Fast Facts: Respiratory syncytial virus (RSV)

CVEEP
Champions for Vaccine Education, Equity + Progress

Respiratory syncytial virus (RSV) is a common virus that causes a cold-like disease. But unlike the common cold, RSV is highly contagious and can become dangerous, with **infants, young children, and older adults at highest risk for severe illness.**

Burden of RSV

Older adults[1]

- In the U.S., RSV causes **60,000–160,000 hospitalizations** and **6,000–10,000 deaths** annually among adults over age 65.

Infants and young children[2,3]

- Each year, an estimated **58,000–80,000 children** younger than 5 are **hospitalized** due to RSV and **100–300 deaths** among children are caused by RSV.
- Each year, approximately **3 out of every 100 infants** younger than 6 months are hospitalized with RSV.

Risks associated with RSV infection

Older adults[4,5]

Recent research indicates that older adults who were infected with RSV and hospitalized had a higher risk of death within 1 year after their hospitalization. RSV can also worsen conditions like chronic obstructive pulmonary disease (COPD), asthma, pneumonia, and heart failure.

Infants and young children[6]

Research highlights that infection with RSV in early childhood can be linked to an increased risk of recurrent asthma and wheezing later in life.

The best protection against severe RSV is immunization.

Immunization recommendations

Older adults[7]

- For adults 75 years of age and older, routine vaccination is recommended, meaning all individuals in this age group should receive an RSV vaccine.
- For adults 60–74 years of age, a "risk-based" approach to vaccination is recommended. This means vaccination against RSV is recommended for those with certain chronic health conditions and/or those living in nursing home settings, which can increase the risk of severe RSV.

Infants and young children[8,9]

Maternal RSV vaccine

- It is recommended that pregnant women receive an RSV vaccine between 32–36 weeks of pregnancy during RSV season (typically September through January) to protect their infants at birth.

Monoclonal antibody

A preventive antibody, nirsevimab, is available for:

- Infants under 8 months born during or entering their first RSV season, if the mother has no or unknown RSV vaccine history, or the RSV vaccine was received less than 14 days prior to birth.
- Young children 8–19 months who are at increased risk for severe illness from RSV and entering their second RSV season.

[1] https://www.cdc.gov/mmwr/volumes/72/wr/mm7240a1.htm
[2] https://www.cdc.gov/rsv/infants-young-children/index.html
[3] https://www.cdc.gov/rsv/hcp/vaccine-clinical-guidance/infants-young-children.html
[4] https://academic.oup.com/jid/article/222/8/1298/5863549
[5] https://www.cdc.gov/rsv/older-adults/index.html
[6] https://pmc.ncbi.nlm.nih.gov/articles/PMC5446364/
[7] https://www.cdc.gov/mmwr/volumes/72/wr/mm7240a1.htm
[8] https://www.cdc.gov/rsv/infants-young-children/index.html
[9] https://www.cdc.gov/rsv/vaccines/protect-infants.html