National Center for Immunization & Respiratory Diseases



Epidemiology and Burden of Respiratory Syncytial Virus in Older Adults in the U.S.

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Advisory Committee on Immunization Practices June 23, 2022

Epidemiology and Burden of RSV in Older Adults

- RSV burden in older adults
- Comparison of influenza v. RSV burden
- Impact of co-morbidities

RSV Epidemiology and Burden

General Epidemiology

- Frequent cause of severe respiratory illness in older adults
- Lower awareness of RSV in adults among healthcare providers and the public
- Under detection: RSV testing often not performed
- No specific recommended vaccine or treatment in adults

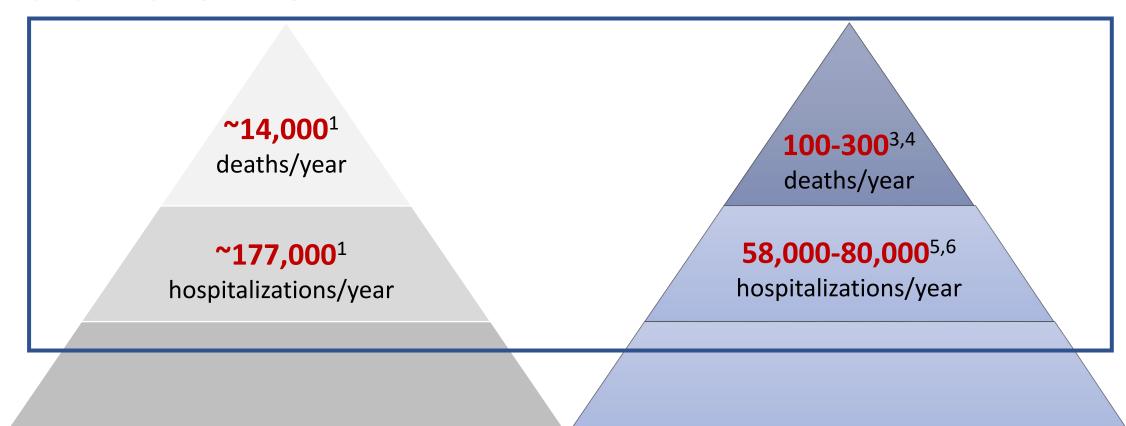
Among adults ≥65 years of age in the United States, RSV is associated with...

~14,000¹ deaths/year

~177,000¹ hospitalizations/year

~2,200,000² symptomatic illnesses/year

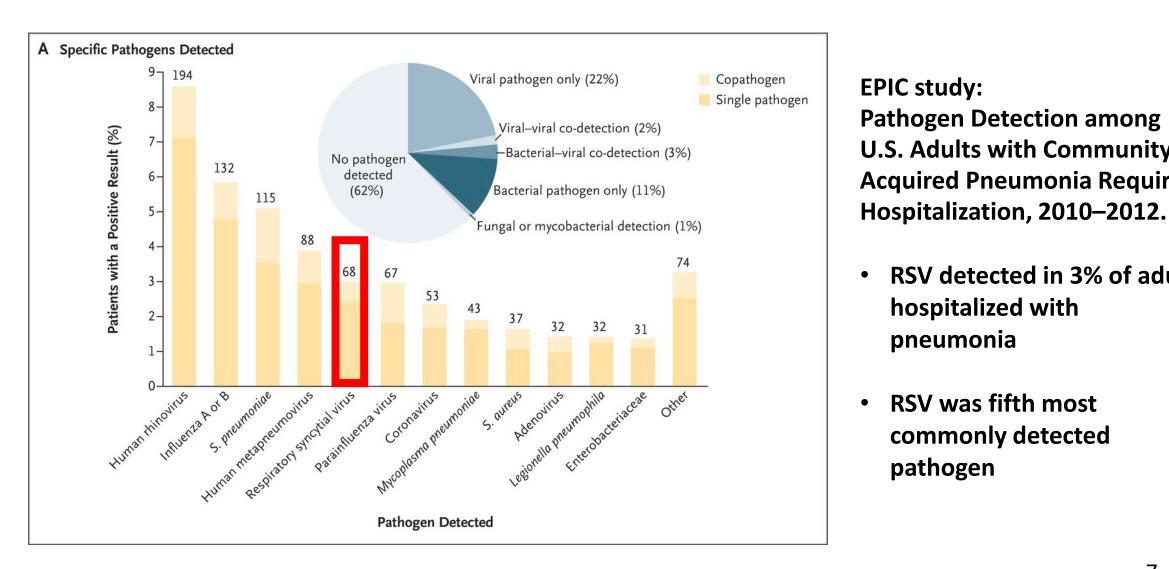
Burden of hospitalization and death: Older adults and children <5



