



# WINTER IS COMING

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# AGENDA

- Introductions
- RSV
- Flu
- Q&A



Stella (3y), 18<sup>th</sup> St., Sequoias  
Vincent, (10m), 18<sup>th</sup> St., Buttercups

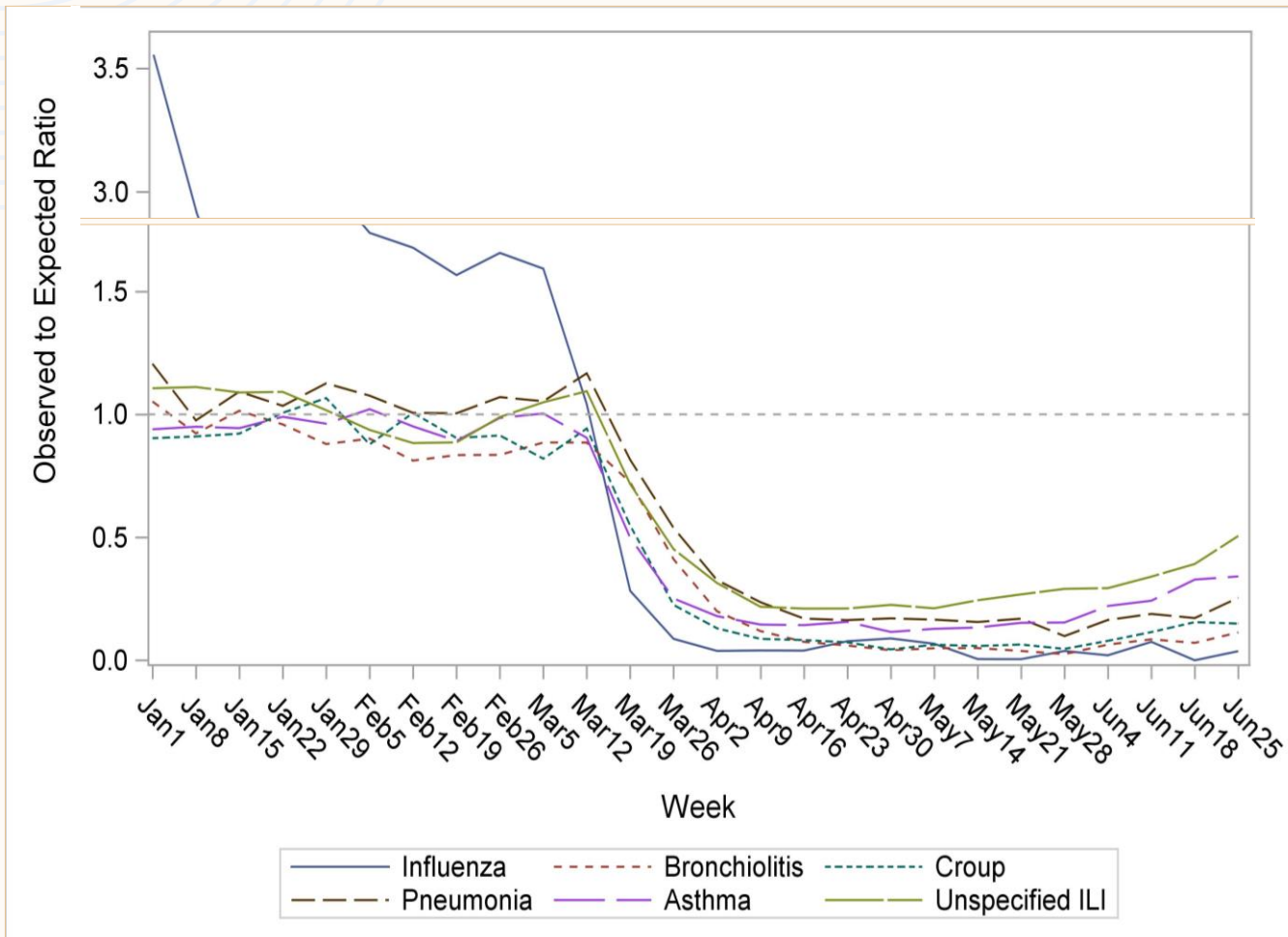


Alexandra (5y), former 19<sup>th</sup> St  
James (4y), 19<sup>th</sup> St White Oaks  
Hannah (8m), 19<sup>th</sup> St Blue Bells



# PANDEMIC CHANGES

4



Antoon *et al*, Journal of Hospital Medicine, 2021

- Pandemic measures GREAT at stopping other viruses
- Many children < 3 y have no underlying immunity
- School and daycares = centers of viral spread
- Children are drivers of virus transmission (flu, COVID, RSV etc.)
- Protecting kids also protects grandparents

