PROVIDER HEALTH ADVISORY

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Off-Season Respiratory Syncytial Virus

Respiratory syncytial virus (RSV) is the most common cause of bronchiolitis and pneumonia in infants and a cause of severe disease in adults older than age 65 years. Although RSV typically circulates during the winter, RSV infections have been increasing this summer throughout the United States; compared to historical summer levels of <1% of respiratory illness specimens in California testing positive for RSV, 6.3% of specimens were positive during the week ending July 31, 2021, a level usually not seen before late November.

Persons with RSV infection typically have fever, cough, wheezing and runny nose. Infants and young children may be irritable, lethargic, feed poorly and have no fever. Consider testing for RSV in patients with respiratory symptoms, especially those who test negative for COVID-19.

Palivizumab prevents severe RSV illness in infants and young children who are at high risk. The American Academy of Pediatrics (AAP) has recently published interim guidance for using palivizumab during the current increase in RSV infections to supplement its standard recommendations for prophylaxis. It is unknown how long this increased activity will continue.

As a reminder, persons with acute respiratory symptoms should stay home while ill, especially those who work in health care, childcare, or long-term care.

For More Information

- Interim Guidance for Use of Palivizumab Prophylaxis to Prevent Hospitalization from Severe Respiratory Syncytial Virus Infection During the Current Atypical Interseasonal RSV Spread (aap.org)
- Updated Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection | American Academy of Pediatrics (aappublications.org)
- CDC-HAN-443-Increased-Interseasonal-RSV-Activity-06.10.21.pdf