

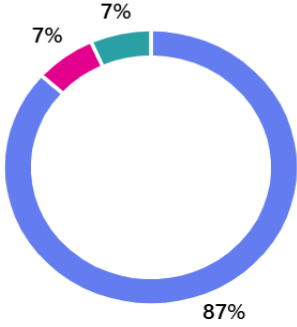


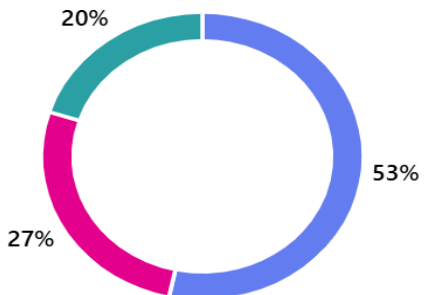
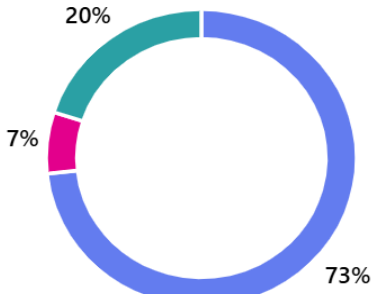
Newborn Screening Technical Advisory Committee (TAC)

Meeting to Review Congenital Cytomegalovirus (cCMV) for the Newborn Screening Panel

TAC Member Voting Summaries and Comments

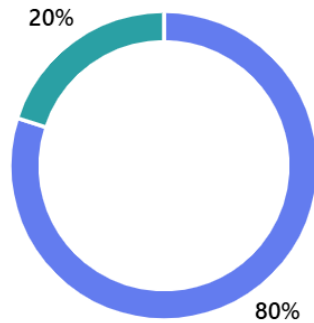
The following is a compilation of comments from TAC members provided when voting on each individual criteria, and an overall recommendation. Comments have been summarized and are organized by each criterion and then overall comments provided.

Criteria	Major themes
<p>1. Available Screening Technology</p> <ul style="list-style-type: none"> ● Yes, meets criterion. 13 ● No, does not meet criterion. 1 ● Unsure or more information needed. 1 	<ul style="list-style-type: none"> • Urine PCR is the gold standard screening test for cCMV due to sensitivity and specificity. • Universal screening may not prevent irreversible harm, but allows for prevention of progression of hearing loss and developmental delays .

<h3>2. Diagnostic Testing and Treatment Available</h3> <div><div><div>● Yes, meets criterion.</div><div>8</div></div><div><div>● No, does not meet criterion.</div><div>4</div></div><div><div>● Unsure or more information needed.</div><div>3</div></div></div> <div><table><tr><th>Response</th><th>Count</th><th>Percentage</th></tr><tr><td>Yes, meets criterion.</td><td>8</td><td>53%</td></tr><tr><td>No, does not meet criterion.</td><td>4</td><td>27%</td></tr><tr><td>Unsure or more information needed.</td><td>3</td><td>20%</td></tr></table></div>	Response	Count	Percentage	Yes, meets criterion.	8	53%	No, does not meet criterion.	4	27%	Unsure or more information needed.	3	20%	<ul style="list-style-type: none">• Concern that medical expertise is not reasonably available to all newborns screened and for the capacity of treatment centers.
Response	Count	Percentage											
Yes, meets criterion.	8	53%											
No, does not meet criterion.	4	27%											
Unsure or more information needed.	3	20%											
<h3>3. Prevention Potential and Medical Rationale</h3> <div><div><div>● Yes, meets criterion.</div><div>11</div></div><div><div>● No, does not meet criterion.</div><div>1</div></div><div><div>● Unsure or more information needed.</div><div>3</div></div></div> <div><table><tr><th>Response</th><th>Count</th><th>Percentage</th></tr><tr><td>Yes, meets criterion.</td><td>11</td><td>73%</td></tr><tr><td>No, does not meet criterion.</td><td>1</td><td>7%</td></tr><tr><td>Unsure or more information needed.</td><td>3</td><td>20%</td></tr></table></div>	Response	Count	Percentage	Yes, meets criterion.	11	73%	No, does not meet criterion.	1	7%	Unsure or more information needed.	3	20%	<ul style="list-style-type: none">• Screening for cCMV will not eliminate harm but can ameliorate consequences of infection.
Response	Count	Percentage											
Yes, meets criterion.	11	73%											
No, does not meet criterion.	1	7%											
Unsure or more information needed.	3	20%											

4. Public Health Rationale

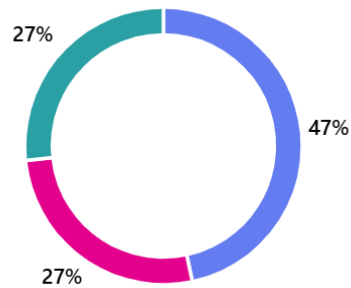
● Yes, meets criterion.	12
● No, does not meet criterion.	0
● Unsure or more information needed.	3



- Risk-based screening not an option as most babies with cCMV are asymptomatic at birth.
- Targeted hearing screening misses a majority of cases.

5. Cost Benefit / Cost Effectiveness

● Yes, meets criterion.	7
● No, does not meet criterion.	4
● Unsure or more information needed.	4



- Intangible benefits may be received from cCMV screening such as limiting family turmoil from a late diagnosis and connection to early intervention.
- Cost benefit is negative.

<div>6. Public Health Infrastructure Readiness</div> <div><div><div>Yes, meets criterion.</div><div>No, does not meet criterion.</div><div>Unsure or more information needed.</div></div><div><div>8</div><div>4</div><div>3</div></div></div> <div><div><div><div>20%</div><div>53%</div><div>27%</div></div><div></div></div></div>	<div><div><div>Lack of infrastructure in Washington, especially in rural areas.</div><div>Demand for infrastructure will be stronger if universal screening is implemented.</div><div>State and community partners to re-evaluate needs after cCMV screening is implemented.</div></div></div>
<div>Overall Recommendation to add cCMV to the mandatory newborn screening panel</div> <div><div><div>I recommend the Board add universal screening of cCMV to the list of conditions for which all...</div><div>I do not recommend the Board add cCMV to the list of conditions for which all Washington-born...</div><div>At this time, I do not recommend the Board add cCMV to the list of conditions for which all...</div></div><div><div>9</div><div>1</div><div>6</div></div></div> <div><div><div><div>38%</div><div>56%</div><div>6%</div></div><div></div></div></div>	<div><div><div>cCMV prevention and education should be prioritized for people who are pregnant.</div><div>Concerns for lack of infrastructure, especially for audiological follow-up.</div><div>Rural Washington populations have limited accessibility to healthcare services.</div><div>More data on long-term health outcomes for asymptomatic infants is needed and may lead to an improvement in the cost-benefit of cCMV screening over time.</div></div></div>

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