

The burden of **RSV** on European health systems

RESPIRATORY SYNCYTIAL VIRUS

RSV is the most common cause of **bronchiolitis** and **pneumonia** in infants

Nearly **EVERY** child is infected by RSV by the age of 2

RSV is a **leading cause of hospitalisation** for infants in their 1st year of life



EXPOSURE does not lead to immunity



MISDIAGNOSIS is frequent



There is **NO** active **TREATMENT**



RSV is chronically **UNDER-REPORTED**



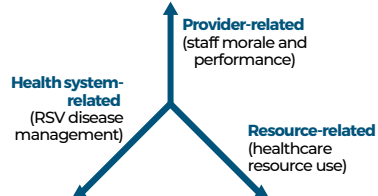
LIMITED PREVENTATIVE OPTIONS are available



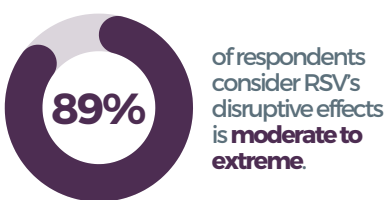
NEW SOLUTIONS will be available soon

OUR SURVEY IN 20 EU COUNTRIES

380 responses from **hospital and community settings** on **treatment, management, and burden** of RSV and **actions required** to mitigate health system disruption.



PERCEIVED DISRUPTION ON HEALTH SYSTEMS



WORKFORCE CHALLENGES



INCREASED WORKLOAD reported by 84% to 90% of respondents
STRESS & EXHAUSTION reported by 75% to 88% of respondents
BURNOUT reported by 58% to 63% of respondents

DISRUPTION IN COMMUNITY SETTING

PRIMARY CARE

79% report increased work hours to meet patient needs
67% report an increase in urgent GP referrals to emergency departments

EMERGENCY CARE

81% report increased patient wait time in the emergency department
75% report increased nosocomial risks for patients

DISRUPTION IN HOSPITAL SETTING

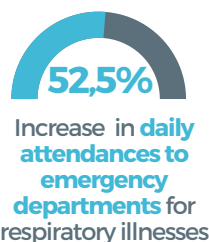
PAEDIATRIC WARDS

85% report reduced paediatric bed capacity
63% report nosocomial risks for patients

PAEDIATRIC ICU* (Intensive Care Units)

87% report reduced critical care bed capacity
86% report disruption to PICU routine

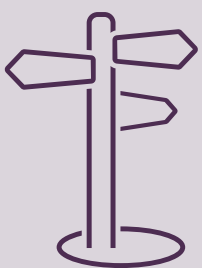
REPORTED HEALTHCARE RESOURCES USE



Survey respondents estimated that RSV patients occupied between **28%** and **54%** of **paediatric general beds** and between **8%** and **54%** of **paediatric ICU beds** in the peak RSV seasons

RECOMMENDATIONS

to minimise the disruption of paediatric RSV, alleviate the strain on health resources, reduce the impact on the workforce, and benefit RSV patients and their caregivers



1 BROADEN THE UNDERSTANDING OF RSV



2 MAINTAIN INFECTION CONTROL MEASURES



3 IMPROVE & EXPAND DIAGNOSTIC CAPABILITY



4 STANDARDISE THE MANAGEMENT OF RSV INFECTIONS



5 PREPARE FOR ACCESS TO IMMUNISATION

