

Respiratory Syncytial Virus (RSV)



What Is It?

RSV is a viral infection of the respiratory system. It is one of the most frequent causes of lower respiratory infection (bronchitis or pneumonia) in infants and children under two years of age. It occurs commonly among children in child care programs. (I know you said this below but I feel it needs to be said up front) In children age three or older, it frequently causes upper respiratory tract infection, including otitis media. RSV disease can range in severity from mild to life threatening or even fatal. Children who are in the first year of life, who have or weakened immunity due to chronic health issues such as cardiac or pulmonary disease, or who were born prematurely, are most likely to experience severe RSV disease.

What Are the Symptoms?

In some children, symptoms appear similar to a cold, with nasal stuffiness and discharge, and cough. However, RSV can also appear as the more serious manifestations described above. There is often fever, and there can be wheezing or croup. In adults who have experienced repetitive infections, such as adults who work in child care, RSV infection may appear identical to a mild cold. Severe cases of RSV infection may require hospitalization which sometimes involves breathing assistance, and in high-risk cases, administration of antiviral drugs.

Who Gets It and How?

RSV is highly contagious and spreads from person to person. Once one child in your care is infected, spread to others is rapid and inevitable. RSV is spread by direct contact with infectious secretions or toys, surfaces, and other objects smeared or contaminated by such secretions. Airborne droplets from a cough or sneeze may also spread infection.

RSV infection occurs throughout the year, but widespread outbreaks occur mostly in the winter months, peaking in January and February. RSV is contagious when the virus is shedding in discharge from the mouth and nose. In young infants, this period most frequently lasts one to two weeks, but may sometimes be three weeks or longer. In older children and adults, shedding of the virus is for three to seven days.

When Should People with this Illness Be Excluded?

Children or staff with severe RSV disease will initially feel too unwell to attend. Once the fever has is gone and a person feels better, there is no reason to stay away from child care. During an outbreak of RSV in a child care setting, most children and staff will be exposed before there is any occurrence of symptoms. Thus, there is no need to exclude children who have persistent mild respiratory symptoms, but are otherwise feeling well.

Is RSV a Problem for Pregnant Women?

There is no evidence that infection with RSV causes complications to the mother or the fetus in pregnancy.

How Can I Limit the Spread of RSV?

- Make sure that all children and staff use good hand washing practices.
- Teach children to cough into their elbow and away from people.
- Wipe noses with clean disposable tissues, dispose of them properly and wash your hands.
- Don't share food, bottles, toothbrushes or toys that can be put in the mouth.
- Play outdoors often. Let fresh air into your program daily.
- Disinfect surfaces of common areas (tables, countertops) at least daily.



California Childcare Health Program

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