

**Circulation of non-influenza and non-COVID-19 respiratory viruses including the respiratory syncytial viruses (RSV)**

<b>DATE:</b>	6/23/2021
<b>TO:</b>	Health Alert Network
<b>FROM:</b>	Alison V. Beam, JD, Acting Secretary of Health
<b>SUBJECT:</b>	Circulation of non-influenza and non-COVID-19 respiratory viruses including the respiratory syncytial viruses (RSV)
<b>DISTRIBUTION:</b>	Statewide
<b>LOCATION:</b>	n/a
<b>STREET ADDRESS:</b>	n/a
<b>COUNTY:</b>	n/a
<b>MUNICIPALITY:</b>	n/a
<b>ZIP CODE:</b>	n/a

This transmission is a “Health Advisory,” and provides important information for a specific incident or situation; may not require immediate action.

**HOSPITALS:** PLEASE SHARE WITH ALL MEDICAL, PEDIATRIC, NURSING AND LABORATORY STAFF IN YOUR HOSPITAL; **EMS COUNCILS:** PLEASE DISTRIBUTE AS APPROPRIATE; **FQHCs:** PLEASE DISTRIBUTE AS APPROPRIATE **LOCAL HEALTH JURISDICTIONS:** PLEASE DISTRIBUTE AS APPROPRIATE; **PROFESSIONAL ORGANIZATIONS:** PLEASE DISTRIBUTE TO YOUR MEMBERSHIP; **LONG-TERM CARE FACILITIES:** PLEASE SHARE WITH ALL MEDICAL, INFECTION CONTROL, AND NURSING STAFF IN YOUR FACILITY

**SUMMARY**

- Non-influenza, non-COVID-19 respiratory viruses including respiratory syncytial virus (RSV) are circulating in the community at a higher rate than usual for this time of the year.
- Health care providers should consider testing symptomatic patients with a respiratory virus panel especially if influenza and COVID-19 tests are negative
- Report positive RSV tests to PA DOH through PA-NEDSS. Positive tests can be reported individually or in aggregate through the aggregate reporting module in PA-NEDSS. Hospitalizations and deaths should be reported individually in PA-NEDSS. Report RSV outbreaks to DOH at 1-877-PA-HEALTH (1-877-724-3258) or your local health department.

**Background**

Respiratory syncytial virus (RSV) is a major cause of severe lower respiratory infection in young children and elderly. RSV circulates in a seasonal manner typically during late fall and winter. Respiratory viruses, including RSV, typically circulate during the cold months of the year when conditions allow these viruses to live longer, transmit easier and when people tend to gather indoors more often. Mitigation efforts used to fight the COVID-19 pandemic also helped to prevent transmission of these seasonal respiratory viruses this past fall/winter season in which these viruses circulated at unprecedented low levels.

Patients with RSV infection typically present with fever, cough, wheezing and runny nose. The symptoms might be atypical especially in very young children and infants younger than 6 months where symptoms of irritability, lethargy, poor feeding and with or without fever may be present.

Each year in the United States, RSV leads to on average approximately 58,000 hospitalizations with 100-500 deaths <sup>(1)</sup> among children younger than 5 years old and 177,000 hospitalizations with 14,000 deaths among adults aged 65 years or older <sup>(2)</sup>. RSV bronchiolitis is the most common reason for hospitalization in infants. Infection in early life has been associated with an increased risk of wheeze-related illness throughout childhood. RSV is also a major cause of severe acute respiratory infections (SARI) in older adults (≥ 65 years old).

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 heart disease or chronic lung disease. The drug can help prevent serious RSV disease but it cannot be used to cure or treat children already suffering from serious RSV disease, and it cannot prevent infection with RSV. There is no specific treatment for RSV and symptom management is the main treatment strategy.

On June 10, 2021, The CDC sent out a health alert to providers to notify them that the southern region of the US has high activity of RSV; the alert can be accessed at:

<https://emergency.cdc.gov/han/2021/pdf/CDC-HAN-443-Increased-Interseasonal-RSV-Activity-06.10.21.pdf>

In Pennsylvania, the activity of RSV and other respiratory viruses such as enterovirus and seasonal coronavirus has been high over the past few weeks than would typically be expected for this time of year (figure 1). This is noted from the data the commercial laboratories submitted voluntarily to the National Enteric and Respiratory Virus Surveillance System (NERVSS). Additional information regarding this activity is displayed in Figure 1.

