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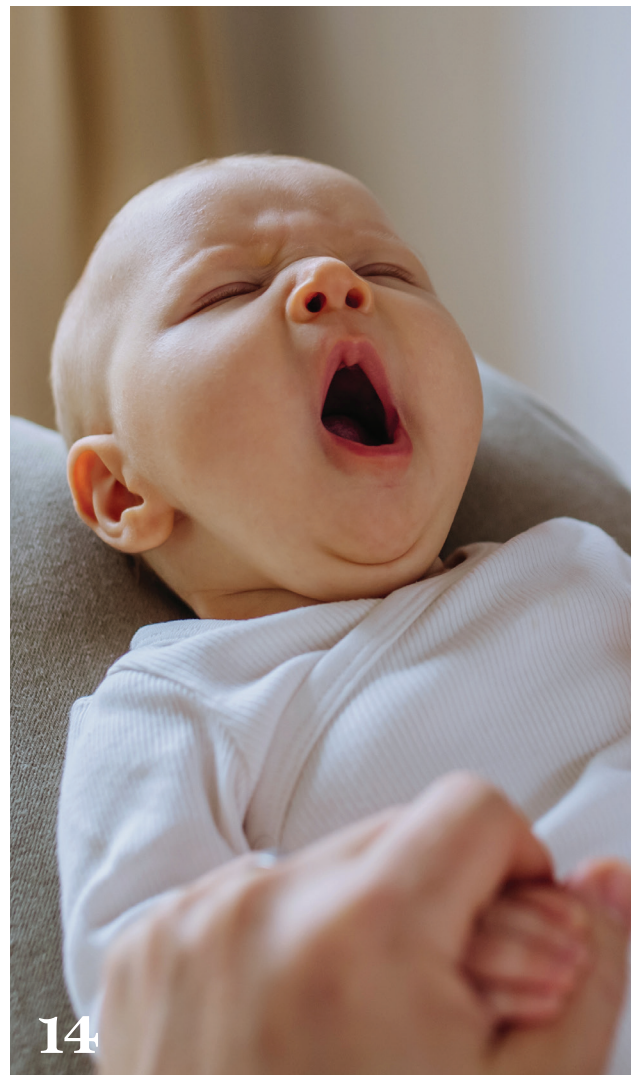
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THE LATEST ON

RESPIRATORY SYNCYTIAL VIRUS (RSV)

DO PARENTS KNOW ENOUGH?

Knowing what RSV is and how to prevent it gives parents the confidence to protect their babies, and a study shows that many families in the U.S. are ready to learn. Eighty-eight percent of parents believed that immunizations help keep children safe from diseases, and about 84% said they follow their doctor's advice. Many had questions and concerns about side effects. Knowledge among parents varied, with some being well-informed and others knowing very little. With nearly half aware of new RSV prevention options and 78% interested in discussing them with their doctor, these findings highlight the need for clear, proactive communication from health care providers to support informed decision-making and adoption of preventive measures.

SOURCE: *Open Forum Infectious Diseases*

74% Amount of parents in the U.S. who reported having at least a moderate level of knowledge about RSV.

SOURCE: National Minority Quality Forum

UP TO 80,000 Number of children younger than 5 years old who are hospitalized each year due to RSV infection in the U.S.

SOURCE: National Minority Quality Forum

MORE THAN JUST A COLD

Symptoms of RSV can look like those of a regular cold at first, leading families to continue close contact without realizing that the virus is spreading. Researchers followed 200 U.S. households for a year to understand how RSV spreads and found that the virus most often entered homes through infants or young children. About 1 in 10 families had more than one person infected within two weeks, showing household transmission. Being mindful when someone has cold-like symptoms and planning prevention with your child's doctor may help reduce the chance of others getting sick.

SOURCE: *Clinical Infectious Diseases*

WHERE YOU LIVE MATTERS

RSV outbreaks often last longer in urban areas and affect more babies under 1 year of age than in rural areas. A recent U.S. study linked this to higher population density and more frequent daily contact. In cities, children were more likely to be in group settings when at day care, where close contact made it easier for infection to spread beyond the usual RSV season. In rural areas, limited daily contact meant shorter outbreaks and infections at slightly older ages. Researchers suggest that year-round access to monoclonal antibody protection could help reduce off-season outbreaks.