**RSV**

American Academy  
of Pediatrics



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# **RSV=RESPIRATORY SYNCYTIAL VIRUS**

- Virus that causes cold and other respiratory symptoms, mostly in children < 2 years old
  - Bronchiolitis and viral pneumonia
- 100,000 children are hospitalized in the US each year
- High risk children:
  - Premature infants
  - Very young infants (< 6 months)
  - Children < 2 years old with chronic lung disease or congenital heart disease
  - Children with weakened immune systems
  - Two viruses at same time (RSV and flu, RSV and COVID etc)



# SIGNS AND SYMPTOMS

## Mild infection:

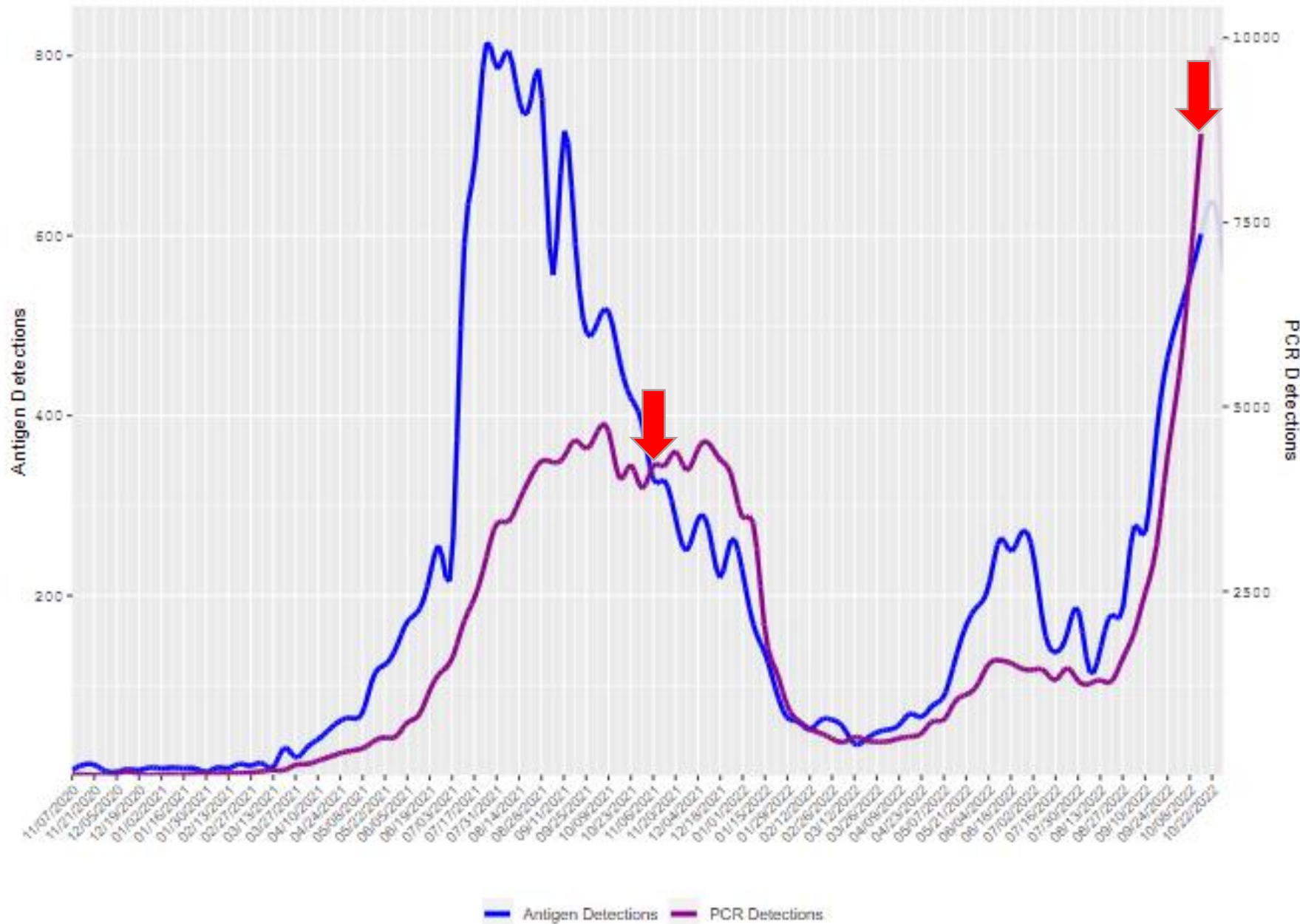
- Runny nose
- Nasal congestion
- Cough
- Fever

## Serious infection:

- Difficult or rapid breathing
- Wheezing
- Persistent, high fever
- Irritability and restlessness
- Poor appetite leading to dehydration



RSV Numerator Data for the US



RSV is everywhere and  
is on the rise

Especially in TN!



