

Parent Information

The UK government has lifted all Covid-19 restrictions. This means that people are able to mix without face masks and social distancing. These protective measures, although put in place to prevent the spread of COVID-19, also prevented the spread of usual winter viruses which we saw in much lower numbers than usual throughout the pandemic. However, since the easing of Covid -19 restrictions began, these viruses have started to appear again much earlier in the year and we are seeing winter viruses in the Summer months.

One such virus is the Respiratory Syncytial Virus (RSV). RSV causes a mild cold-like illness in most children and can be treated with rest and care at home. However, some babies and young children with health problems, such as those born premature, can become very unwell from RSV. Good hygiene habits can reduce the chance of your child getting RSV or passing it on to others.

What is RSV?

RSV is the most common cause of respiratory and breathing infections in children. It is a virus that causes infection of the lungs and breathing passages, and is one of the most frequent causes of the common cold.

Most children under two years have been infected by RSV at some stage, and it is possible to get RSV over and over again. Good hygiene habits can reduce the chance of your child getting the virus or passing it on to others.

How common is it?

Over 60% of children have been infected by their first birthday, and over 80% by 2 years of age. Most children aged under two years have been infected by RSV at some stage.

Is RSV contagious?

RSV is highly contagious, children with RSV are usually infectious (able to pass the virus onto others) for eight days from the start of their symptoms. RSV spreads quickly and easily among children through droplets when coughing and sneezing, and sharing cups and other objects that have been in contact with the infected child's mouth, nose or eyes. It can also live on surfaces (like worktops or door handles) and on hands and clothing for 4-7 hours. This means that people can get it if they touch something that is contaminated.

RSV can spread quickly through schools and childcare facilities. Babies often get it when older children carry the virus home from school and pass it to them.

How can I stop my baby getting RSV?

- ⇒ The best way to stop your baby from getting RSV is careful hand washing. Parents, family members and any visitors should wash their hands often and particularly:
 - Before touching or caring for your baby
 - After coughing or sneezing
 - After touching their mouth or nose
 - After returning home from work, school or other activities
- ⇒ Keep your baby away from anybody who has signs of a cold
- ⇒ Avoid kissing your baby in the face if you have signs of a cold
- ⇒ Keep your baby's environment clean and regularly wipe and disinfect surfaces
- ⇒ Wash toys within your baby's environment regularly
- ⇒ Breastfeed your baby if possible. Breast milk contains factors that help prevent and fight off illness
- ⇒ Keep your baby away from smoky environments, particularly when at home

It is especially important to follow the above points if your baby was born premature or very unwell as these babies have a weaker immune system and are more likely to become unwell if they get RSV.

Palivizumab (Synagis®) for RSV infection

Palivizumab has been shown to help prevent serious infection from RSV in babies who are at the highest risk. Synagis is an immunisation which contains palivizumab, which is the virus-fighting antibody that helps to protect high risk infants against severe lung infections. Synagis is available as a monthly injection throughout the RSV season, usually October-February. This year (2022) the Synagis immunisation will be available earlier and for an extended season. Please speak to your neonatal team for further details and to find out whether your baby is elibible for Synagis.

What are the symptoms of RSV?

RSV infection causes symptoms similar to a cold:

- Runny nose, sneezing or blocked nose
- Cough
- Fast and/or noisy breathing (wheezing)
- High temperature
- Trouble with feeding
- Ear infections and croup (a barking cough caused by inflammation of the upper airways) can also be present in children with RSV.

When should I get medical help?

Most cases of RSV are not serious, but you should see your GP or call NHS 111 if:

- You're worried about your child and their behaviour seems different to normal
- Your child has taken less than half their usual amount during the last 2 or 3 feeds, or they
 have had a dry nappy for 12 hours or more
- Your child has a high temperature of 38°C or above that is not coming down
- Your child seems very tired or irritable

Dial 999 for an ambulance if:

- Your child is having trouble breathing
- Your child's breathing is unusually noisy or fast
- There are long pauses in your child's breathing
- Your child's tongue or lips are blue
- Your child seems floppy and pale

How is RSV treated?

There is no set treatment suitable for everybody, and so treatment is aimed at supporting the child and helping their symptoms. For example lowering the temperature, soothing throat pain and opening airways to improve any breathing difficulties. Your child's doctor and/or your local chemist can make suggestions to help with this.

Can you get RSV more than once?

If a baby or child has had RSV once it is still possible for them to get it again in the future, so it is important that you continue with the precautions outlined above.

For further information please visit the following websites:

https://www.gov.uk/government/collections/respiratory-syncytial-virus-rsv-guidance-data-and-analysishttps://www.nhs.uk/conditions/bronchiolitis/



This information leaflet was designed and produced by the East Midlands Neonatal Operational Delivery Network.

For further information on what we do, please visit our website; www.emnodn.nhs.uk