**Congenital cytomegalovirus infection: Prevention is better than treatment**

To the Editor:

We fully agree with the editorial by Pass noting that congenital cytomegalovirus (CMV) infection is a serious disorder that does not receive the attention it deserves. To Pass’s valuable introduction, we would like to add a discussion on the possibilities for prevention. Not only does congenital CMV pose a serious health problem for affected infants, but children with congenital CMV also may be a source of infection for other children and those who care for them. Young infants attending daycare or kindergarten may infect other children by passing on the virus through saliva on toys or by kissing. Caregivers can become infected while changing diapers and caring for affected children, and can be unaware that they are shedding CMV virus. A pregnant caregiver may unwittingly transfer CMV to her unborn child, with the ensuing consequences.

At present there is no large-scale availability of vaccine, no screening or surveillance of pregnant women, nor screening of neonates for CMV. The only way to reduce the risk of infection is through good hygienic practice. Handwashing after diaper changes and avoiding contact with the child’s saliva (by kissing or sharing cutlery or cups) can reduce the risk. However, expectant mothers and other parents usually are not aware of these risks. Public health campaigns or information packets for pregnant mothers usually do not cover these topics.

Healthcare workers, including doctors, midwives and nurses, should be able to explain the risks to women who wish to become or are already pregnant. These workers should have adequate knowledge concerning the mode of transmission, postnatal and long-term consequences, and local prevalence of congenital CMV.

In a recent survey in The Netherlands, we found that doctors involved in maternal and child care had insufficient knowledge of congenital CMV infection. While exploring screening and treatment options, the focus should be on educational and preventive activities with the aim of reducing the burden of congenital CMV infection.

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10.1016/j.jpeds.2011.07.044

References