Investigating Screening Methods for cCMV

Congenital cytomegalovirus (cCMV) is the most common non-genetic cause of childhood sensorineural hearing loss. In the United States, approximately 1 in 150 newborns is born with cCMV. New screening technologies and treatment options have created the possibility of newborn screening for cCMV to improve health outcomes. The Minnesota Department of Health (MDH) has partnered with the Center for Disease Control and Prevention (CDC) and the University of Minnesota to evaluate the feasibility of universal newborn screening using new techniques with existing dried blood spots (DBS). If universal screening for cCMV ever begins, in Minnesota this would mean about 500 infants each year would be identified with cCMV and have added risk for hearing loss. This could mean an additional segment of children who will need audiologic follow-up early on, and more regularly. However, important to remember, is that only 20% of cCMV infections actually lead to hearing loss (at birth or delayed onset).

The study itself is evaluating new DBS screening methods versus screening with saliva, which historically has superior detection rates. Study participants are enrolled from multiple birth hospitals (currently Fairview Riverside and Fairview Ridges with additional sites pending). The goal of the current study is to enroll 30,000 infants over the next 3 years. In that time frame, 200 infants are expected to be identified with cCMV.

Infants found to have a positive result are notified by MDH through their primary care provider, and given a recommendation for consultation with a pediatric infectious disease provider to confirm diagnosis of cCMV. Infants diagnosed early with cCMV could benefit from new antiviral treatment to prevent, improve, or slow progression of hearing loss and other neurodevelopmental problems. https://www.ncbi.nlm.nih.gov/pubmed/26826174

Because it is unknown which infants with cCMV will develop hearing loss (or have progression of hearing loss), all identified infants will need to be followed more closely. A full initial audiologic work-up is recommended for infants with cCMV. Those with normal hearing will potentially receive audiologic follow-up every 3 to 6 months until age 3 years. Audiologists should continue to report newly diagnosed permanent hearing loss, through age 10, to MDH–Newborn Screening.

Additional information related to cCMV can be found on the [CDC website](https://www.cdc.gov). Any questions about the cCMV screening study in Minnesota can be directed to Maggie Dreon, MS, Certified Genetic Counselor.

did you know? 2016 Hearing Aid Appeals Packet

The Minnesota Department of Human Services (DHS) now has an updated Hearing Aid Appeals Packet. This packet may assist parents who wish to appeal the denial of payment for their child’s hearing aids. Though a 2003 Minnesota statute authorized coverage of amplification for children, the coverage only applies to employers with “Minnesota” health plans. Additionally, a federal law (ERISA) exempts self-insured plans from following any state mandates. Appeals may not always result in reversal of the denial, but empowers parents with the possibility to make a difference. The 2016 packet can be obtained by contacting mary.bauer@state.mn.us at DHS via e-mail or phone 651-431-5957.
Have You Heard?

**Latest Issue of the Journal of Early Hearing Detection and Intervention (JEHDI) is available**

JEHDI 2016-2 was recently published. Individual articles or the entire issue can be viewed at no cost at [http://digitalcommons.usu.edu/jehdi/](http://digitalcommons.usu.edu/jehdi/). Be sure not to miss the final segment of each issue, “What Are Others Publishing about Early Hearing Detection and Intervention”. This section summarizes material relevant to EHDI that was published in other journals. It is a convenient way to stay up to date about EHDI on a broader level.

**Help Me Grow Updates**


**New—Loaner Infant Hearing Device Webpage**

[https://cfhp.health.state.mn.us/hearbank/home.xhtml](https://cfhp.health.state.mn.us/hearbank/home.xhtml)

The University of Minnesota – Lions Infant Hearing Program and MDH have launched an updated loaner hearing device web application. Current loaner program users will be receiving instructions about the new application soon. New users can sign up by visiting the new website and choosing the “Help” menu.

Last Words from the Advisory Committee

**Meeting highlights...**

- National CMV conference [http://cmvconference.org](http://cmvconference.org) was attended by MDH staff. There is now widespread national public awareness of CMV, and interest in current studies on newborn screening for CMV
  
  

- **EHDI Annual Report 2015** is now available

- Additional training occurred in December for Minnesota’s Early Childhood Hearing Outreach (ECHO) team, which includes Early Head Start Providers who provide periodic hearing screening for children age 0-5 years

Next meeting: February 8, 2017
1:00 – 4:00 p.m.

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