

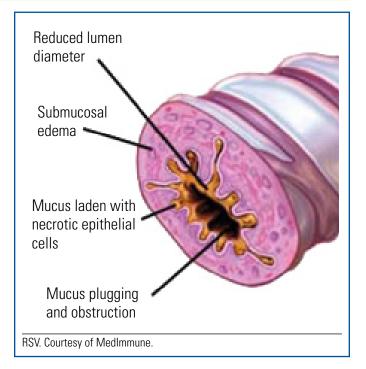
*Respiratory syncytial virus*, or RSV, is a common illness of the lungs and breathing passages affecting high-risk populations, especially babies born prematurely who are less than 2 years of age.

- By age 2, most children have had or been exposed to RSV.
- In healthy children, RSV is like a cold. It can be more serious for those in high-risk groups, such as
  - children more than 4 weeks premature at birth
  - twins or other multiple births
  - children younger than 2 years born with lung or heart disease
  - children who weighed less than 5.5 pounds at birth
  - school-aged brothers and sisters
  - children who attend day care
  - children who live in a crowded home environment
  - children with a family history of asthma
  - children who are exposed to tobacco smoke and other air pollutants.

RSV can be dangerous for premature babies—even those who did not require oxygen or positive pressure ventilation in the neonatal intensive care unit—becuase they do not have fully developed airways. In addition, they may not have received antibodies to help fight off RSV and other viruses because they were born early.

It is important that parents understand prior to discharge that it is essential during this first year of life to take specific precautions to decrease their baby's exposure to RSV. Precautions include continued proper handwashing and limiting their baby's exposure to crowds and schoolaged children. Healthcare professionals should discuss day care arrangements with parents and other intended caregivers. For infants with severe chronic lung disease or heart defects, traditional day care may not be the best alternative. The healthcare professional can help parents explore other options (e.g., private day care).

RSV infections usually begin in the fall and end late in the spring. Unfortunately, RSV has several strains, so even if



a baby has had it once during RSV season, there is still a chance he or she can get it again. We each will have RSV several times in our lifetime.

RSV is very contagious. It can be spread through the air when a person coughs or sneezes. RSV also can spread by touching an object that has the virus on it. In fact, the virus can live on countertops, doorknobs, hands, and clothing for up to 7 hours. Handwashing and proper cleaning are the best ways to help prevent the spread of RSV. Synagis (palivizumab) is an immunoglobulin injection that helps prevent RSV. Synagis is not a vaccine, but it helps to prevent or lessen the symptoms should the infant contract RSV. The National Perinatal Association and the American Academy of Pediatrics each offer dosing guidelines. Follow the dosing guidelines of your institution.

## **Bibliography**

- American Academy of Pediatrics Committee on Infectious Diseases, & American Academy of Pediatrics Bronchiolitis Guidelines Committee. (2014). Updated guidance for palivizumab prophylaxis among infants and young children at increased risk of hospitalization for respiratory syncytial virus infection. *Pediatrics, 134*(2), 415–420.
  Bracht, M., Heffer, M., & O'Brien, K. (2005). Preventing respiratory syn-
- cytial virus (RSV) infection. *Advances in Neonatal Care, 5*(1), 50–51.



- Centers for Disease Control and Prevention. (2013). Respiratory syncytial virus infection (RSV). Retrieved from www.cdc.gov/rsv
- Goldstein, M., Merritt, T. A., Phillips, R., Martin, G., Hall, S., Yogev, R., & Spitzer, A. (2014). National Periantal Association 2015 respiratory syncytial virus (RSV) prevention guideline. *Neonatology Today*, *G*(11), 1–11.



## **Respiratory Syncytial Virus: Information for Parents**

*Respiratory syncytial virus*, or RSV, is a virus that can make your baby sick. There are times of the year when your baby has more chance of being around people with the virus, usually from fall through spring (October through March). RSV can cause a mild cold, but it also can lead to a more serious sickness and a stay in the hospital. Babies born early and children younger than 2 years have the greatest risk for RSV. This is because babies born early, even those who did not need any help breathing while they were in the neonatal intensive care unit, do not have fully formed lungs. Also, their bodies may not be able to fight RSV and other viruses.

## Symptoms of RSV

RSV usually causes a mild cold with a runny nose and fever. However, RSV also can make your baby very sick. Call your baby's provider right away if your baby has any of these symptoms:

- cough that does not go away, gets worse, or produces yellow, green, or gray mucus
- wheezing (a high-pitched whistling sound when breathing)
- trouble breathing or breathing faster than usual
- blue color on the lips or around the mouth
- high fever
- thick nasal discharge that is yellow, green, or gray.

There are ways to protect your baby. RSV is very easy to spread through coughing and sneezing. The virus can live on countertops, doorknobs, hands, and clothing for up to 7 hours. During RSV season, wash your hands well and avoid crowded places (likes malls and churches) and school-age children. Speak with your baby's provider about your day care plans. You might have to tell other people what RSV is and how dangerous it can be for your baby. Your baby's provider can help with this by giving you some handouts to help you discuss RSV with friends and family.

Handwashing and keeping your baby away from sick people is a good way to protect your baby. There also is a medication that can help lower your baby's risk of getting an infection. Synagis (palivizumab) is an immunoglobulin injection that helps prevent RSV. Synagis is not a vaccine, but it helps prevent hospitalization due to RSV. It is indicated for preterm infants (less than or equal to 35 weeks gestational age), children with bronchopulmonary dysplasia, and children with certain forms of congenital heart disease.

More resources can be found here: www.nationalperinatal.org/rsv\_awareness www.infanthealth.org/rsv www.littlelungs.com

## Protecting your baby from Respiratory Viruses:

What parents need to know this RSV and flu season



RSV (Respiratory Syncytial Virus) and flu infections affect the lungs and can cause serious breathing problems for children and babies.

Certain diagnoses - like prematurity, chronic lung disease, heart conditions - can make children and babies more vulnerable for serious complications.





You can limit the spread of these viruses by washing your hands often with soap & water or using alcohol-based hand sanitizer.

The fewer germs your baby is exposed to, the less likely they are to get sick. Limit visitors. Avoid crowds. Stay away from sick people





Immunizations save lives. Get your flu shots and stay up-to-date with your family's vaccinations, especially pertussis.

There is no vaccine for RSV, but monthly antibody shots during RSV season can help protect the most vulnerable babies. Talk to your docto





www.nationalperinatal.org/rsv

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