

Merlin disease code: 04910 Acute Flaccid Myelitis

[Paper case report form](#) required
Merlin extended data required (completed by case reviewer)

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 causes of AFM remain largely unknown and no laboratory test is available for case confirmation. 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 at the CDC.

Clinical criteria for case classification

Acute flaccid weakness of one or more limbs (i.e., low muscle tone, limp, hanging loosely, not spastic or contracted) in the absence of a more likely diagnosis attributable to a nationally notifiable disease/condition.

Laboratory/imaging criteria for case classification

Confirmatory:

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:

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.

Epidemiological criteria for case classification

Not applicable.

Case classification

Confirmed:

A clinically compatible illness in a person with confirmatory laboratory/imaging criteria.

Probable:

A clinically compatible illness in a person with presumptive laboratory/imaging criteria.

Suspect:

A clinically compatible illness in a person with insufficient information to classify as confirmed or probable.

Criteria to distinguish a new case from previous reports

Not applicable.