Respiratory syncytial virus is reemerging. Be prepared. Stay vigilant.

While public health measures to reduce COVID-19 circulation resulted in declining rates of RSV infection across the globe in 2020, recent data have indicated that RSV cases are beginning to rise.¹⁻³

It has been hypothesised that increased susceptibility of the infant cohort and waning population immunity against RSV may overcome the NPI-related reduction in RSV transmission.²



*The arrow indicating the delayed start of Australia's 2020/2021 epidemic is included as point of comparison with France to demonstrate potential for late-season outbreak.²



Western Australia

- RSV activity increased from late September 2020, in the setting of relaxed physical distancing recommendations³
- At 18.4 months, median patient age was significantly higher than the upper range between 2012 and 2019 (7.3-12.5 months) (*P*<0.001)³

The reduction of COVID-19-related NPIs may herald a significant rise in RSV³ EYTD=end of year to date.

As the number of RSV cases begins to rise, staying aware of the potential changes in RSV activity occurring in your region is critical.

RSV=respiratory syncytial virus; NPI=nonpharmaceutical interventions.

With the resurgence of RSV comes the potential for an uncharacteristic outbreak.^{2,4}

Surveillance and modelling results suggest that a buildup of susceptibility during periods of NPIs may result in large outbreaks of RSV in the coming years. It's possible these RSV outbreaks may begin earlier or later and peak higher than typical seasons.⁴



Due to the risk of delayed RSV outbreaks, it is important to stay vigilant at all times—even beyond the typical RSV season.

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