Cytomegalovirus (CMV)

What is Cytomegalovirus (CMV)?
Cytomegalovirus (CMV) is a common virus that infects more than half of U.S. adults by the age of 40. Most healthy people who get CMV have few symptoms and no long-term side effects. Many do not know they have it.

CMV is a member of the herpes virus group. Once you become infected, the virus stays in your body for the rest of your life without causing damage or illness. You won’t get sick with CMV again unless your immune system is weak due to disease or medicine.

Who Can Get CMV?
Anyone can get CMV. For most people, CMV is not a serious problem. It can, however, cause issues after you have a transplant when your immune system is weak.

How is CMV Spread?
CMV is spread through close contact with an infected person’s saliva, urine, semen, blood or other body fluids.

It is also common after an organ transplant.

How is CMV Found?
CMV is found through a blood test.

Before your heart transplant, you (the recipient) and your new heart (the donor) are tested. The result of your test is known as your CMV status.

— CMV-positive means you have CMV in your blood.
— CMV-negative means you do not have CMV in your blood.

What are the Symptoms of CMV?
- fever
- diarrhea
- loss of appetite
- feeling tired
- upset stomach

How is CMV Treated?
After your heart transplant, you will be treated for CMV before you have an active infection.

Your treatment will be based on your CMV status. If both you and your donor are negative, you do not need treatment.

— If either you or your donor are positive, you will take the anti-viral medicine — valganciclovir (Valcyte®) — for up to 9 months.
  • After 9 months, you will have blood draws. Your blood will be checked for your CMV status.
  • If you test positive during or after taking the anti-viral medicine, you will continue to be treated for CMV.