

"I am not afraid of storms for I am learning how to sail my ship.  
Louisa May Alcott." ~ Louisa May Alcott

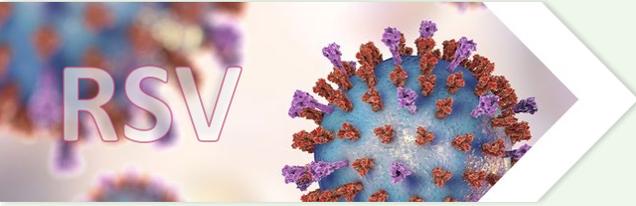


# CHAP Weekly Update

August 28, 2020

## RSV and COVID-19: What Health Aides Should Know

### Respiratory Syncytial Virus (RSV) Facts



- ❖ RSV is a common cold virus. Everyone can get it, even multiple times. By age 2, nearly 100% of people have been infected at least once. RSV returns every year
- ❖ The highest rates of severe RSV are found in Nunavut, Canada, the YK Delta in Alaska and the Navajo Nation in New Mexico and Arizona
- ❖ It is the most common cause of hospitalization for infants around the world

### Adults and older children



In most adults and older children, RSV looks and feels like a cold and does not usually cause problems.

**Symptoms:** Runny nose, cough, maybe fever. Adults and older children who have trouble clearing secretions or have immune problems may have a more serious infection with RSV.



### Infants



RSV infection can easily clog an infant's small airways. 40% of infants develop bronchiolitis or pneumonia of which 10% will be hospitalized. Infants at highest risk for severe disease are those who:

- Are less than 6 weeks old
- Were born early
- Have medical problems, i.e., heart disease, lung disease, immune problems, swallowing problems

#### Symptoms:

- Clear runny nose, decreased feeding, slight cough
- Fever – may be mild
- Cough may progress to wheezing, fast breathing and retractions
- May develop rales and other signs of pneumonia
- May develop low O<sub>2</sub> sats

Very young infants may have the same symptoms, or you may see:

- Irritability
- Decreased activity and feeding
- Apnea – (stopping breathing or long pauses between breaths)



### Save the Date



**Next Session:** September 1, 2020 Dr. Leanne Komorowski and Bethany Berry, CNM will discuss COVID-19 and Pregnancy: Changes in providing prenatal care.

[Community Health Aide/Practitioner Facebook page](#)

Share your community's success stories and lessons learned



Let us know what you think! [aka-CHAPCOVID-19weeklyupdates@anthc.org](mailto:aka-CHAPCOVID-19weeklyupdates@anthc.org)  
Send questions for presenters and each other, and suggest topics for discussion.



“Looking after a very sick child was the Olympics of parenting.”  
- Chris Cleave, Gold



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## RSV and COVID-19: What Health Aides Should Know (continued...)

### Symptom Comparison: RSV vs COVID-19



The most common COVID-19 symptoms in children are cough, fever, and sore throat. Children may also have all the other COVID-19 symptoms including abdominal pain and diarrhea.

### Spread of RSV and COVID-19



RSV is contagious. It is spread between people by coughing, sneezing, and touching surfaces that have been coughed or sneezed on. This is similar to COVID-19.

Higher rates of RSV are found in homes without running water. Look in your CHAM (COVID-19 Disinfection for Homes Without Running Water) for Patient Education about hand hygiene and home cleaning in homes without running water.

### Timing of RSV and COVID-19



RSV season in Alaska usually begins in December – May, but can be earlier and later. COVID-19 is here now. This RSV season could see infections with both viruses at the same time in the same person, or RSV could be less severe due to social distancing.

### RSV Research

#### Current research in Alaska

The Respiratory Virus Surveillance Study is tracking respiratory infections in YK Delta, Anchorage, the Navajo Nation, and in White Mountain Apache children. Results will be used to advocate for services, vaccines, and to learn about prevention tools. Study started in 2019 and ends in 2024.

#### What to expect this Fall and Winter

If RSV and COVID occur together, infections may be more severe. Flu infections may also complicate COVID-19 infections. Continued social distancing and good hand hygiene may decrease all rates of infection.

### RSV Prevention

Good hand hygiene and social distancing is important for COVID-19 and for RSV. Since social distancing measures have been put in place, fewer children have been hospitalized for respiratory infections than were in previous spring and summer periods.

**Synagis®** - An antibody injection for high risk infants to prevent severe disease. It is given every month for 5 months. Every year the dates of the shots and who should get them changes a little. Talk with your referral doctor and the public health nurse about infants in your community who might need this. Usually shots begin in November.



**Nervizemab®** – A new antibody shot, given once for the whole season. Early research suggests it may be more effective than Synagis®. It's currently in the final study phase and may be released for 2022.

### Treatment of RSV and COVID-19

**Mild disease:** Treat with at home care, lots of fluids and good hand hygiene. Provide frequent rechecks by phone or in person. Use CHAM Plans: *Illness with wheezing: Bronchiolitis Respiratory 14* and *Possible COVID-19 Illness with Mild Symptoms COVID-19*.

**More severe disease:** The patient may need to be transported to the regional hospital.

[CDC Coronavirus Disease 2019, Frequently Asked Questions](#)

Thanks to Dr. Ros Singleton for her presentation on RSV and COVID-19 this week. The recording is available on the [Distance Learning Network website](#)



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