Adults aged ≥65 years

Children aged <5 years

RSV is a frequent cause of pneumonia in hospitalized adults



EPIC study: Pathogen Detection among U.S. Adults with Community-Acquired Pneumonia Requiring

- RSV detected in 3% of adults hospitalized with pneumonia
- **RSV** was fifth most commonly detected pathogen

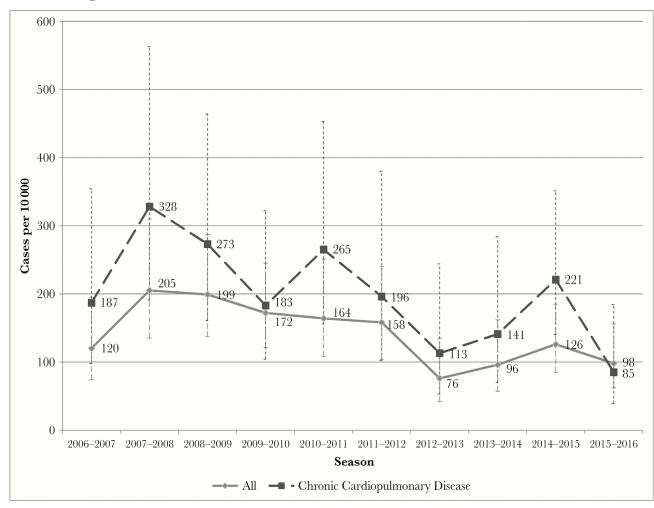
Annual Hospitalization Rates per 100,000 adults in the U.S.

Age group, years	3 seasons, 2 sites: 2017-2020 ¹	3 seasons, 1 site: 2006-2009 ²	National data (modeling study): 1997-2009 ^{4, 5}
18 – 49	7.7 – 11.9	n/a	9
50 – 64	33.5 – 57.5	82	28
≥65	136.9 – 255.6	254	84 (ages 65 – 74) 258 (75+)

High incidence of RSV hospitalization among older patients

¹ Branche AR, et al. Clin Infect Dis. 2021. doi: 10/1093/cid/ciab595. [Epub ahead of print]; Funding: Merck. Hospitalized adults ≥ 18 years old with ≥ 2 ARI symptoms or exacerbations of underlying cardiopulmonary disease in Rochester, NY and NYC; ²Widmer, K. et al. JID 2012; 206:56-62.. Funding: NIH/CDC. Widmer K et al. IORV 2014 May;8(3):347-52. Funding: CDC. ⁴Matias, et al. BMC Public Health, 2017 Mar 21;17(1):271. Funding: GSK. ⁵Average seasonal burden.

Substantial burden of medically attended outpatient visits for RSV in older adults



- 11% of outpatients with acute respiratory illness
- 19% had a serious outcome¹
- Rates nearly 2x higher in patients with chronic cardiopulmonary disease compared with others

Belongia, et al. Open Forum Infect Dis, Volume 5, Issue 12, December 2018, ofy316, https://doi.org/10.1093/ofid/ofy316 cohort of adults ≥60

Seasonal incidence and 95% confidence limits of medically attended RSV by age group in a community cohort of adults ≥60 years old

¹Serious outcome defined as hospitalization, emergency department visit and pneumonia.

Among adults ≥65 years of age in the United States, RSV is associated with a similar burden of disease as influenza