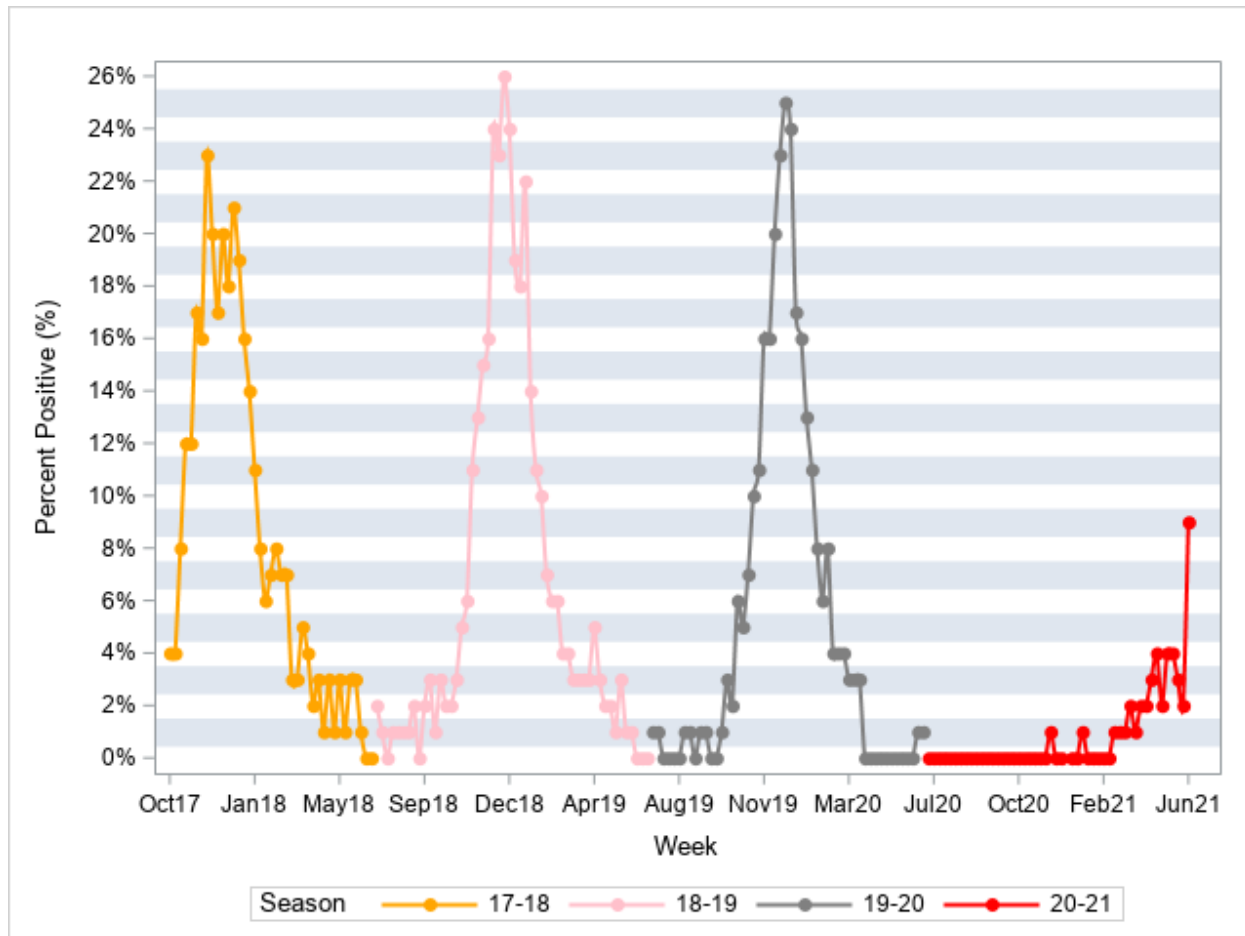
#### Recommendations

- 1- Clinician and providers should request laboratory testing for all patients that have typical symptoms for RSV and are negative for COVID-19.
- 2- RT PCR is the recommended method for testing for respiratory viruses.
- 3- Health care practitioners and laboratories are required to report positive RSV laboratory test results, including point of care tests, electronically to Pennsylvania Department of Health through Pennsylvania's electronic surveillance system PA-NEDSS. All reporters must request a PA-NEDSS account if they do not already have one. This can be done by completing a Prime Contact Information Form and sending this form to [PA-NEDSS@pa.gov](mailto:PA-NEDSS@pa.gov). Positive tests can be reported individually or in aggregate through the aggregate reporting module in PA-NEDSS. Hospitalizations and deaths should be reported individually in PA-NEDSS. Report RSV outbreaks to DOH at 1-877-PA-HEALTH (1-877-724-3258) or your local health department.
- 4- Healthcare providers and childcare staff should not report to work if they have influenza-like illness (ILI) symptoms as they serve high risk groups who are vulnerable to severe RSV infections and complications.

#### References:

- 1-Thompson WW, Shay DK, Weintraub E, Brammer L, Cox N, Anderson LJ, Fukuda K. Mortality associated with influenza and respiratory syncytial virus in the United States. JAMA. 2003 Jan 8;289(2):179-86. doi: 10.1001/jama.289.2.179. PMID: 12517228.
- 2-Falsey AR, Hennessey PA, Formica MA, Cox C, Walsh EE. Respiratory syncytial virus infection in elderly and high-risk adults. N Engl J Med. 2005 Apr 28;352(17):1749-59. doi: 10.1056/NEJMoa043951. PMID: 15858184.

Figure 1: Percent positive of RSV PCR tests reported to the National Enteric and Respiratory Virus Surveillance System (NERVSS) during the current season compared with the previous 3 seasons



Categories of Health Alert messages:

**Health Alert:** conveys the highest level of importance; warrants immediate action or attention.

**Health Advisory:** provides important information for a specific incident or situation; may not require immediate action.

**Health Update:** provides updated information regarding an incident or situation; unlikely to require immediate action.

This information is current as of June 23, 2021 but may be modified in the future.