

Respiratory Syncytial Virus (RSV): What You Need to Know

Respiratory syncytial virus (RSV) is a very common illness that affects the airways in babies and children. In this handout, learn about RSV, including what it is and the symptoms most commonly seen in babies and children. You will also learn how doctors diagnose and treat RSV, possible complications of RSV and when to call the doctor

What is respiratory syncytial virus (RSV)?

Respiratory syncytial virus (RSV) is a common illness that affects the **airways** (nose, throat and lungs). In older children and teenagers, RSV can be mild and causes cold-like symptoms. In babies and young children, RSV can be very serious. RSV is most common in the fall and winter months.

Who is more likely to develop severe RSV?

The following are more likely to develop severe cases of RSV:

- Premature babies
- Very young babies, especially those age 6 months or younger
- Children under age 2 years with **chronic** (long-term) lung conditions or **congenital heart disease** (heart disease that is present at birth)
- Children with weakened immune systems (system in the body that helps fight germs and illness)
- Children with **neuromuscular disorders** (disorders that affect how the nervous system and muscles work together), including children who have trouble swallowing or clearing **mucus** (thick, sticky liquid that lines the lungs, throat, mouth and nose) on their own

How is RSV spread?

RSV is spread in the following ways:

- If a person with RSV coughs, sneezes or blows their nose near you
- Touching, kissing or shaking hands with someone who has RSV
- Touching shared surfaces or objects also touched by someone with RSV, such as a doorknob or toys

RSV can spread quickly through enclosed, shared spaces, such as day care centers, schools or crowded households.

What are the symptoms of RSV in children?

Symptoms of RSV depend on your child's age. Symptoms usually appear 2-8 days after being exposed to RSV.

Birth – 6 months

- **Apnea** (pauses in breathing)
- Decreased appetite or poor feeding, leading to fewer wet diapers and dehydration
- Decreased **activity levels** (not as active as usual)
- Fussiness or irritability
- Trouble breathing or working hard to breathe
- Visible **chest retractions** (when the chest appears to sink in just below the neck or breastbone with each breath)
- Breathing very quickly
- Shortness of breath
- **Nasal flaring** (when the edges of the nostrils flare outward when your baby breathes out)
- **Wheezing** (a whistling sound when breathing)
- In severe cases, **cyanosis** (bluish color in the skin caused by lack of oxygen)

6 months – 5 years

- Trouble breathing or working hard to breathe
- Breathing very quickly
- Shortness of breath
- **Nasal flaring** (when the edges of the nostrils flare outward when your baby breathes out)
- **Wheezing** (a whistling sound when breathing)
- **Low-grade fever** (fever between 100.4°F-102.2°F/38°C-39°C)
- In severe cases, **cyanosis** (bluish color in the skin caused by lack of oxygen)

Age 5 years and older

- Cold-like symptoms, such as stuffy nose, **low-grade fever** (fever between 100.4°F-102.2°F/38°C-39°C) or **barking cough** (a cough that sounds like a seal barking)

How do doctors diagnose RSV in children?

Doctors can diagnose RSV by taking a swab of fluid from your baby/child's nose or through a blood test.

How do doctors treat RSV in children?

Most cases of RSV go away on their own in 1-2 weeks. If your child needs treatment for RSV, the care team will help figure out which treatments can help.

Treatment for RSV may include:

- Acetaminophen (Tylenol®) or ibuprofen (Motrin® or Advil®) to reduce fever. **(Ibuprofen should only be used for infants over 6 months.)**
- Fluids to keep your child hydrated
- In severe cases, hospitalization (especially for babies age 6 months or younger or for children who are having trouble breathing)

Antibiotics and bronchodilators (medications that help widen the airways in the lungs) do not help treat RSV. If your baby/child has asthma, ask their care team if a bronchodilator may help with their breathing while they recover from RSV.

What are possible complications of RSV in children?

Possible **complications** (medical concerns that occur during a disease or after a procedure or treatment) of RSV are most common in babies age 12 months and younger. Complications may include:

- **Dehydration** (low levels of fluids caused by not drinking enough fluid or losing more fluid than your child takes in)
- **Bronchiolitis** (inflammation of the bronchioles, or the small airways in the lungs)
- **Pneumonia** (an infection that causes inflammation of the air sacs, or pouches, that surround and protect the lungs)
- **Lung failure** (a condition in which the lungs cannot pass enough oxygen through the blood, which makes it hard to breathe)

When should I call the doctor?

If your baby has trouble breathing, call 911 or go to the closest emergency room.

Call the doctor if your child shows any of the following symptoms:

- If your baby/child's symptoms get worse or do not get better after a few days
- Trouble breathing
- Shortness of breath
- High fever
- Bluish color to the skin

You can also call the doctor if you're concerned about your baby/child's risk of RSV or RSV symptoms.