~177,000¹ hospitalizations/year

~2,200,000² symptomatic illnesses/year

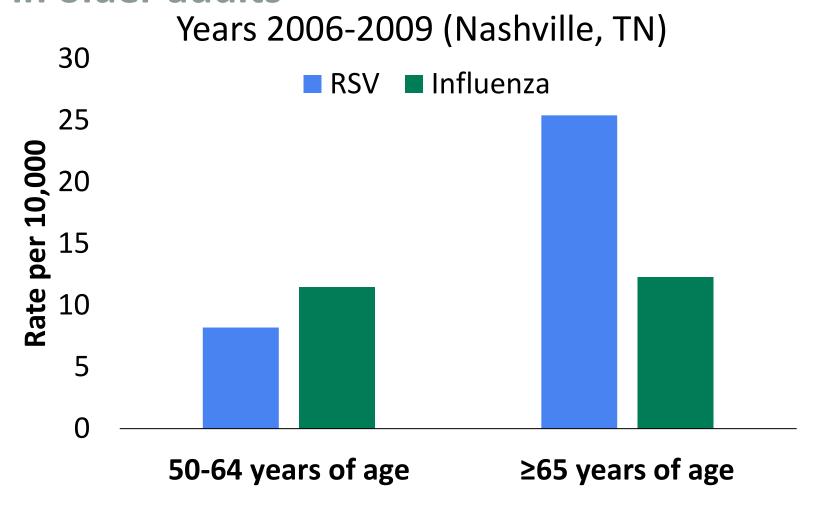
12,000-43,000³ deaths/year

128,000-467,000³ hospitalizations/year

1,400,000-5,100,000³ symptomatic Illnesses/year

RSV Influenza

Similar RSV and influenza hospitalization rates and severity in older adults



Adults ≥65 years hospitalized with acute respiratory illness over 3 seasons

- 6.1%: RSV
- 6.5%: Influenza
- Similar clinical severity

Clinical outcomes and co-morbid conditions

Respiratory Syncytial Virus Associated Hospitalization Surveillance Network (RSV-NET)



Underlying medical conditions among adults ≥18 years hospitalized for RSV: RSV-NET 2014-2018

N=4,970	
14 4,570	%
2833	57.0
2486	50.0
1692	34.0
1378	27.7
1126	22.7
1041	21.0
934	18.8
332	6.7
132	2.7
429	8.7
	2833 2486 1692 1378 1126 1041 934 332 132

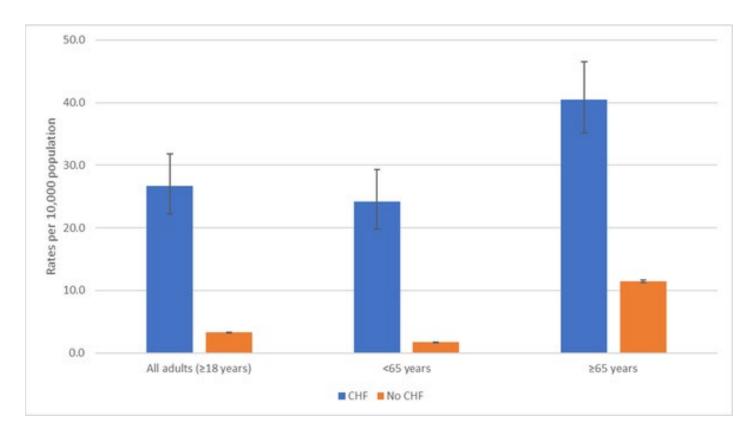
94% of hospitalized adults have underlying medical conditions:

• 46%: 1-2 conditions

• 48%: ≥3 conditions

14

RSV hospitalization rates much higher in those with congestive heart failure: RSV-NET 2015-2017



28% hospitalized cases had CHF

Higher rates in adults with CHF:

• Overall: 8x

• 50-64: 14x

≥65 years: 3.5x

Adjusted rates (per 10,000 population) of RSV-associated hospitalization by congestive heart failure (CHF) status, RSV-NET, 2015–2017 (N = 2042).

RSV in immunocompromised adults at high risk for severe disease

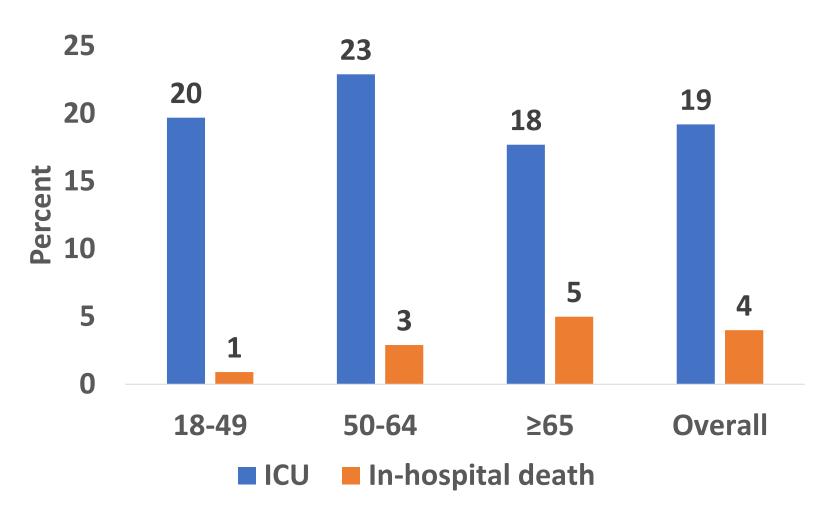
- Greatest risk among:
 - Lung transplant recipients¹
 - Hematopoietic cell transplant (HCT) recipients²
 - Other immunocompromised populations including patients receiving chemotherapy for lymphoma and leukemia
- Incidence of symptomatic illness: 12% (2-year period) and 16% (single season) in lung transplant patients^{3,4}
- Severe outcomes in immunocompromised patients
 - Progression to lower respiratory tract infection common
 - Mortality high: 26% among HCT with proven/probable lower respiratory tract infection⁵

