

Respiratory Syncytial Virus (RSV) Fact Sheet

1. What is respiratory syncytial virus (RSV)?

RSV is a common respiratory virus that usually causes cold-like symptoms such as coughing, sneezing, and runny nose. People are typically infected with RSV for the first time as an infant or toddler and nearly all children are infected before their second birthday. However, repeat infections may occur throughout life, and people of any age can be infected. Most people recover in a week or two, but RSV can be serious, especially for infants and older adults.

In the United States, RSV circulation generally starts during fall and peaks in the winter. The timing and severity of RSV circulation in a given community can vary from year to year.

2. What are the symptoms of RSV?

Symptoms of RSV infection usually include coughing, sneezing, runny nose, fever and wheezing. These symptoms usually appear in stages and not all at once. In very young infants, irritability, decreased activity, decreased appetite, and apnea (pauses in breathing more than 10 seconds) may be the only symptoms of infection. Most people who get an RSV infection will have mild illness and will recover on their own in a week or two. People who develop breathing difficulties or dehydration may need to be hospitalized for supportive care.

3. Who is at risk for severe illness?

Healthy adults and infants infected with RSV usually do not get severely ill. But some people with RSV infection, especially infants younger than 6 months of age and older adults, may need to be hospitalized if they are having trouble breathing or are dehydrated.

Premature infants, children with congenital heart or chronic lung disease, children with weakened immune systems, and children with neuromuscular disorders are at highest risk for severe disease. RSV is the most common cause of bronchiolitis (inflammation of the small airways in the lung) and pneumonia (lung infection) among infants and children under one year of age in the US. Each year, 58,000 to 80,000 children younger than 5 years old are hospitalized due to RSV infection.

Adults aged 65 and older, or who have chronic heart or lung disease or weakened immune systems, are also at increased risk of severe disease. RSV infection can also lead to worsening

of pre-existing conditions such as asthma, chronic obstructive pulmonary disease (COPD), and congestive heart failure.

4. How is RSV spread?

RSV is spread through close contact with infected persons or contact with contaminated surfaces or objects. Infection can occur when droplets containing the virus touch your eyes, nose, or mouth. For example, transmission can happen by being near an ill person who is coughing or sneezing, kissing or sharing eating utensils with a sick person, or shaking hands with an infected person or touching contaminated surfaces and then touching your face before washing your hands.

People infected with RSV are usually contagious for 3 to 8 days. They may become contagious a day or two before they start showing signs of illness. The virus sheds most during the early stages of illness and typically is highest when fever is present. Some infants and people with weakened immune systems can continue to spread the virus even after they stop showing symptoms, for as long as 4 weeks. Children are often exposed to and infected with RSV outside the home, such as in school or childcare centers. In most cases, children with known RSV infection may return to their school or childcare facility after they have been fever-free for 24 hours without use of any fever-reducing medications.

RSV can persist for many hours on hard surfaces such as tables and crib rails. It typically stays on soft surfaces such as tissues and hands for shorter amounts of time.

5. How can RSV be prevented?

The same steps used to prevent other types of respiratory illnesses also help prevent spread of RSV. These include frequent hand washing with soap and water or an alcohol-based hand sanitizer, avoiding close contact with sick people, staying home when sick, covering coughs and sneezes, and cleaning and disinfecting frequently touched surfaces such as doorknobs and mobile devices.

Ideally, people with cold-like symptoms should not interact with children at high risk for severe RSV disease. If this is not possible, they should carefully follow the prevention steps mentioned above and wash their hands before interacting with such children. They should also refrain from kissing high-risk children while they have cold-like symptoms.

A drug called palivizumab is available to prevent severe RSV illness in certain infants and children who are at high risk for severe disease, such as infants born prematurely or with congenital heart disease. Palivizumab is used to prevent illness from occurring but it cannot

cure or treat children who already have RSV. Healthcare providers usually give this medicine to very high-risk children as a series of monthly shots during RSV season. If your child is at high risk for severe RSV disease, talk to your healthcare provider to see if palivizumab can be used as a preventive measure.

There is no vaccine yet to prevent RSV infection, but scientists are working hard to develop one.

6. How is RSV treated? - There is no specific antiviral treatment for RSV infection, but symptoms can be alleviated by drinking fluids and managing fever with over-the-counter fever reducers such as acetaminophen or ibuprofen (never give aspirin to children). Hospitalized persons with RSV may receive intravenous fluids, supplemental oxygen, or may need to have a tube inserted to help them breathe.

7. For more information about RSV: <http://www.cdc.gov/rsv/index.html>

This fact sheet provides general information. Please contact your physician for specific clinical advice.

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