VOICES





ARE ALL INFANTS AT RISK OF SEVERE RSV DISEASE?



SPREADING INFORMATION,



FREQUENTLY ASKED QUESTIONS ABOUT RSV.

Severe RSV disease has the potential to hospitalize ANY infant (healthy and born at term, premature, or with underlying conditions) in their first season

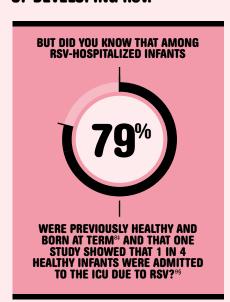
In most cases, RSV causes cold-like symptoms, but it may also progress to lung infections (bronchiolitis and pneumonia).23

Most cases of bronchiolitis are caused by RSV⁴

VISIT RETHINKRSV.CA TO LEARN MORE



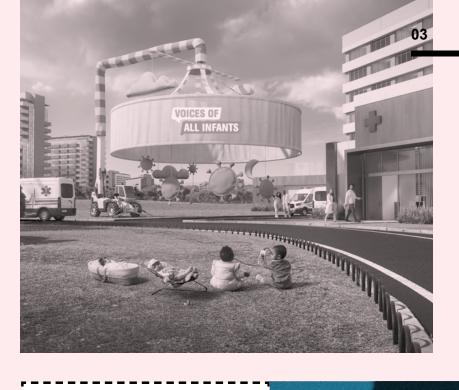
IT IS WELL KNOWN THAT
INFANTS BORN PREMATURELY
OR THOSE WITH CERTAIN
UNDERLYING CONDITIONS
ARE AT THE GREATEST RISK
OF DEVELOPING RSV.²



IS IT TIME TO RETHINK RSV?

Severe RSV disease – a potentially life-threating illness – can strike any child. 1.9 Any infant, whether healthy and born at term, premature, or with underlying conditions, can be hospitalized in their first season. 1

It's time to raise awareness of RSV and its threat to ALL infants.



ARE ALL INFANTS AT RISK FROM SEVERE RSV DISEASE?

LET'S TAKE A CLOSER LOOK AT SOME STATISTICS RSV is a seasonal virus that infects around **90%** of infants and young children by the age of 2 years.⁵ In most cases, RSV causes mild, cold-like symptoms, but it may also progress to severe lung infections (bronchiolitis and

pneumonia).²³ If an infant or young child has bronchiolitis or pneumonia, RSV is a likely cause.³ It is a leading cause of hospitalization in infants under 2 years in Canada.^{5*} In a study of RSV hospitalizations in Alberta, 95.5% of infants

admitted to the ICU. The average length of stay in the hospital was 5.7 days overall, and 6.5 days for patients who went to the ICU.7†

96%
OF FULL-TERM INFANTS WHO WERE HOSPITALIZED WITH RSV INFECTION REQUIRED

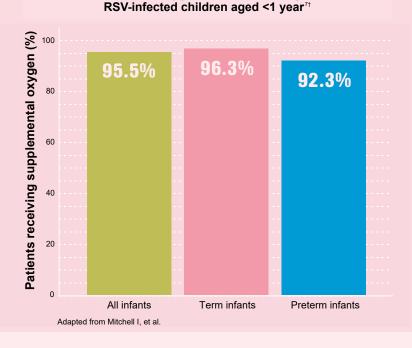
received supplemental

oxygen and 13.4% were

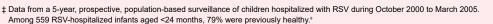
WERE HOSPITALIZED WITH RSV INFECTION REQUIRED SUPPLEMENTAL OXYGEN DURING THEIR STAY^{7†}



- * Data extracted from the Canadian Discharge Abstract Database from 2003 to 2014 using a regression model to estimate respiratory hospitalizations attributable to influenza, RSV and other respiratory viruses.⁶
- † A prospective, observational, survey-based analysis of the burden of RSV. Infants included in the study were 1 year of age and were hospitalized with a confirmed diagnosis of RSV/LRTI (N=67)."



Use of supplemental oxygen in Alberta among hospitalized,



[§] An observational retrospective cohort study of preterm and term infants <6 months of age that assessed the costs of RSV hospitalizations, severity, and costs for the 2011 to 2014 and 2014 to 2017 RSV seasons.



