

Health Advisory: Use of Palivizuma and Off-Season RSV Activity

Minnesota Department of Health, Wed, Aug 4 13:00 CDT 2021

Action Steps

Local and tribal health department: Please forward to hospitals, clinics, urgent care centers, emergency departments, pharmacies, and convenience clinics in your jurisdiction.

Hospitals, clinics and other facilities: Please forward to pediatricians, occupational health and employee health leadership, infection preventionists, infectious disease physicians, emergency department staff, hospitalists, primary care clinicians, pharmacists, and all other health care providers who might see patients with respiratory illness.

Health care providers:

- Consider alternative respiratory testing and diagnoses besides COVID-19, such as RSV, that do not typically circulate during summer months in Minnesota.
- Treat certain infants and young children who are at risk for severe disease with prophylactic medication palivizumab according to the AAP guidance listed below.
- Encourage parents and caregivers to keep young children out of childcare when experiencing acute respiratory illness, even if they have tested negative for SARS-CoV-2.
- Discourage health care personnel, childcare providers, staff of long-term care facilities from reporting to work while acutely ill, even if they have tested negative for SARS-CoV-2.

Summary

Respiratory syncytial virus (RSV) is a major cause of severe lower respiratory infection in young children and elderly. It is the most common cause of bronchiolitis and pneumonia in children younger than 1 year of age. Typically, RSV circulates during the colder months of the year. However, an increase in outpatient visits and hospitalizations due to RSV has occurred over this summer, with 13 hospitalizations in the Twin Cities metropolitan area due to RSV in May, 63 in June, and 113 in July. Data from the Centers for Disease Control and Prevention (CDC) on RSV activity in the Midwest region can be found at RSV Census Regional Trends: Region 2 Midwest https://www.cdc.gov/surveillance/nrevss/rsv/region.html#midwest. Health advisories were sent by the CDC (June 10) and MDH (June 28) regarding the increase in RSV cases.

Patients with RSV infection typically present with fever, cough, wheezing and runny nose. Atypical symptoms, especially in very young children and infants younger than 6 months, include irritability, lethargy, poor feeding, and fever (although fever may not be present in many cases). RSV can also cause severe disease in older adults (≥ 65 years old). Consider RSV when evaluating patients who have symptoms consistent with RSV, particularly when there are patients with respiratory symptoms who test negative for COVID-19. Patients with acute respiratory symptoms should stay home while ill. This is especially important for people who

$\begin{array}{c} \textbf{HEALTH ADVISORY: USE OF PALIVIZUMA AND OFF-SEASON RSV} \\ \textbf{ACTIVITY} \end{array}$

work in health care, childcare and in long-term care. Children with suspected or confirmed RSV should not attend childcare.

The prophylactic medication palivizumab is available to prevent severe RSV illness in certain infants and young children who are at high risk for severe disease. See AAP guidance for information on use: <u>Updated Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection (https://pediatrics.aappublications.org/content/134/2/415.full)</u>

There was very little RSV activity during the usual season (typical season onset ranges from mid-September to mid-November; peak season ranges from late-December to mid-February, and season offset ranges from mid-April to mid-May). However, RSV is currently very active in Minnesota, and prophylactic therapy should be considered as if we are in peak season. It is unknown how long this activity will continue, but it likely will continue for months. It is also unknown if the next RSV season will occur at an atypical time.

For More Information

- Respiratory Syncytial Virus Infection (RSV) (https://www.cdc.gov/rsv/index.html)
- <u>Updated Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection</u>
 (https://pediatrics.aappublications.org/content/134/2/415.full)

A copy of this HAN is available at: <u>MDH Health Alert Network</u> (http://www.health.state.mn.us/han)

The content of this message is intended for public health and health care personnel and response partners who have a need to know the information to perform their duties.