### What is CMV?
- CMV is a common virus that can infect anyone of any age in the general population. Approximately half of people have had CMV by the time they are adults.

### What can CMV do?
- In a person with a transplant, CMV may cause mild to severe flu-like illness. It may also cause severe infection in the gut, lung or transplanted organ.

### How is CMV spread?
- CMV lives in body fluids like saliva or blood. People may get CMV after coming into close contact with an infected person.
- Once CMV infects a person, the virus stays in the body for life. Most of the time it is not active (latent).
- CMV can be spread from a transplanted organ if the organ donor had CMV in their lifetime.

### Why is CMV important after transplant?
- CMV can become active after transplant because of the anti-rejection medications you will need to take. Transplant recipients are more likely to have symptoms because of active CMV, especially if they did not have CMV before their transplant.
- Patients will be monitored closely post-transplant, and may need to take a medication to manage CMV infection.

### What are the symptoms of CMV?
- There are many symptoms of possible CMV infection. These may include:
  - Tiredness
  - Diarrhea
  - Fever/chills
  - Muscle pains
- Just because you have symptoms, it does not mean you have CMV. But if you have any of these symptoms, contact your transplant clinic.

### How do I know I have CMV?
- CMV is detected by a blood test. Your transplant clinic will regularly check your blood for the presence of the virus.

### Does CMV need to be treated?
- If a transplant patient has an active infection, it is important to start treatment as soon as possible.

### How is CMV treated?
- CMV is treated with anti-virus medicine (e.g. valganciclovir or ganciclovir).

### How is CMV prevented?
- All donors and recipients are checked for CMV. If you are at risk for CMV infection, your doctor may prescribe valganciclovir for a period of time after your transplant to prevent the CMV from becoming active.