



Centers for Disease Control and Prevention

CDC 24/7: Saving Lives. Protecting People.™

Enterovirus D68

Español: [Enterovirus D68 \(/non-polio-enterovirus/about/EV-D68-sp.html\)](/non-polio-enterovirus/about/EV-D68-sp.html)

Enterovirus D68 (EV-D68) is one of more than 100 non-polio enteroviruses. This virus was first identified in California in 1962.

What are the symptoms of EV-D68 infection?

EV-D68 can cause mild to severe respiratory illness.

- Mild symptoms may include fever, runny nose, sneezing, cough, and body and muscle aches.
- Severe symptoms may include wheezing and difficulty breathing. See [EV-D68 in the U.S., 2014 \(/non-polio-enterovirus/outbreaks/EV-D68-outbreaks.html\)](/non-polio-enterovirus/outbreaks/EV-D68-outbreaks.html) for details about infections occurring this year.

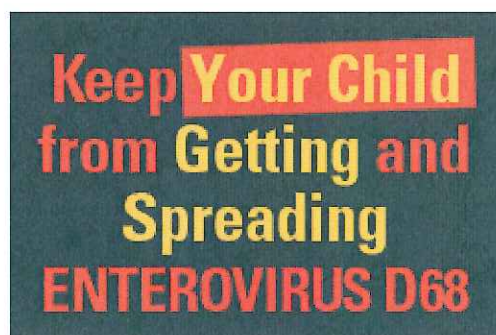
Anyone with respiratory illness should contact their doctor if they are having difficulty breathing or if their symptoms are getting worse.

How does the virus spread?

Since EV-D68 causes respiratory illness, the virus can be found in an infected person's respiratory secretions, such as saliva, nasal mucus, or sputum. EV-D68 likely spreads from person to person when an infected person coughs, sneezes, or touches a surface that is then touched by others.

What time of the year are people most likely to get infected?

In the United States, people are more likely to get infected with enteroviruses in the summer and fall. Cases are likely to decline later in the fall.



[\(/non-polio-enterovirus/about/EV68-infographic.html\)](/non-polio-enterovirus/about/EV68-infographic.html)

How common is EV-D68 in the United States?

In general, a mix of enteroviruses circulates every year, and different types of enteroviruses can be common in different years. Small numbers of EV-D68 have been reported regularly to CDC since 1987. However, this year the number of people reported with confirmed EV-D68 infection is much greater than that reported in previous years. See [EV-D68 in the U.S., 2014 \(/non-polio-enterovirus/outbreaks/EV-D68-outbreaks.html\)](/non-polio-enterovirus/outbreaks/EV-D68-outbreaks.html) for details about infections occurring this year.

Who is at risk?

In general, infants, children, and teenagers are most likely to get infected with enteroviruses and become ill. That's because they do not yet have immunity (protection) from previous exposures to these viruses. We believe this is also true for EV-D68. Adults can get infected with enteroviruses, but they are more likely to have no symptoms or mild symptoms.

Children with asthma may have a higher risk for severe respiratory illness caused by EV-D68 infection.

How is it diagnosed?

EV-D68 can only be diagnosed by doing specific lab tests on specimens from a person's nose and throat.

Many hospitals and some doctor's offices can test ill patients to see if they have enterovirus infection. However, most cannot do specific testing to determine the type of enterovirus, like EV-D68. CDC and some state health departments can do this sort of testing.

CDC recommends that clinicians only consider EV-D68 testing for patients with severe respiratory illness and when the cause is unclear.

What are the treatments?

There is no specific treatment for people with respiratory illness caused by EV-D68.

For mild respiratory illness, you can help relieve symptoms by taking over-the-counter medications for pain and fever. Aspirin should not be given to children.

Some people with severe respiratory illness may need to be hospitalized.

There are no antiviral medications currently available for people who become infected with EV-D68.

How can I protect myself?

You can help prevent yourself from getting and spreading EV-D68 and other respiratory illnesses by following these steps:

- Wash hands often with soap and water for 20 seconds.
- Avoid touching eyes, nose and mouth with unwashed hands.
- Avoid close contact such as kissing, hugging, and sharing cups or eating utensils with people who are sick.
- Cover your coughs and sneezes with a tissue or shirt sleeve, not your hands.
- Clean and disinfect frequently touched surfaces, such as toys and doorknobs, especially if someone is sick.
- Stay home when you are sick.

Also, see an infographic that shows [these prevention steps \(/non-polio-enterovirus/about/EV68-infographic.html\)](/non-polio-enterovirus/about/EV68-infographic.html).

There are no vaccines for preventing EV-D68 infections.

What should people with asthma and children suffering from reactive airway disease do?

Children with asthma are at risk for severe symptoms from EV-D68 and other respiratory illnesses. They should follow CDC's guidance to maintain control of their illness during this time.

CDC recommends:

- Discuss and update your asthma action plan (<http://www.cdc.gov/asthma/actionplan.html>) with your primary care provider.
- Take your prescribed asthma medications as directed, especially long term control medication(s).
- Be sure to keep your reliever medication with you.
- Get a flu vaccine when available.
- If you develop new or worsening asthma symptoms, follow the steps of your asthma action plan. If your symptoms do not go away, call your doctor right away.
- Parents should make sure the child's caregiver and/or teacher is aware of his/her condition, and that they know how to help if the child experiences any symptoms related to asthma.

Related Pages

- [EV-D68 infections in the U.S. in 2014 \(/non-polio-enterovirus/outbreaks/EV-D68-outbreaks.html\)](/non-polio-enterovirus/outbreaks/EV-D68-outbreaks.html)
- [What CDC is doing about EV-D68 infections \(/non-polio-enterovirus/outbreaks/EV-D68-outbreaks.html#doing\)](/non-polio-enterovirus/outbreaks/EV-D68-outbreaks.html#doing)
- [States with lab-confirmed cases of EV-D68 infection \(/non-polio-enterovirus/outbreaks/EV-D68-states.html\)](/non-polio-enterovirus/outbreaks/EV-D68-states.html)

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