Patient Information Service

Women and children’s business unit

Respiratory Syncytial Virus (RSV) prevention
**What is RSV?**

RSV stands for ‘Respiratory Syncytial Virus’. This is a virus which causes cold-like symptoms but can cause breathing difficulties if the lower respiratory tract (the lungs) become involved.

**What time of year is RSV most common?**

Most children become infected between October and March each year. However, the virus is around all year.

**Is RSV easy to catch?**

RSV passes easily between people. It is carried on hands and this is a particularly common way of spreading the virus. However, as with an ordinary cold, the virus can be spread in droplets produced by coughing or sneezing and by children coming into contact with infected surfaces (sharing a cup, plates, biscuits etc) then placing their fingers or infected material in their mouth. Because of this, it is likely to spread more easily in places where there are groups of young children such as in nurseries, day care centres, GP waiting rooms and schools or any crowded public place. If your baby is at high risk try to avoid crowded places where there are lots of other young children.

**Is my baby at risk of catching the virus?**

RSV affects a large proportion of all babies. Around two thirds of all babies get RSV before they are one year old. If your baby was born prematurely, is prone to getting lung infections or was born with a heart problem, he/she could be at greater risk of being made more seriously ill if he/she became infected with RSV.
This is particularly so for babies who have been on oxygen supplements or are currently receiving oxygen supplements. Their underdeveloped lungs are much less able to withstand infection so RSV is more likely to cause serious respiratory problems for them and they are more likely to need hospital treatment.

**Is RSV infectious?**

Yes it is and the virus can survive for several hours on toys and work surfaces making hand spread all the more common. Therefore, extra care should be taken washing and drying hands during the RSV season.

**What can I do to reduce the risk of my baby catching RSV?**

There are several things you can do to reduce the risk of RSV infection. Parents, relatives and friends can reduce the chance of your baby catching RSV by:

- Washing hands thoroughly with soap and warm water and drying them well before and after touching the baby
- Disposing of used tissues and other handkerchiefs appropriately
- Cleaning and disinfecting baby toys
- Being aware that kissing the baby can spread RSV infection
- Keep children and adults with coughs, colds and runny noses away from your baby
- Make sure your baby is not exposed to smoking; this can make the symptoms worse if the baby catches the virus.
How can I tell if my baby has RSV?

In the early stages, RSV has similar symptoms to a common cold with snuffles, blocked nose, sneezing, fever and possibly an ear infection. After three to five days symptoms get worse as the virus spreads to the lungs. If the lungs are affected, one or more of the following symptoms would develop:

- Worsening coughing
- Wheezing – a sort of whistling sound during breathing
- Difficulty or increasing distress with rapid breathing
- Difficulty with feeding and drinking because of the distress with breathing.

What should I do if my baby becomes unwell with these signs?

See your GP. You should give your baby paediatric Paracetamol suspension to reduce the fever but if your baby is becoming distressed with breathing difficulties, he/she may need to be admitted to hospital. Admission is more likely if breathing difficulties or distress is noticed in a baby who is regarded at particular risk – for example, a baby who was dependent on additional oxygen for several months or who may have gone home receiving extra oxygen.

How long can RSV infections last?

In most babies RSV infection lasts between one and three weeks.
Treatment for RSV symptoms if your baby is at home

As explained above, your baby should be given paediatric Paracetamol suspension if he/she develops a fever and should be encouraged to drink more often. Sometimes your doctor may wish to try an inhaled drug to reduce the wheezing.

Will my baby need to be admitted to hospital?

This will depend on how badly he/she is affected by the virus. The reason babies with RSV are admitted to hospital is because of increasing breathing difficulties which may mean they need to be given oxygen and, sometimes, breathing support, or because they have become too distressed to drink. You should always encourage your baby to drink extra fluids/juice whenever feverish or at the first signs of a cold. If admitted to hospital, fluid may be given via a small tube through the nose to the stomach or directly into a vein (intravenous).

Treatment for RSV symptoms if your baby is in hospital

Your baby will need fluids, paediatric Paracetamol suspension for fever, possibly oxygen and possibly respiratory support if severe breathing problems develop. Drugs to help with the breathing may be given and can sometimes help.

If my baby has already had an infection with RSV, can he/she become infected again?

Unfortunately being infected once does not protect your baby
from becoming infected again with RSV. However, re-infection with RSV usually results in a less severe infection. Babies with underlying lung or heart problems may still need to come into hospital with a second infection.

**Will RSV infection have any long-term effects on my baby?**

Again, this will depend on what problems, if any, your baby had before the infection.

RSV is a major cause of the illness called bronchiolitis which is associated with the baby making a wheezing sound as he/she breathes. After recovering from an RSV lung infection, babies often remain wheezy or become wheezy with subsequent ‘colds’. However, there is no good evidence to suggest that RSV leads on to asthma in later childhood.

If you have further queries about RSV, it is important that you discuss them with your child’s specialist, with the staff on the neonatal or paediatric unit or with your GP.

**Long-term prevention**

If your baby was born prematurely and developed bad lung disease or if he/she was born with a heart condition, with cystic fibrosis or was shown to have acquired HIV or severe immune deficiency, then you should discuss with your specialist before the beginning of the RSV season (October) whether there are any preventative strategies that have been shown to be of benefit to babies with similar problems to your own baby’s.
Immune prevention against RSV

If your baby is considered to be at risk of getting significant breathing problems from RSV you can be offered prevention by giving immunisations (immunoglobulins) against the RSV virus. This involves giving an injection of Palivizumab (Synagis) every 28 days from October for five doses.

The injections will be administered by a nurse in the paediatric outpatient department, Carlingford centre (Yellow zone), Southend University Hospital. Parents will need to provide an accurate weight for their child in advance of each injection – you should arrange this with your health visitor or paediatric community nurse.

Common side-effects of the injection

Common side-effects include fever, injection site reaction like swelling/redness and general fretfulness/irritability. Your child will be observed in the paediatric outpatient department for up to one hour after each immunisation to check that no immediate reaction occurs.

Routine immunisations

Infants receiving RSV prevention with Palivizumab (Synagis) can be given all routine immunisations at the normal times.

Further information

You will be able to discuss any further questions with the nurse in the paediatric outpatient department or please ask to discuss any concerns with a doctor.
Patient Information Service

If this leaflet does not answer all of your questions, or if you have any other concerns please contact your GP surgery or call NHS 111 for further advice.

NHS 111 service is the NHS non-emergency number. It’s fast, easy and free. Call 111 to speak to a highly trained adviser, supported by healthcare professionals. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

www.southend.nhs.uk

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