



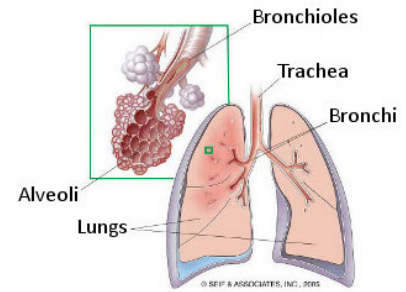
Patient Education:

Respiratory Syncytial Virus, Pediatric

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Respiratory Syncytial Virus, Pediatric

Respiratory syncytial virus (RSV) is a common childhood viral illness and one of the most frequent reasons infants are admitted to the hospital. It is often the cause of a respiratory condition called bronchiolitis (a viral infection of the small airways of the lungs). RSV infection usually occurs within the first 3 years of life but can occur at any age. Infections are most common between the months of November and April but can happen during any time of the year. Children less than 2 year of age, especially premature infants, children born with heart or lung disease, or other chronic medical problems, are most at risk for severe breathing problems from RSV infection.



CAUSES

The illness is caused by exposure to another person who is infected with respiratory syncytial virus (RSV) or to something that an infected person recently touched if they did not wash their hands. The virus is highly contagious and a person can be re-infected with RSV even if they have had the infection before. RSV can infect both children and adults.

SYMPTOMS

- Wheezing or a whistling noise when breathing (*stridor*).
- Frequent coughing.
- Difficulty breathing.
- Runny nose.
- Fever.
- Decreased appetite or activity level.

DIAGNOSIS

In most children, the diagnosis of RSV is usually based on medical history and physical exam results and additional testing is not necessary. If needed, other tests may include:

- Test of nasal secretions.
- Chest X-ray if difficulty in breathing develops.
- Blood tests to check for worsening infection and dehydration.

TREATMENT

Treatment is aimed at improving symptoms. Since RSV is a viral illness, typically no antibiotic medicine is prescribed. If your child has severe RSV infection or other health problems, he or she may need to be admitted to the hospital.

HOME CARE INSTRUCTIONS

- Your child may receive a prescription for a medicine that opens up the airways (*bronchodilator*) if their health care provider feels that it will help to reduce symptoms.
- Try to keep your child's nose clear by using saline nose drops. You can buy these drops over-the-counter at any pharmacy. Only take over-the-counter or prescription medicines for pain, fever, or discomfort as directed by your health care provider.
- A bulb syringe may be used to suction out nasal secretions and help clear congestion.
- Using a cool mist vaporizer in your child's bedroom at night may help loosen secretions.
- Because your child is breathing harder and faster, your child is more likely to get dehydrated. Encourage your child to drink as much as possible to prevent dehydration.
- Keep the infected person away from people who are not infected. RSV is very contagious.
- Frequent hand washing by everyone in the home as well as cleaning surfaces and doorknobs will help reduce the spread of the virus.
- Infants exposed to smokers are more likely to develop this illness. Exposure to smoke will worsen breathing problems. Smoking should not be allowed in the home.
- Children with RSV should remain home and not return to school or daycare until symptoms have improved.
- The child's condition can change rapidly. Carefully monitor your child's condition and do not delay seeking medical care for any problems.

SEEK IMMEDIATE MEDICAL CARE IF:

- Your child is having more difficulty breathing.
- You notice grunting noises with your child's breathing.
- Your child develops retractions (the ribs appear to stick out) when breathing.
- You notice nasal flaring (nostril moving in and out when the infant breathes).
- Your child has increased difficulty with feeding or persistent vomiting after feeding.
- There is a decrease in the amount of urine or your child's mouth seems dry.
- Your child appears blue at any time.
- Your child initially begins to improve but suddenly develops more symptoms.
- Your child's breathing is not regular or you notice any pauses when breathing. This is called apnea and is most likely to occur in young infants.
- Your child is younger than three months and has a fever.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

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