What AFT Members Need to Know to Protect Themselves from Polio

As of July 2022, wastewater testing has detected the spread of polio virus in New York City and nearby Rockland and Orange Counties. In addition, one unvaccinated young adult was diagnosed and hospitalized with paralysis in Rockland County.

Polio has been nearly eradicated in the United States and most of the world, thanks to widespread vaccination; but evidence that the virus is spreading is causing concern. The good news is that polio is a disease we have the tools to fight.

Prevention is the Best Medicine

The polio vaccine can prevent polio! Polio (or poliomyelitis) is a disabling and life-threatening disease caused by poliovirus, which can infect a person’s spinal cord, leading to paralysis. Because polio has no cure, vaccination is the best protection and the only way to stop the disease from spreading. Polio mainly affects children under age 5. However, anyone of any age who is unvaccinated can contract the disease. It is recommended that people who are unvaccinated, including children 2 months and older, those who are pregnant, and people who have not completed their polio vaccine series previously should consider vaccination.

ADULTS: Most adults do not need polio vaccine because they were already vaccinated as children. Vaccine has been available in the U.S. since 1955. Adults born before then are also likely to be protected from having been exposed to poliovirus before vaccine was available.

If you have access to your childhood immunization records, look for inactivated polio vaccine (IPV) or oral polio vaccine (OPV) (used in other countries) on the form. Check to see that the immunization was given four times in total. Adults who were not vaccinated or did not receive all four doses can be vaccinated as adults. Doctors can conduct antibody testing to check current immunity if you

How Polio Spreads and Symptoms of Exposure

Polio is very contagious, and a person can spread the virus even if they aren’t sick or experiencing symptoms. In communities with lower vaccination rates, polio can spread even more easily. The polio virus enters the body through the mouth, usually from hands contaminated with the stool of an infected person. Respiratory and oral-to-oral transmission through saliva may also occur.

Symptoms, which can be mild and flu-like (fatigue, fever, headache, stiffness, muscle pain, vomiting), can take up to 30 days to appear, during which time an infected individual can be shedding virus to others. A smaller group of people will develop more serious symptoms that affect the brain and spinal cord, including paresthesia (feeling of pins and needles in the legs); meningitis (infection of the covering of the spinal cord and/or brain); or paralysis (unable to move parts of the body) or weakness in the arms, legs or both.
have concerns. Adults can also receive one lifetime booster if antibody testing shows low immunity.

**CHILDREN:** Children should get four doses of polio vaccine at ages 2 months, 4 months, 6-18 months and 4-6 years.¹

More than 90 percent of children nationwide are vaccinated against polio, but the COVID-19 pandemic has slowed routine vaccination for many children. Only 60 percent of 2-year-olds are up to date with polio vaccines.²

No serious adverse events have been documented for IPV. The IPV is the only polio vaccine recommended for people with immunodeficiency. It is safe for people who are breastfeeding. People who are pregnant and who are at higher risk of polio exposure should discuss IPV vaccination with their doctor.

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**Some Workers May Be at Higher Risk of Exposure**

The following workers may consider antibody testing and a booster, particularly if they are in areas where polio has been found in the wastewater. Local unions can bargain for employers to provide or cover the cost of testing and vaccines for these workers:

- Healthcare workers or workers in congregate settings who care for potentially infected people or handle waste-contaminated materials, including environmental service workers;
- Lab workers who handle specimens;
- People who work internationally in areas where risk of exposure is higher, see Polio: For Travelers | CDC;
- People who work with immigrants, refugees or adopted children from countries where risk of exposure is higher or where the OPV vaccine is still offered; and
- People who are immunocompromised and work with the public.

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¹[https://www.cdc.gov/vaccines/vpd/polio/public/index.html#text=CDC%20recommends%20that%20children%20get%20four%20doses%20of%20polio%20vaccine%20four%20through%206%20years%20old](https://www.cdc.gov/vaccines/vpd/polio/public/index.html#text=CDC%20recommends%20that%20children%20get%20four%20doses%20of%20polio%20vaccine%20four%20through%206%20years%20old)

²[https://www.cdc.gov/mmwr/volumes/71/wr/mm7133e2.htm?s_cid=mm7133e2_w#contribAff](https://www.cdc.gov/mmwr/volumes/71/wr/mm7133e2.htm?s_cid=mm7133e2_w#contribAff)

For more information, see [Polio Vaccination | CDC](https://www.cdc.gov/vaccines/vpd/polio/public/index.html) and [Polio: For Healthcare Providers | CDC](https://www.cdc.gov/polio/healthcareproviders/index.html).

If you have questions, contact the AFT Health and Safety Team at 4healthandsafety@aft.org [Aug. 25, 2022]