## Prophylaxis for High-Risk Infants and Young Children with Palivizumab (Synagis)

<https://publications.aap.org/pediatrics/article/134/2/415/33013/Updated-Guidance-for-Palivizumab-Prophylaxis-Among>

<https://www.cdc.gov/rsv/infographic.html>



# WHAT CAN YOU DO?

- Wash your hands (A LOT)
- Time!!! Most cases of RSV are mild and disappear in 5-7 days
- Nasal saline and suctioning for infants
- Tylenol and ibuprofen
- No OTC cold and cough medications
- Get flu and COVID vaccines

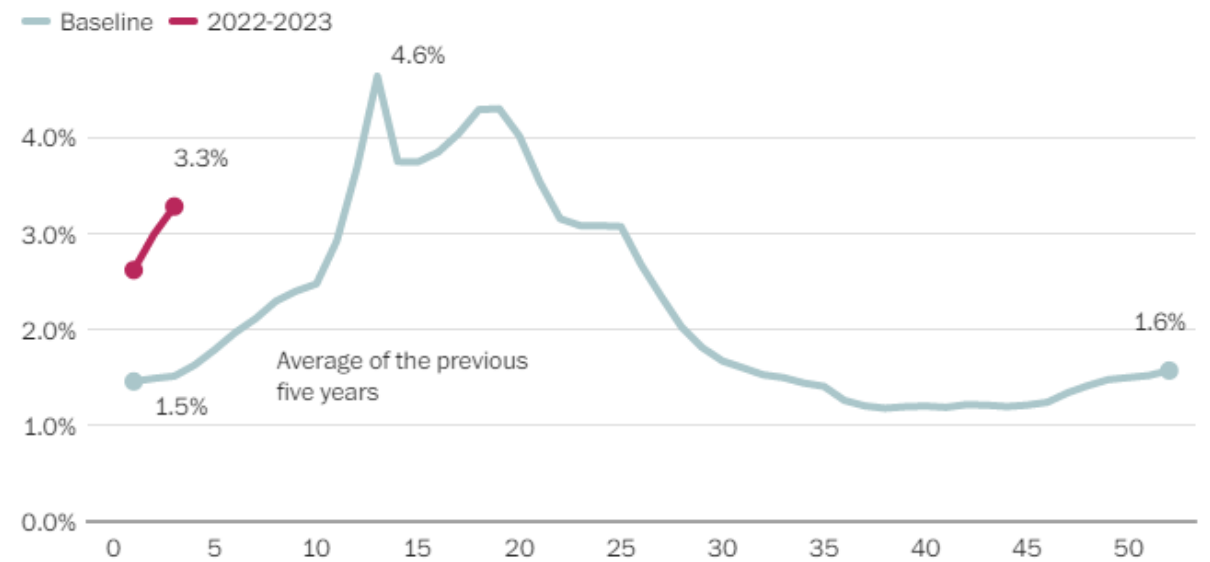
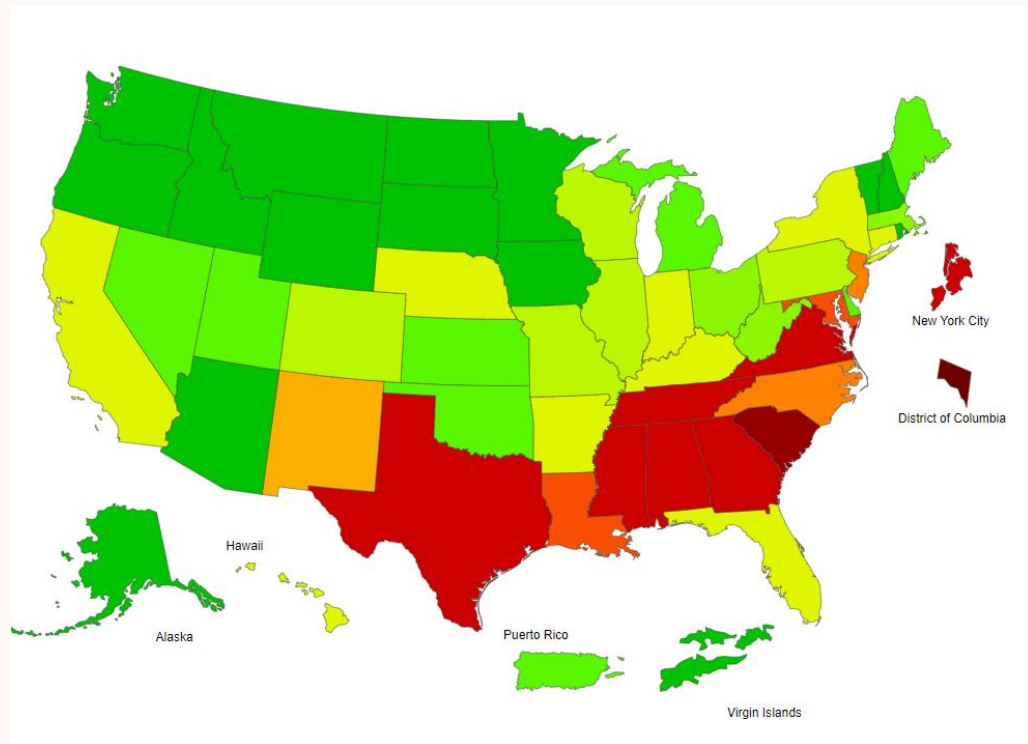
# INFLUENZA

