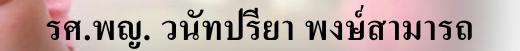
The RSV Stories

กา<mark>รประชุมใหญ่สมาค</mark>มโรคติดเชื้อในเด็กแห่งประเทศไทย ประจำปี 2567 ครั้งที่ 28

5 พฤษภาคม 2567 (9.30-10.00 น.)



คณะแพทยศาสตร์ศิริราชพยาบาล มหาวิทยาลัยมหิดล



Outline

2

RSV Virus and High risk for severe RSV

Epidemiology of RSV in Thailand

RSV Preventive strategies

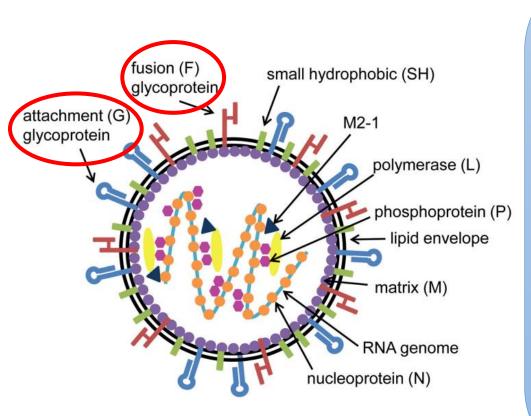
3

Recommendation of

Palivizumab by RCP



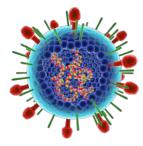
Respiratory Syncytial Virus (RSV)



- Human RSV exists as 2 antigenic subgroups, A and B, often cocirculate during the same RSV season.
- The RSV envelope contains 3 surface glycoproteins:
 - Glycoprotein G: involved in viral attachment to the cell and assists in the ability of the virus to evade host immunity
 - Fusion protein F: enables viral penetration of the epithelial cell once viral attachment occurs.
 - Small hydrophobic protein (SH)
- Antibodies directed against F and G are protective and are neutralizing antibodies
- In contrast to G protein, F protein is conserved, making it an attractive target for vaccine and monoclonal antibody development

Mejias A, et al. Vaccine. 2017 January 11; 35(3): 496–502 American Academy of Pediatrics. RedBook 2021

Respiratory Syncytial Virus In Children



- Nearly 70% of infants are infected with RSV in 1st year of life, and nearly all (90%) are infected within 2 years of life, and reinfection throughout life is common, but usually less severe
- Most hospitalizations for RSV occur in otherwise healthy infants born at term, representing up to 75% of the hospitalizations due to RSV infections

Transmission mode	Clinical manifestations	Diagnosis	Treatment	Prevention
• Direct and indirect contact transmission	• Majority: upper respiratory tract infections	• Specimens: respiratory secretion from nasopharynx,	• No effective antiviral agents	• Non-pharmaceutical intervention: masking, hand washing,
• Contagious period: 1-2 days before to 3- 8 days after symptom onset	• 20-40% have lower respiratory tract infections: bronchiolitis, pneumonia	nasal discharge, sputum, endotracheal aspirate, BAL • Diagnostic methods:	• Supportive and symptomatic treatments: antipyretic, oxygen supplement, respiratory secretion	 surface cleaning, social distancing Monoclonal antibody Palivizumab: only for indicated baby,
• Incubation period: 2-8 days (average 4- 6 days)	F	rapid Ag test, RT- PCR	care	e.g., preterm, CLD, CHD, etc. - Nirsevimab • RSV Vaccine