RSV

Not Just the Common Cold

The common cold is a fact of life. An infection caused by many different viruses in the mucous membranes of the nose and throat, a cold is usually a minor inconvenience that goes away in a few days. But if you are the parent of a young child, what you think is a cold may actually be Respiratory Syncytial Virus (RSV), which has potentially serious consequences.

What is RSV?

R SV is a major cause of respiratory illness in infants and young children, with the largest number of cases occurring in babies between two to six months of age. In most cases, RSV causes symptoms resembling those of the common cold. For the majority of children and adults, RSV infections go away quickly without complications. However, if your baby is born prematurely or has other risk factors, the infection could progress and result in serious or life-threatening disease. By knowing more about this topic, you will be able to communicate more effectively with your child's pediatrician and reduce your child's risk of contracting RSV.

How do I know if my baby has RSV and not just a cold?

All children under the age of two are at increased risk, so it's important to be aware of the early signs of RSV. These include mild cold symptoms (such as a runny nose, a minor cough and a fever) that develop into a more pronounced cough and labored breathing a few days later.



Can RSV cause more serious medical conditions?

In premature infants (born at less than 37 weeks) and infants younger than six weeks of age, RSV can result in serious or life-threatening disease. Babies born prior to 35 weeks are most at risk. Some babies with RSV can potentially develop lower respiratory infections such as bronchiolitis (infection of the small breathing tubes in the lungs) pneumonia (lung infection) and croup (breathing difficulty and barking cough). In more severe cases, RSV can lead to respiratory failure. High-risk children who contract RSV often need to be hospitalized. RSV may also cause more long-term health problems, such as asthma.

How do I know if my child is at increased risk for contracting a severe case of RSV?

Individuals at increased risk for severe RSV disease include:

- Premature infants
- Young children with medical conditions such as chronic lung disease and serious heart conditions
- Young children with compromised immune systems, including those who have cancer or organ transplants
- Term children in the first months of life.

Are there other risk factors I should know about?

ther factors that may increase a child's likelihood of having more serious RSV disease include exposure to tobacco smoke or other air pollutants and a family history of asthma. Babies who are part of a multiple birth are also at greater risk because of low birth weight and an increased number of young siblings in the household. In addition, low birth weight (less than 5.5 pounds), child care or day care attendance, crowded living conditions and having school-age siblings can also increase a child's risk for experiencing more severe RSV disease.

Why is RSV so dangerous for premature babies?

Premature infants often have underdeveloped lungs that are more susceptible to infection. In addition, they may not have received enough antibodies from their mother to help them fight off infection once they have been exposed to RSV.

Is RSV contagious?

Yes, the virus is transmitted when an unexposed person touches an infected individual and then rubs his or her own eyes, nose or mouth. RSV is also occasionally spread through the air by coughing and sneezing when in very close contact. RSV is extremely contagious and can be spread by touching, kissing or other close contact with an infected person. It can survive for up to seven hours on surfaces such as cribs and countertops. Symptoms of RSV disease may not appear for four to six days after exposure to the virus. Individuals with RSV are usually contagious for three to eight days. If one child in a day care setting is affected, it is extremely difficult to prevent additional infection among other children.

What are the symptoms of RSV?

At first, the child will have many of the same symptoms as the common cold. These can include fever and runny nose. More serious symptoms include coughing, difficult or rapid breathing and wheezing. RSV can progress quickly, so it is important to be aware of your child's symptoms and consult with his or her health care provider if needed. Other symptoms of RSV include:

- Lethargy and inactivity
- Pulling in of the chest wall
 Nasal flaring
- IrritabilityPoor feeding
- Episodes of apnea (more common in infants an event where an infant may not take a breath for longer than 10 seconds)
- Rattling in the chest that may be felt over an infant's back or chest

How do I know if my child's symptoms are serious enough to call my health care provider?

all your health care provider if your child has any of the following symptoms:

- Elevated temperature, with particular concern about any temperature over 100.4° F in infants under two months of age
- Thick nasal discharge that is yellow, green or gray
- Cough that lasts more than four days
- Cough that produces yellow, green or gray mucus
- Chest pain
- Difficulty breathing or very rapid breathing
- Bluish or gray color of the lips, skin or fingernails

How do I take care of my child if I think he or she has RSV disease?

First, notify your health care provider. Make sure your child is able to breathe easily, drink, eat and sleep comfortably, and give your child plenty of fluids to avoid dehydration. The child's health care provider may conduct tests to decide if the illness is more severe and requires hospitalization.



How can I protect myself and my family from RSV?

Frequent and thorough hand washing is key to preventing the spread of RSV. Breastfeed your baby, since nursing babies are less likely to contract this virus. The increased maternal antibodies provided to the baby through breastfeeding offer protection from RSV. Also, don't smoke! Children in non-smoking households are less susceptible to RSV. If you have a newborn, you can protect him or her from RSV by:

- Asking everyone to wash their hands before touching your baby
- Keeping your baby away from anyone who has a cold, fever or runny nose
- Avoiding trips to crowded areas such as shopping malls when you are with your baby

How long will my child be sick with RSV?

RSV usually lasts seven to 14 days, though it is possible to be sick for up to three weeks. Children hospitalized with RSV usually spend five to seven days in the hospital.



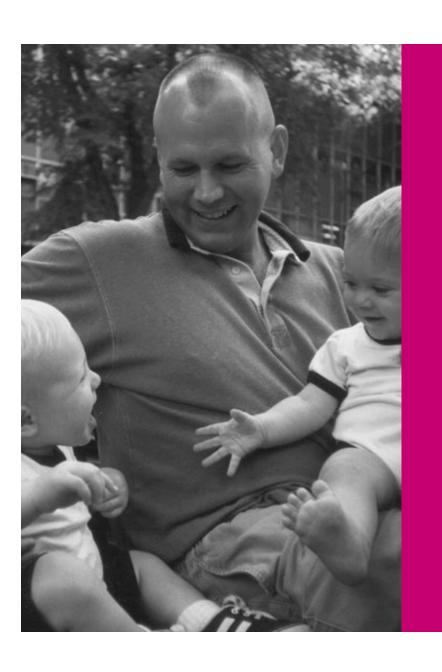
Is there a time of year when there are more likely to be outbreaks of RSV?

The "RSV season" differs from city to city, but usually begins in the Fall and lasts through the Spring. Since 1990, epidemics of RSV have begun between late October and mid-December, peaking during January and February and lasting until April or May.

Is there any medication or vaccine that can prevent RSV?

Although there are no vaccines available that prevent RSV, there are medications that are used to treat RSV in high-risk or severely ill people. There is also an antibody that can be given monthly during the fall and winter months to reduce the severity of RSV disease. If your baby was born prematurely or has heart or lung diseases, talk to your health care provider about this approach.





Fast Facts



- Up to 50% of all infants are infected with RSV each year, and virtually all children have contracted this virus by the age of two years.
- Each year, about 125,000 children are hospitalized in the US with RSV, and approximately 500 deaths occur.
- The majority of children hospitalized for RSV are under six months of age.
- RSV is the most common cause of bronchiolitis (infection of the small breathing tubes in the lungs) and pneumonia (lung infection) among infants and children under one year of age.
- Although RSV leads to limited immunity against the virus, it is not sufficient to prevent reinfection.



Sources

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Fast Facts for families



What Parents Need to Know About Respiratory Syncytial Virus (RSV)