Long-term care facility (LTCF) residents vulnerable to outbreaks and serious illness

- Frequent cause of symptomatic illnesses in LTCF residents¹
- High attack rate in outbreak settings
 - » **13.5**% over 1 month²
- Study of Medicare data estimated RSV-attributable hospitalizations²
 - 2,909,106 LCTF residents ≥65 years
 - 6,196 cardiorespiratory hospitalizations

Attributable cost	\$51,503,105 (\$38,899,971 – \$64,106,240)
Length of stay (LOS)	5.3 days (SE 4.6)
Attributable LOS	32,008 days (95% CI 24,267 – 39,749)

Outcomes among adults ≥18 years hospitalized for RSV: RSV-NET 2017-18 to 2019-20 seasons (n=8,214)

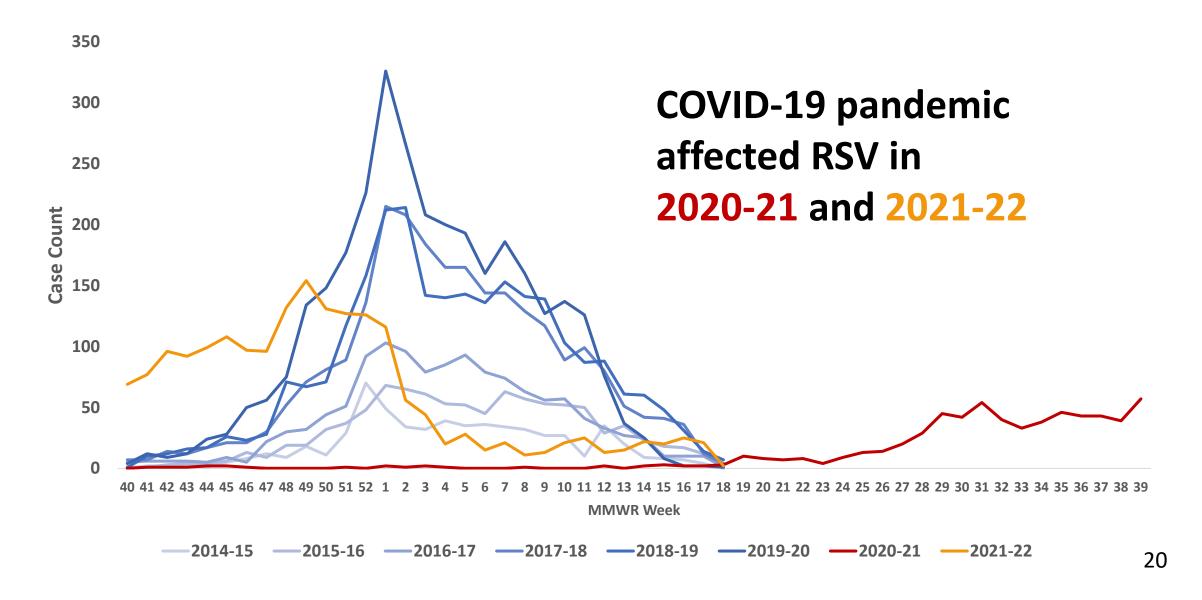


Severe
outcomes
frequent among
adults
hospitalized for
RSV of all ages

RSV leads to exacerbations of underlying chronic disease and long-term sequelae

- RSV infections can result in:
 - Acute myocardial infarction
 - -Stroke
 - Exacerbation of asthma and chronic obstructive pulmonary disease
 - Long-term decline in respiratory function
 - -Other sequelae

RSV hospitalizations in adults by season: RSV-NET 2014-2022



RSV is a major cause of severe illness in older adults

- Frequent, often unrecognized, cause of severe respiratory illnesses
- Burden of severe disease may be comparable to influenza, with variability across seasons
- Adults with co-morbidities, immunocompromised adults, and long-term care facility residents may be particularly at risk for severe illness
- High proportion of those hospitalized with RSV have severe outcomes, including ICU admission and death
- Long-term health consequences

Acknowledgements

- Respiratory Viruses Branch, Division of Viral Diseases
 - RSV-NET team
 - Aron Hall
 - Michael Melgar
 - Meredith McMorrow
- ACIP RSV Adult Work Group
- RSV-NET Site Principal Investigators and Surveillance Officers
- Emerging Infections Program
- State and local health partners
- Many others....

Questions?

For more information, contact CDC 1-800-CDC-INFO (232-4636)

TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