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Source: Centers for Disease Control and Prevention FluView

DAN KEATING / THE WASHINGTON POST

# RISK FACTORS AND TREATMENT

**TABLE 4** High-Risk Groups for Influenza Complications

Category	Description
Demographic characteristics	Children <5 y, especially those <2 y <sup>a</sup> ← Residents of a chronic care facility or nursing home
Underlying condition or treatment with common examples <sup>b</sup>	
Chronic pulmonary disease	Asthma ← Cystic fibrosis Compromised respiratory function (eg, requiring mechanical ventilation, tracheostomy)
Cardiovascular disease	Hemodynamically significant conditions (excluding hypertension alone)
Kidney disease	Chronic kidney disease, including end-stage kidney disease Dialysis
Hepatic disease	Chronic liver disease Cirrhosis <sup>11,12</sup>
Hematologic disease	Sickle cell disease Other hemoglobinopathies
Metabolic disorders	Diabetes mellitus
Neurologic and neurodevelopmental conditions	Cerebral palsy
Epilepsy	Stroke Intellectual developmental disorder Moderate to severe developmental delay Muscular dystrophy Spinal cord injury
Extreme obesity	BMI ≥40 for adults <sup>c</sup>
Immunosuppression	Receipt of immunocompromising medications Congenital or acquired immune deficiency, including HIV Asplenia
Receiving treatment with aspirin or salicylate-containing therapies <sup>d</sup>	
Pregnancy and up to 2 wk' postpartum	

Source: Adapted from Centers for Disease Control and Prevention. Prevention and control of seasonal influenza with vaccines: recommendations of the Advisory Committee on Immunization Practices, United States, 2022–2023 influenza season. *MMWR Recomm Rep*. 2022; in press.

Prevention: Vaccine is good match this year!!!

- ≥ 6 months
- First flu vaccine is 2 shots

Antiviral Treatment:

- < 2 days of symptom onset OR
- Any high risk child regardless of duration of symptoms

Antiviral Meds: Treatment and prophylaxis

- Oseltamivir (Tamiflu): Oral, any age
- Zanamivir (Relenza): inhaled, ≥ 7 years



# HOW TO PROTECT YOUR CHILD FROM THE FLU

- Vaccinate your child AND everyone around them (especially for < 6 months)
- Back to Basics: Wash hands, Sneeze into elbow, Stay home when sick, Wear a mask sick
- Get tested and treated if high risk for complications (kids < 5 are high risk!)
- Share info if you can
  - If your child has the flu, RSV, COVID etc, please let the class know
  - You don't know who in the class is high risk and may need prophylaxis or treatment because of exposure

# Q & A



# RSV RESOURCES

- Center for Disease Control and Prevention (CDC)
  - RSV: <https://www.cdc.gov/rsv/index.html>
  - Flu: <https://www.cdc.gov/Flu/Index.htm>
- American Academy of Pediatrics (AAP)
  - RSV: When It's More Than Just a Cold: <https://tinyurl.com/4f7rsmcn>
  - Acetaminophen (Tylenol) dosing chart: <https://tinyurl.com/yc6scdan>
  - NSAID (Motrin) dosing chart: <https://tinyurl.com/y6d2vapr>

# FLU RESOURCES

- **Healthychildren.org**  
<https://www.healthychildren.org/English/health-issues/conditions/flu/Pages/the-flu-what-parents-need-to-know.aspx>
- **Center for Disease Control and Prevention (CDC)**
  - Flu: <https://www.cdc.gov/Flu/Index.htm>
- **American Academy of Pediatrics (AAP)**
  - <https://www.aap.org/en/news-room/news-releases/aap/2022/american-academy-of-pediatrics-urges-families-to-get-children-vaccinated-for-influenza-to-prevent-and-control-illness-in-2022-23/>

# THANK YOU

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