

Respiratory Syncytial Virus Takes a Toll on Families

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The National Coalition for Infant Health is a collaborative of more than 200 professional, clinical, community health, and family support organizations focused on improving the lives of premature infants through age two and their families. NCfIH's mission is to promote lifelong clinical, health, education, and supportive services needed by premature infants and their families. NCfIH prioritizes safety of this vulnerable population and access to approved therapies.

It starts with a cough, a wheeze, and a snuffle. For an infant or young child, these symptoms may mark the beginning of a virus that burdens their families and their health for years to come.

So explains “**The Burden of RSV: Impacting All Families**,” a recently released white paper from the National Coalition for Infant Health. (1)

While not every child experiences RSV the same, many develop harsh symptoms that can seriously hinder their well-being. And the impact of RSV extends beyond the sick child to their family.

A Burdensome Experience

“While not every child experiences RSV the same, many develop harsh symptoms that can seriously hinder their well-being. And the impact of RSV extends beyond the sick child to their family.”

While adults may experience RSV as “just a cold,” infants and young children can face serious damage and harsh symptoms from the virus. And RSV is not rare.



- **Nearly all infants catch RSV.** Research shows that nearly all infants catch RSV before the age of 2. It is an illness to which nearly all babies are susceptible.
- **RSV symptoms are painful.** Babies and children may suffer painful symptoms while they have RSV, such as wheezing, coughing, lethargy, and struggling to breathe. These symptoms can cause lasting harm.
- **Supportive care is needed.** In many cases, symptoms may be too much for children to handle on their own. For children under the age of 5, RSV causes more than 500,000 emergency room visits and 58,000 hospital visits each year.

While preemies and infants are particularly vulnerable, children under the age of 5 are still at a high risk of severe RSV.

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Long-Term Consequences

The impact of RSV does not end when a baby’s immune system finally wins out against the virus. Unfortunately, the harm caused by RSV can lead to further difficulties for the baby and their family. RSV can lead to:

- **Emotional strain.** During an RSV hospitalization, families may experience distress or emotional exhaustion. Watching a child struggling with illness is draining, and additional responsibilities such as work and child care for siblings can place even more stress on parents.
- **Financial toll.** Hospitalization and follow-up treatments can generate staggering medical bills. The total cost of supportive care can be devastating for families just trying to care for their children.
- **Health complications.** Children who contract RSV at a young age are more likely to develop asthma or another breathing disorder later in life. While children may overcome the virus, its impact lingers in the form of long-term health consequences.

Despite the harm RSV causes, no cure or vaccine yet exists. There are preventive interventions, but not everyone can access them.

Read **“The Burden of RSV: Impacting All Families”** to learn more about RSV, its impact, and how families and health care providers can work to prevent it. (1)

References:

1. https://static1.squarespace.com/static/5523fcf7e4b0fef011e668e6/t/62aa3a1421c8377491e06778/1655323159078/NCfIH_The+Burden+of+RSV

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National Coalition for Infant Health Values (SANE)

Safety. Premature infants are born vulnerable. Products, treatments and related public policies should prioritize these fragile infants’ safety.

Access. Budget-driven health care policies should not preclude premature infants’ access to preventative or necessary therapies.

Nutrition. Proper nutrition and full access to health care keep premature infants healthy after discharge from the NICU.

Equality. Prematurity and related vulnerabilities disproportionately impact minority and economically disadvantaged families. Restrictions on care and treatment should not worsen inherent disparities.