


Did you know?

Respiratory syncytial virus (RSV) is not just a childhood illness^{1,2} – adults can catch it throughout their lives.¹⁻³



**What adults need
to know about RSV**

Hypothetical patient. For illustration purposes only.

Risk and impact of RSV in older adults

In some cases, respiratory syncytial virus (RSV) infection can be serious in older adults.^{9,12-14}

Older adults may have higher rates of severe disease that may lead to hospitalisation compared with younger adults, even if the person considers themselves to be healthy^{9,13,14}

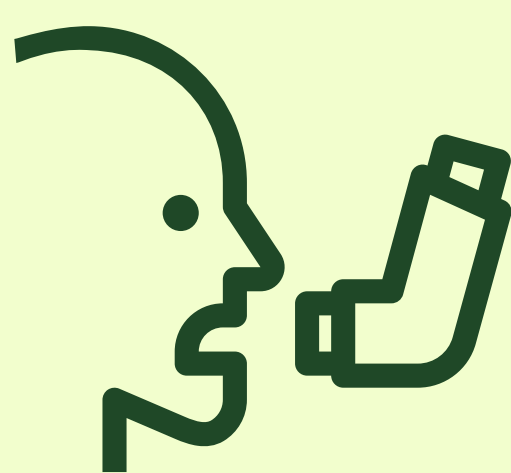
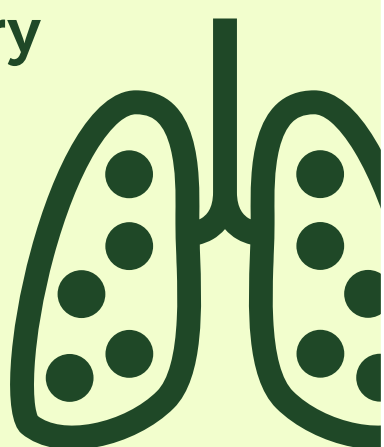
RSV and underlying health conditions

Age and any chronic medical conditions are significant factors when considering risk of RSV infection.^{9,13-15}

Certain underlying conditions can put older adults at greater risk for serious complications compared with those without the condition.¹⁴⁻¹⁶

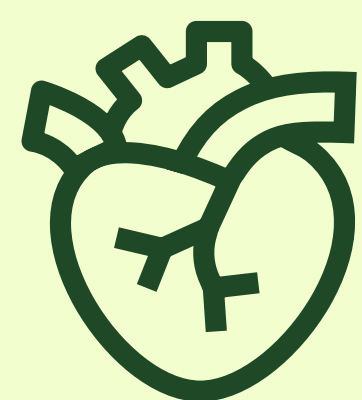
These include:

Chronic
Obstructive
Pulmonary
Disease
(COPD)



Asthma

Congestive
Heart Failure
(CHF)



Did you know?

The immune system typically weakens with age,^{1,10,11} and older adults are at greater risk of RSV infection compared with younger adults.¹⁷

What is respiratory syncytial virus (RSV)?

RSV is a contagious respiratory virus that not only affects infants^{1,2} but also adults throughout their lives.¹⁻³

RSV infections are most common in autumn and winter, but cases occur all year round.⁴⁻⁶



Hypothetical patients.
For illustration purposes only.

Adults are typically contagious for 3-8 days, but some people, especially those with weakened immune systems, can be contagious for longer.^{1,7}

Did you know?

People can get RSV multiple times throughout their lives.¹⁻³

How does RSV spread?

RSV can be spread through:^{1,2}



A person touching their face after having touched a contaminated surface

Coughs or sneezes from infected people



Direct contact with infected people



Hypothetical patients.
For illustration purposes only.

Did you know?

