

# Respiratory Syncytial Virus (RSV): What Parents Need to Know

Almost all children get a respiratory syncytial virus (RSV) infection at least once before they are 2 years of age. Most children have mild symptoms. But babies and some children can get very sick from RSV. Here is information from the American Academy of Pediatrics about RSV, including how to protect babies and young children from RSV infection.

## What Is RSV?

RSV is a common respiratory virus. RSV can infect the lungs and other organs involved in breathing. *Syncytial* is pronounced sin-SISH-ul.

### **RSV Infection in Children**

Children at greater risk for severe illness from RSV include

- Babies born early (preterm birth)
- Babies up to 12 months of age, especially babies younger than 6 months
- Children younger than 2 years with medical conditions, including conditions that affect the lungs, heart, and immune system

According to the Centers for Disease Control and Prevention (CDC), RSV is the leading reason that babies are hospitalized in the United States.

# When and How RSV Is Spread

Most illness caused by RSV occurs between late fall and early spring, but this can vary depending on where you live. RSV is spread by direct or close physical contact. It enters the body through the nose or eyes, usually from contact with infected saliva, mucus, or nasal discharge.

# **RSV Symptoms**

For most healthy children, RSV usually causes mild, cold-like symptoms. Symptoms can last 7 to 14 days, and symptoms are typically worse on days 3 through 5 of illness.

## Cold symptoms include

- Fever (temperature of 100.4 °F/38°C or higher)
- Cough (dry or wet sounding)
- Congestion
- Runny nose
- Sneezing
- Fussiness
- Poor feeding

RSV infection can lead to bronchiolitis or pneumonia. Bronchiolitis is inflammation of the small airways in the lungs. Pneumonia is an infection of the lungs.

#### **Bronchiolitis symptoms include**

- Difficult or rapid breathing
- Flaring of the nostrils and head bobbing with breathing
- Rhythmic grunting during breathing
- Belly breathing, tugging between the ribs and/or the lower neck
- Wheezing



View the video to see what tugging between the ribs looks like and listen to what RSV sounds like.

# Ways to Protect Babies and Young Children From RSV

You can choose one of the following options to protect babies and young children from RSV:

- **RSV vaccine for pregnant people** may be given at 32 through 36 weeks of pregnancy if their baby will be born during RSV season. The vaccine reduces the risk for RSV hospitalization of babies in their first 6 months after birth.
- **RSV immunization called** *nirsevimab* is an immunization for all babies who are younger than 8 months and were born during or right before the RSV season. It may be given at the same time as or in between your baby's routine immunizations. Nirsevimab has been shown to reduce the risk for RSV-related hospitalizations and health care visits. The protection may last throughout a typical RSV season. It may be recommended for some children up to 19 months who are at higher risk for serious illness during RSV season.

Note: Check with your child's doctor about what's best for your child. Most babies will likely only need protection from either the RSV vaccine for pregnant people or nirsevimab but not both. Visit www.HealthyChildren.org/rsv for the latest vaccine, immunization, and product recommendations.

# How to Keep Babies and Families Healthy

Here are ways to keep babies and families healthy.

- Stay up to date on vaccines. Keep your children up to date on their immunizations. Immunizations are also important for all family members, including annual flu and COVID immunizations as well as Tdap vaccine (to protect against whooping cough) for adults who are around babies. Also, there is an RSV vaccine for adults 60 years and older (older adults are at higher risk for severe RSV infection).
- Reduce your baby's exposure to germs. Limit exposure to crowds, other children, and anyone with colds. Keep children home from school or child care when they are sick, and teach them to cover their coughs and sneezes.
- **Prevent the spread of germs.** Remind children to practice good daily hand hygiene. Use soap and water and scrub for at least 20 seconds. Also, regularly disinfect objects and surfaces in your home.
- **Keep your baby away from smoke from tobacco or other substances.** Secondhand smoke can harm babies, including putting them at risk for severe viral respiratory infections.
- Feed your baby breast milk. It has unique antibodies to prevent and fight infections.

#### **RSV Treatment**

There is no specific treatment for RSV. Also, medicines like steroids and antibiotics do not help with RSV. But you can help ease mild RSV symptoms.

# **How to Ease Mild RSV Symptoms**

Here are ways to help children with mild RSV feel more comfortable.

- Nasal saline with gentle suctioning to allow easier breathing and feeding.
- Cool-mist humidifier to help break up mucus and allow easier breathing.
- Fluids to prevent dehydration (loss of body fluids). For babies, a stuffy nose may make it difficult to breathe and fed. Try to suction the baby's nose before trying to breastfeed or bottle-feed. If it's difficult for the baby to feed at the breast, try giving them expressed breast milk from a cup or bottle. Breastfed babies do not need water or formula.
- Acetaminophen or ibuprofen (if the child is older than 6 months), if recommended by the child's doctor, to help with fevers. Always avoid aspirin or cough and cold medicine.

## When to Call the Doctor

Call your child's doctor right away if your child

- Has symptoms of bronchiolitis (see RSV Symptoms).
- Has symptoms of dehydration (fewer than 1 wet diaper every 8 hours).
- Has changes to the color of their tongue, lips, or skin; their skin has a grayish or blueish color.
- Is not as active or alert as usual.
- Has symptoms that worsen or do not start to improve after 7 days.
- Has a fever (with a rectal temperature of 100.4 °F/38°C or higher) for babies younger than 3 months (12 weeks).
- Has a fever that rises above 104°F/40°C repeatedly for any child.
- Has poor sleep or fussiness, chest pain, or ear tugging/drainage.

Visit HealthyChildren.org for more information.

The American Academy of Pediatrics (AAP) is an organization of 67,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of all infants, children, adolescents, and young adults.

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The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.



