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Time needed to complete: 53m

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Who May Benefit From Increased Awareness of RSV and Why?

Announcer:

Welcome to CME on ReachMD. This episode is part of our MinuteCME curriculum.

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Dr. Anand:

Hi, my name is Vik Anand. I'm a Pediatric Infectious Disease Specialist at Cedars Sinai Medical Center. I'm going to be talking to you about RSV, and Who May Benefit from Increased Awareness of RSV and Why would they benefit.

So what is the problem? RSV is a pretty severe viral infection. Almost all children will be infected with RSV by the time they are 2 years old. It causes 2.1 million children to be seen in non-hospitalized settings every single year, and is responsible for 58,000 to 80,000 hospitalizations every single year for children younger than 5 years old. And it'll cause between 100 and 300 deaths in children younger than 5 each and every year.

But what's important, I think, is that RSV is not really just a disease for children, even though I think a lot of us think of it as a burden for just children, there's almost 21 million RSV infections that occur in the U.S. each year and most of them will be in adults. It causes 120,000 hospitalizations every year in adults over 65, and it leads to 10,000 deaths every year in adults over 65. The illness can last for 10 days on average, which means half the people might be getting better a little bit sooner, but half of people will go on to have longer symptoms for up to 2 weeks, if not more sometimes. It's associated with sinus and ear symptoms. And, of course, when people complain of sinus and ear pain, a lot of times they're being prescribed antibiotics for concern for sinus infections and ear infections, which leads to a lot of unnecessary antibiotic use.

Many of the infants who are eligible for RSV prophylaxis do not receive it. Palivizumab is an important prophylactic agent for infants at high risk of severe RSV disease. This includes infants who have congenital heart disease, congenital lung disease, or are very premature. But even though there's a number of children who

are supposed to be receiving this prophylactic agent, are not actually getting it. In one U.S. study, less than half of eligible infants received the palivizumab for RSV prophylaxis that they were supposed to. And in a different study of almost 270,000 infants, only 78,000 of them received at least one dose. So as you can see, there's - despite a lot of children needing prophylaxis against RSV, there's not unfortunately, the awareness to be treating children.

So importantly, RSV is underrecognized; 35% of patients with an RSV diagnoses were attributable to RSV tests performed in an adult inpatient setting, whereas 55% of diagnosis were attributable to RSV tests performed in an outpatient setting. So obviously, there's a discord between people getting diagnosed versus people getting tested and symptoms being appropriately attributed to RSV, given how severe illness it is. And despite testing, RSV is frequently under diagnosed. And RSV testing may not even be available in many care practices, so people just think they have a bad cold, when in reality, there's this virus and we're not reporting it as much as we need to be; and therefore, looking towards the future, may not be recognizing and preventing it as much as we are supposed to be. Importantly, by knowing that RSV is the cause of illness that may also lead to decreased antibiotic use.





Thank you so much for listening to my talk, and I hope this was helpful in describing how important RSV is to the future of medical professionals.

Announcer:

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