RSV: The ‘Other’ Respiratory Virus

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Cold and flu season has begun, and lots of us won’t survive it without at least one bout of sniffles or a hacking cough.

If you find yourself suffering with these symptoms, there’s another culprit that may be to blame: respiratory syncytial virus, or RSV.

RSV infects the lungs and breathing passages, causing symptoms like a stuffy or runny nose, sore throat, mild headache, cough, fever, and loss of appetite. Most infections are mild, but the virus can lead to severe illness for infants (especially preemies), the elderly, and people with poor immune systems.

Like the flu and common cold, RSV infections are extremely contagious. They spread through droplets produced when an infected person coughs or sneezes. The virus can live on hard surfaces like doorknobs and countertops for many hours.

RSV Reports on the Rise

RSV infections often occur in seasonal epidemics. In Montana, the typical season could begin as early as December and last into late spring. Last season was a busy one: 1,510 positive tests for the virus were reported to the state Department of Public Health and Human Services.

In Lewis and Clark County, we’ve seen an increase in RSV in the past decade. From 2008 to 2010, an average of 31 infections a year were reported. From 2011 to 2013, that number more than tripled to 97 infections. It’s not clear whether the disease is becoming more common or medical providers are testing for it more often.

People of any age can become infected with RSV. It’s one of the most common causes of childhood illness. Almost all kids catch it at least once before their second birthday. It can spread rapidly through schools and daycare centers.
So you may be thinking, why worry about it. It’s just another rite of childhood—unpleasant but not life-threatening.

The problem is, RSV can cause serious complications like pneumonia and bronchiolitis among those who are vulnerable. About 75,000 to 125,000 children under age 5 are hospitalized due to RSV each year.

Studies have indicated a connection between RSV infection during infancy and development of childhood asthma. The exact relationship between the two – whether RSV causes asthma – has yet to be determined.

**Preventing RSV Infections**

I believe we all have an obligation to help protect the vulnerable among us. That includes taking precautions to prevent the spread of RSV. Fortunately, the steps to do so are fairly simple. They also may sound familiar, since they’re similar to precautions against many other infectious diseases:

- Handwashing is key. Wash your hands often with soap and water, especially after contact with anyone who has cold-like symptoms.
- Always cover coughs and sneezes.
- Avoid sharing cups and eating utensils with others.
- Keep infected school-aged children away from younger siblings, especially infants, until symptoms pass.
- Don’t kiss anyone with cold-like symptoms.
- Clean potentially contaminated surfaces.

There’s no specific treatment for RSV. If you or your child has symptoms, be sure to rest and drink plenty of fluids. A cool-mist vaporizer can help to keep the air moist and airways from drying out. That will help keep nasal mucus from thickening.

If your child is too young to blow his or her nose, use a bulb syringe to remove sticky nasal fluids. Treat fever with a nonaspirin fever medicine like acetaminophen. Children with viral illnesses should never take aspirin because it has been associated with Reye syndrome, a life-threatening disease.

Call your doctor if your child develops any of these symptoms:

- High fever
- Thick nasal discharge
- A cough that gets worse or produces yellow, green, or gray mucus
- Signs of dehydration
- Trouble breathing

Seek immediate help if your child is having trouble breathing or is breathing very fast or if his or her lips or fingernails look blue.

Let’s all take steps to stop RSV in its tracks.