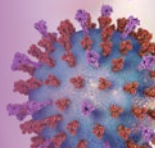


Identifying Respiratory Syncytial Virus (RSV) in Adults



Respiratory syncytial virus (RSV) is one of the most common viruses to infect children worldwide. Although RSV is typically thought of as a pediatric infection, older adults experience significant morbidity and mortality. Complications of RSV in adults include pneumonia and worsening of heart and lung diseases (heart failure, asthma, and chronic obstructive pulmonary disease [COPD]). There is an urgent need for pharmacists to educate patients about RSV prevention strategies.

IS IT RSV, COVID-19, A COLD, INFLUENZA, ALLERGIES, OR ASTHMA?						
Symptom	RSV	COVID-19	Cold	Influenza	Seasonal allergies	Asthma
Onset of symptoms	Appear in stages rather than all at once	Gradual onset	Gradual onset	Abrupt onset	Abrupt onset	Gradual or abrupt onset
Typical length of symptoms	7-14 days	7-25 days	Fewer than 14 days	7-14 days	Several weeks	Can start quickly or last for hours or longer
Cough	Common	Common (usually dry)	Common (mild)	Common (usually dry)	Rare (usually dry unless it triggers asthma)	Common (can be dry or wet/productive)
Wheezing	Sometimes	No	No	No	No	Common
Shortness of breath	Sometimes	Sometimes	No	No	No	Common
Chest tightness/pain	No	No	No	No	No	Common
Rapid breathing	No	Sometimes	No	No	No	Common
Sneezing	Sometimes	No	Common	No	Common	No
Runny or stuffy nose	Common	Common	Common	Sometimes	Common	No
Sore throat	No	Sometimes	Common	Sometimes	Sometimes (usually mild)	No
Fever	Sometimes	Common	Short fever period	Sometimes	No	No
Feeling tired and weak	No	Sometimes	No	Common	No	Sometimes
Headache	No	Sometimes	Rare	Common	Sometimes (related to sinus pain)	Rare
Body aches and pains	No	Sometimes	No	Common	No	No
Diarrhea, nausea, and vomiting	No	Sometimes	Rare	Sometimes	No	No
Chills	No	Sometimes	No	Sometimes	No	No
Loss of taste or sense of smell	No	Sometimes	Rare	Rare	Rare	No

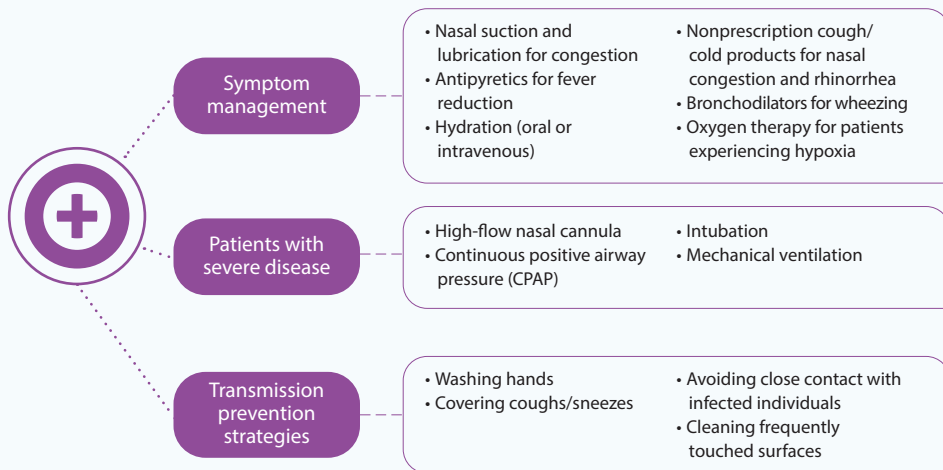
Note: Information is evolving in some cases; this table is to help identify differences in symptoms between various conditions, but it is important to use clinical-decision making when evaluating patients.

Q Which adults are at high risk for RSV, complications, and death?

- A**
- Older adults, especially those 65 years and older
 - Adults with chronic cardiopulmonary disease
 - Adults with immunosuppression

Q What are the management strategies for RSV?

A Currently, there are limited effective pharmacologic treatment options for RSV infection



Q Where do vaccines fit in?

- A**
- While no RSV vaccine is currently available, several candidates have been developed and are in various stages of clinical trials.
 - If approved, pharmacists can raise awareness of the importance of vaccines in decreasing the burden of RSV.

Opportunities for Increasing Vaccination Rates

- Identify patients that are high risk when presenting to the pharmacy or during medication reviews
- Broach the topic when a patient presents for another vaccine
- Consider mass vaccination clinics
- Address barriers to vaccination
- Recognize patient populations that may face disparities in care
- Leverage consistent safety and efficacy messaging