RSV can be easily spread to family members including adults and children.⁸

RSV in adults

Symptoms of RSV in adults can range from mild to severe and last up to 2 weeks.¹

RSV symptoms in adults may include:^{1,2,9}

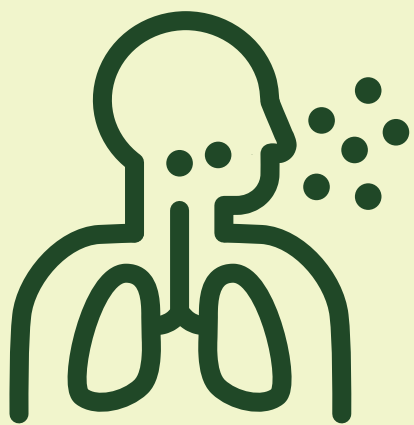
Nasal congestion



Cough



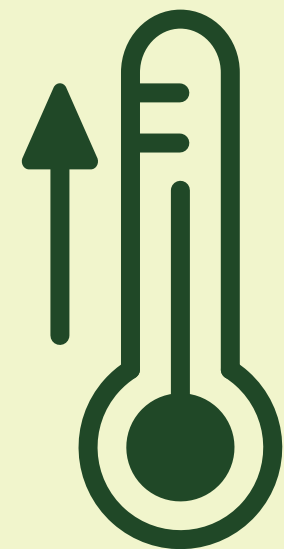
Shortness of breath and wheezing



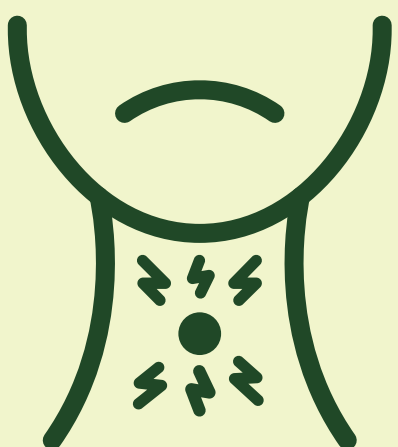
Tiredness



Fever



Sore throat



Runny nose



Body aches



Headache



Why could RSV be a problem for older adults?

The immune system typically weakens with older age and has a harder time fighting off infections, such as those with RSV.^{1,10,11}

Although usually mild,^{1,12} RSV can cause serious lower respiratory complications, such as pneumonia in older adults.^{1,9}

So, remember:

- RSV is a contagious respiratory virus that not only affects infants,^{1,2} but also adults throughout their lives¹⁻³
- RSV can be easily spread through the air, by direct contact or by contact with contaminated surfaces^{1,2}
- The immune system typically weakens with age,^{1,10,11} and older adults are at greater risk of RSV infection compared with younger adults¹⁷
- Although usually mild,^{1,12} RSV can cause serious lower respiratory complications, such as pneumonia in older adults^{1,9}

**For more information
about RSV, talk to your
healthcare professional.**

References: **1.** Kaler J et al. *Cureus* 2023;15(3):e36342. **2.** Kodama F et al. *Infect Dis Clin North Am* 2017;31:767–90. **3.** Openshaw PJM et al. *Annu Rev Immunol* 2017;35:501–32. **4.** Di Giallonardo F et al. *Viruses* 2018;10(9):476. **5.** Obando-Pacheco P et al. *J Inf Dis* 2018;217(9):1356–64. **6.** Bloom-Feshbach K et al. *PLoS One* 2013;8:e54445. **7.** Better Health Channel. Respiratory syncytial virus (RSV) [updated 2023 May 18; accessed 2023 August 11]. Available from: www.betterhealth.vic.gov.au/respiratory-syncytial-virus-rsv. **8.** Otomaru H et al. *Am J Epidemiol* 2021;190:2536–43. **9.** Tseng HF et al. *J Infect Dis* 2020;222(8):1298–1310. **10.** Ascough S et al. *Lancet Healthy Longev* 2022;3(6):e405–16. **11.** Watson A et al. *Ther Adv Respir Dis* 2021;15: 1753466621995050. **12.** Korsten K et al. *Eur Respir J* 2021;57(4):2002688. **13.** Saravanos GL et al. *Med J Aust* 2019;210(10):447–53. **14.** Branche AR et al. *Clin Infect Dis* 2022;74(6):1004–11. **15.** Prasad N et al. *Clin Infect Dis* 2021;73(1):e158–63. **16.** Kujawski SA et al. *PLoS One* 2022;17(3):e0264890. **17.** Mesa-Frias M et al. *J Manag Care Spec Pharm* 2022;28(7):753–65.