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WHAT WE KNOW WE CAN **DO TO** HELP

While most cases of RSV lead to mild illness,2 severe RSV disease can strike any child.1 But we can take steps to help limit infants from coming into contact with the virus in the first place.

Read on for healthcare body recommendations regarding hygiene measures to help prevent RSV transmission and disease, and how to recognize symptoms of RSV disease, including manifestations such as wheezing.10



INFORM ABOUT RSV AND RSV DISEASE:

- An infant's first RSV season (typically November to March) poses a potential threat to their health^{11,12}
- Infants can catch RSV from contaminated surfaces and close contact with infected people^{13,14}
- RSV often spreads to infants via contact with infected older siblings or other children¹³
- Help parents to recognize early symptoms of RSV and know when to seek urgent medical attention¹⁰

FURTHER DETAILS ABOUT HYGIENE MEASURES AND HOW TO HELP REDUCE THE SPREAD **OF THE VIRUS:**

- Try to avoid close contact between the infant and siblings, friends and relatives with cold symptoms¹¹
- Wash hands often with soap for 20 seconds to prevent transmission¹¹
- Cover coughs and sneezes with a tissue or upper arm sleeve not with hands15
- Regularly clean and disinfect surfaces that infants touch or share with siblings¹⁵











CA CA ON RSV





- Q: IF MOST CASES OF RSV ARE MILD AND SELF-LIMITING, WON'T THE MAJORITY OF INFANTS RECOVER ON THEIR OWN OR WITH SOME HELP FROM A HEALTHCARE PROFESSIONAL?
- **A:** While it is true that the majority of infant cases of RSV result in mild illness that can be managed at home or by symptomatic care, RSV remains a leading cause of respiratory hospitalization in Canadian infants under 2 years of age. **

Severe RSV disease may develop into bronchiolitis and pneumonia,³ and as many as 1–2% of infants younger than 6 months of age with RSV infection may need to be hospitalized.² Given the potential for severe RSV disease to affect ANY infant in their first season,¹ we should remain vigilant for the health of all infants.



- Q: HOW DOES RSV COMPARE WITH OTHER INFECTIOUS DISEASES IN INFANTS, FOR EXAMPLE INFLUENZA?
- A: RSV is one of the most common causes of childhood illness, alongside influenza.² In one Canadian study, infants under 2 years were 14 times more likely to be hospitalized due to RSV than influenza.⁶*
- Q: DOESN'T RSV INFECTION PREDOMINANTLY CAUSE DISEASE IN PREMATURE INFANTS OR THOSE WITH PRE-EXISTING CONDITIONS?
- A: Infants who are born prematurely or who have existing health conditions are at greater risk of developing severe RSV disease.² However, all infants are potentially at risk of developing severe RSV disease.¹ In fact, in one study, the majority (79%) of infants who were hospitalized from RSV were born at term and otherwise healthy.^{8‡}



Q: IN MOST CASES, I AM LIMITED TO MANAGING SYMPTOMS.

SO HOW DO I HAVE CONVERSATIONS WITH PARENTS ABOUT RSV, WITHOUT CAUSING WORRY?

A: Almost all children will experience their first RSV infection by two years of age, so it is something parents should be informed about.¹¹ Patients should be aware of how RSV is transmitted and be able to spot signs of severe disease and know when to seek medical assistance.

Since severe RSV disease can potentially affect any infant,¹ remind parents of the simple ways they can help prevent RSV hospitalizations, such as limiting contact with siblings and other children with respiratory tract infections.¹¹

Armed with knowledge, parents can take steps related to hygiene to help reduce the risk of their infant contracting RSV and will know to act quickly if they suspect their child is becoming seriously ill.

0: HOW IS RSV TRANSMITTED?

A: RSV is mostly spread by children, due to a combination of factors. Children have higher infectious viral loads than adults, with longer durations of infection. Additionally, children are more likely to spend time with their peers who are more susceptible to infection with RSV.¹³ Research shows that infants with older siblings are more likely to become infected with RSV than firstborns¹⁶ and that young children may continue to spread the virus for up to 4 weeks after their own symptoms have resolved.¹⁴

RSV can spread when an infected person coughs or sneezes and infected respiratory droplets enter the body of another person through their eyes, nose, or mouth. The virus can also be transmitted by touching a contaminated surface, I ike a doorknob, and then touching the face before washing the hands.¹⁴



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