Ribavirin Treatment of Respiratory Syncytial Virus (RSV)

This handout has been written to help you learn about Respiratory Syncytial Virus (RSV) and its treatment. The symptoms of RSV, how it is treated and precautions will be discussed. If you have further questions about RSV, please contact your child’s clinic, doctor, or nurse.

What is RSV?

RSV is one of the major causes of lung infection in infants and young children. RSV affects small airways in the lung called bronchioles (bronk’-ee-oles). You may hear of RSV being referred to as bronchiolitis (bronk’-ee-o-lite’-us). RSV is a very common illness. By the age of three, almost all children will have had RSV.

When does RSV occur?

RSV cases occur yearly, most often in the winter and spring months.

What are the symptoms of RSV?

The symptoms of RSV are a lot like the symptoms of the common cold. Children will have a clear runny nose, fever, and cough. Some children with RSV can also have an ear infection. Often, children with RSV will have a mild fever (less than 101°F) for a few days, a runny nose for 1-2 weeks, and a cough that may last for many weeks. Most children with RSV will have mild cold symptoms. Some children, mainly infants less than one year old and children with other health problems can get very sick with RSV. Some children have fast, shallow breathing, and may seem to work hard to breathe.
How is RSV treated?

Most children with mild RSV will get better in about a week on their own, although a loose cough may last up to six weeks. If your child has a fever, your child’s doctor may suggest giving acetaminophen (i.e. Tylenol®) to make your child feel better. You should try to give small amounts of fluids (formula, water, juice, or popsicles) often if your child has a fever. Children with bad cases of RSV, mainly infants under one year of age or children with other health problems may be admitted to the hospital for treatment. Treatment could include oxygen, IV (intravenous) fluids, and medications to ease breathing. Other treatments may also be ordered by your child’s doctor. For children with severe RSV, Ribavirin may improve the child’s condition. Children with severe RSV may also need to stay in the Pediatric Intensive Care Unit for treatment.

How is Ribavirin given?

Ribavirin is given as a cool mist, which is often given over 18 hours a day or for 2 hours 3 times a day, for many days. An oxygen tent will cover your child’s head and neck. The mist will be given to your child in this tent. The tent keeps the mist from escaping into the air. The edges of the tent should be firmly tucked under the bed mattress with the zippers closed. Your child’s nurse will help you to open or close the tent when caring for your child. Your child needs to stay in the tent as much as possible during treatment.

What are the special precautions for Ribavirin?

- Women who are pregnant or might be pregnant should not enter your child’s room.

- People coming into your child’s room should wear a special mask, a gown, and gloves.

- Ribavirin mist can cause eyes to become red and sore. Do not wear soft contact lenses in your child’s room. Ribavirin mist can also affect gas permeable contact lenses. Your child’s nurse can provide you with goggles to protect your eyes. Let your child’s doctor know if your eyes become red or sore.

- Please keep the door to your child’s room closed to keep the mist contained in the room.

Can my child get RSV again?

Yes. A child with RSV can get it again in the future. Future RSV is not as severe. Adults can also have RSV, although symptoms are most often like a cold.
How can I help prevent the spread of RSV?

RSV is spread by coming in close contact with an infected person and the droplets produced when the person coughs or sneezes. *Careful hand washing* with soap and warm water is the best way to prevent the spread of RSV. If your child is in clinic or in the hospital with possible RSV, he will be placed in a room with the door *closed*. You will be asked to wear a mask, gown, and gloves while in your child’s room. If you stay overnight in your child’s room, you need not wear these items to sleep. Anytime you touch your child you should wear a gown and gloves. Please leave these items in your child’s room, and wash your hands well *before* leaving the room.