3 days. Transmission of poliovirus occurs primarily through the fecal-oral route.  
Surveillance for acute flaccid paralysis (AFP) has not been routinely conducted in the U.S. since polio was eradicated, but the appearance of a condition with a similar clinical presentation in 2014 led to the development of a standardized case definition for surveillance of acute flaccid myelitis (AFM), which is a subtype of AFP. 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). To date, all stool specimens from AFM patients tested at CDC have been negative for poliovirus except for the patient from New York in 2022, who initially came to the attention of public health as a suspect AFM patient. The previous definition for a confirmed paralytic poliomyelitis case does not include a laboratory component, thus AFM cases can technically be considered confirmed cases of paralytic poliomyelitis. Therefore, the case definitions for Paralytic Poliomyelitis and Nonparalytic Poliovirus Infection have been revised to help simplify reporting and clarify the difference between AFM and paralytic poliomyelitis.  
Clinical Criteria  
Acute onset of flaccid paralysis with decreased or absent tendon reflexes in the affected limbs, in the absence of a more likely alternative diagnosis.  
Laboratory Criteria  
Confirmatory Laboratory Evidence:  
Poliovirus detected by sequencing of the capsid region of the genome by the CDC Poliovirus Laboratory,  
OR  
Poliovirus detected in an appropriate clinical specimen (e.g., stool [preferred], cerebrospinal fluid, oropharyngeal secretions) using a properly validated assay^,  
AND  
specimen is not available for sequencing by the CDC Poliovirus Laboratory.  
Note: The categorical labels used here to stratify laboratory evidence are intended to support the standardization of case classifications for public health surveillance. The categorical labels should not be used to interpret the utility or validity of any laboratory test methodology.  
^ The Global Polio Laboratory Network (GPLN) provides guidelines on acceptance of results from labs that are not in GPLN; assays would have to be validated and approved by GPLN. CDC is part of GPLN.  
Criteria to Distinguish a New Case from an Existing Case  
Post-polio syndrome is a condition that can affect survivors of poliovirus infection decades after recovering from their initial infection. A person with post-polio syndrome should not be enumerated as a new case.  
Subtype(s) Case Definition  
Expand All  
Poliovirus, Nonparalytic Poliovirus Infection  
Case Classification  
Confirmed  
Meets confirmatory laboratory evidence.  
Poliovirus, Paralytic Poliomyelitis  
Case Classification  
Confirmed  
Meets clinical criteria  
AND  
confirmatory laboratory evidence.  
Back to Top  
Sources  
Print  
Share  
Facebook  
LinkedIn  
Twitter  
Syndicate  
Content Source:  
Case Definitions  
Message Mapping Guides  
Supporting Documents for Implementation  
Event Codes & Other Surveillance Resources  
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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.  
View All  
About About National Notifiable Diseases Surveillance System  
What is Case Surveillance?  
Case Surveillance Modernization  
Infectious Disease Tables  
Non-Infectious Disease Data  
Technical Resource Center  
Case Surveillance in Action  
Contact Us  
View All  
Sign up for Email Updates  
Contact CDC  
Organization  
Policies  
Web Policies  
Languages  
Languages  
Español  
Language Assistance  
Archive  
CDC Archive  
Public Health Publications  
Contact Us  
About CDC  
Organization  
Policies  
Web Policies  
Languages  
Languages  
Español  
Language Assistance  
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