

07-ID-12

Committee: Infectious Disease

Title: Establishing Neonatal Herpes Surveillance

Statement of the Problem:

Neonatal herpes simplex virus (HSV) infection of the newborn is a serious disease that results in death in up to 65% of untreated patients; even with treatment, fewer than 20% of neonates with CNS involvement develop normally. While most cases of neonatal herpes are perinatally-acquired, some are postnatally-acquired and clusters of such cases have occurred. Currently, ten states have neonatal herpes as a reportable condition. However, few states have a specified case definition and among those that do, the case definitions are not standardized. Furthermore, in 2004, only 0-5 cases were reported in each of these jurisdictions, undoubtedly an underestimate of the true burden. No national case definition exists. As a result, much is to be learned about the true incidence of this infection, risk factors for disease, and opportunities for prevention.

Statement of the desired action(s) to be taken:

- CDC should convene an expert panel to include those states that currently have neonatal herpes as a reportable condition as well as those states that would like to consider making this a reportable condition, to develop a standard case definition for neonatal herpes surveillance that could be considered for use by those states.

Goals of Surveillance:

- Describe the incidence of neonatal herpes infection
- Describe risk factors for neonatal herpes infection
- Recognize and respond to emergent disease patterns
- Identify missed opportunities for prevention and early treatment of affected neonates; use that knowledge to promote awareness of neonatal herpes infection among providers
- Establish a baseline measure of disease burden from which to monitor the effectiveness of any future herpes vaccine or other future prevention strategies

Methods for Surveillance:

Reports will be made to state and local health departments by clinicians and laboratories. A case ascertainment form will be used to collect data elements. This form (to be developed) will include core and optional data elements. Core data elements will be reported through the CDC's National Notifiable Disease Surveillance System (NNDSS).

Background and Justification:

In June 2006 CSTE adopted position statement 06-ID-07 that called for the convening of an expert panel to: 1) develop a candidate case definition for neonatal herpes surveillance that could be considered by CSTE for approval; 2) identify the specific needs and goals of surveillance and propose the means by which surveillance might best be accomplished; 3) determine whether making neonatal herpes a nationally reportable condition might meet these needs; 4) if reporting is warranted, identify those epidemiologically and clinical variables that should accompany the description of those cases; and 5) assess the resources and training required by state, territorial, and local health departments to implement surveillance.

In March 2007, CSTE, in partnership with and with the support of CDC convened this expert panel. The panel included representatives from the American Academy of Pediatrics, the American College of Obstetrics and Gynecology, the National Coalition of STD Directors and the Association of Public Health Laboratories; representatives from state and local health departments, including state and local STD prevention and control programs; and clinicians from academic centers with specialties in pediatric infectious disease, neonatology and obstetrics/gynecology.

References:

- CSTE Position Statement - 06-ID-07: Surveillance for Neonatal Herpes

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