

# Opportunity for a Healthy Life

# **Public Health Advisory**

November 3, 2022

Dear parents and guardians:

Respiratory syncytial virus (RSV) infections are rapidly increasing in Colorado, particularly among infants and children below the age of two. As a result, the rate of RSV hospitalizations in the Denver metro area is rising quickly, and pediatric hospital bed capacity has become strained. Additionally, Colorado has seen a sharp increase in reported RSV outbreaks in child care and school settings. More than half of the outbreaks have resulted in at least one person seeking care at a hospital. RSV is a common respiratory virus that usually causes mild, cold-like symptoms and is the leading cause of bronchiolitis (inflammation of the small airways in the lung) and pneumonia (infection of the lungs) in children under one in the United States. Most people recover in seven to 14 days. However, RSV can cause serious health risks, especially for infants and children below the age of two.

## How RSV is spread

RSV can spread when:

- An infected person coughs or sneezes
- Getting droplets that contain the virus from a cough or sneeze in your eyes, nose or mouth
- Having direct contact with the virus, for example, an infected person kissing the face of a child
- Touching an object or surface that has the virus on it, like a toy or a table, and then touching your face before washing your hands

People infected with RSV are usually contagious for three to eight days and may become contagious a day or two before showing signs of illness. However, some infants and people with weakened immune systems can continue to spread the virus even after they stop showing symptoms for as long as four weeks.

## How to stop the spread of RSV

If your child has cold-like symptoms:

- Keep your child home when they feel sick, even if they have tested negative for COVID-19.
- Teach your child to frequently wash their hands with soap and water for at least 20 seconds.
- Practice cough and sneeze etiquette—cover your nose and mouth with a tissue when sneezing or coughing, throw the tissue in the nearest garbage can and wash your hands after you throw it away. If you don't have a tissue, cough or sneeze into your upper sleeve or elbow, not your hands.
- Children with cold-like symptoms should not interact with children at high risk for severe RSV disease, including premature infants, children younger than two years of age with chronic lung or heart conditions, children with weakened immune systems or children with neuromuscular disorders.



#### What to do if your child has symptoms

- People infected with RSV typically develop symptoms within four to six days after exposure.
- Symptoms of RSV infection, which may appear in stages, can include a runny nose, decreased appetite, coughing, sneezing, fever, and wheezing. The only symptoms in very young infants with RSV may be irritability, decreased activity/feeding, and difficulty breathing.
- Children or staff at child care centers who are ill with RSV or other acute respiratory illness (including cold-like symptoms) should remain home until they are fever-free for a minimum of 24 hours without using fever-reducing medications and their other symptoms have been improving for 24 hours. The Colorado Department of Public Health & Environment (CDPHE) provides guidance on when a child should return to school or child care in the *How Sick is Too Sick?* guidance document (en Español: <u>¿Qué tan enfermo es demasiado enfermo?</u>)

#### When to see your child's health care provider

- Call a health care professional if your child is having difficulty breathing, not drinking enough fluids or experiencing worsening symptoms.
- There is currently no vaccine or treatment for RSV. While RSV testing *may* be available from a health care provider, it is neither required nor necessary to return to child care (see return criteria above).
- A drug called palivizumab is available to prevent severe RSV illness in certain infants and children who are at high risk for severe disease. This could include, for example, infants born prematurely or with congenital (present from birth) heart disease or chronic lung disease. If your child is at high risk for severe RSV disease, talk to your healthcare provider to see if palivizumab can be used as a preventive measure.

Thank you for taking these steps to protect the health of our community. For more information, please refer to the following resources:

- Centers for Disease Control and Prevention: <u>RSV in Infants and Young Children (en Español)</u>
- American Academy of Pediatrics: <u>RSV: When It's More Than Just a Cold (en Español)</u>