SOURCE: *Science Advances*



This content was created using several editorial tools, including AI, as part of the process. Human editors reviewed this content before publication.

STATS & FACTS

By Kendall K. Morgan

Reviewed by Brunilda Nazario, MD,
WebMD Chief Physician Editor, Medical Affairs

93%

Effectiveness of RSV antibodies in preventing hospitalization related to RSV infection in infants.



15%

Estimated amount of childhood asthma cases that could be avoided by preventing RSV during infancy, according to a recent study.

6 IN 10

Number of adults in a survey who didn't know you can spread RSV before you have symptoms.

89%

Effectiveness of injectable RSV antibodies in preventing an acute respiratory infection requiring medical attention.



UP TO 19 MONTHS

Ages when a dose of RSV antibody is recommended for children who have certain risk factors including lung problems related to premature birth. It's recommended for all unprotected babies under 8 months.



85%

Amount of adults in a recent survey who said they didn't think they'd ever had RSV. Nearly everyone gets RSV by age 2.



4 to 6

Number of days it can take after exposure to RSV before you or your child may have symptoms.



SOURCES: JAMA Pediatrics, CDC, Asthma and Allergy Foundation of America, The Lancet, Annenberg Public Policy Center



How fast can RSV turn

into a serious lung infection during RSV season?

INDICATION

Beyfortus is a prescription medicine used to help prevent a serious lung disease caused by Respiratory Syncytial Virus (RSV) in:

- Newborns and babies under 1 year of age born during or entering their first RSV season.
- Children up to 24 months of age who remain at risk of severe RSV disease through their second RSV season.

IMPORTANT SAFETY INFORMATION

Your child should not take Beyfortus if your child has a history of serious allergic reactions to nirsevimab-alip or any of the ingredients in Beyfortus.

Please see additional Important Safety Information and Brief Summary of Patient Information on the following pages.

You are encouraged to report side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

 **Beyfortus**[®] | 50 mg
(nirsevimab-alip) | 100 mg
Injection

Join the 6,000,000 moms* and counting who've protected their babies with **Beyfortus**[®] (nirsevimab-alip) | 50 mg | 100 mg | Injection



Unlike vaccines, which work by helping train your child's body to make antibodies, Beyfortus is a preventive antibody, which means it can provide your child with the antibodies they lack. Beyfortus may not protect all children.



Beyfortus helps protect against serious RSV lung infection that may require trips to the doctor, urgent care, ER, or hospital.



Beyfortus is given directly to your baby and provides fast-acting protection against serious RSV lung infection.



Beyfortus is CDC recommended for babies before their first RSV season.

Ask your child's doctor about Beyfortus today.

*Estimated based on sales data (through Oct 2024).

IMPORTANT SAFETY INFORMATION (CONTINUED)

Before your child receives Beyfortus, tell your healthcare provider about all of your child's medical conditions, including if your child:

- has ever had a reaction to Beyfortus.
- has bleeding or bruising problems. If your child has a problem with bleeding or bruises easily, an injection could cause a problem.

Tell your healthcare provider about all the medicines your child takes, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Your infant should not receive a medicine called palivizumab if they have already received Beyfortus in the same RSV season.



Just like that.

Even though severe RSV is uncommon, it's still the top cause of hospital stays in babies under age 1.



Ask about Beyfortus before your baby's first RSV season.

IMPORTANT SAFETY INFORMATION (CONTINUED)

Serious allergic reactions have happened with Beyfortus. Get medical help right away if your child has any of the following signs or symptoms of a serious allergic reaction:

- swelling of the face, mouth, or tongue
- difficulty swallowing or breathing
- unresponsiveness
- bluish color of skin, lips, or under fingernails
- muscle weakness
- severe rash, hives, or itching

The most common side effects of Beyfortus include rash and pain, swelling, or hardness at the site of your child's injection. These are not all the possible side effects of Beyfortus. Call your healthcare provider if you have questions about side effects.

Please see Brief Summary of Patient Information on the following page.

You are encouraged to report side effects of prescription drugs to the FDA.

Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

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<p>BEYFORTUS® (Bay for tus) (nirsevimab-alip) injection, for intramuscular use</p> <p>Rx Only</p> <p>Summary of Information about BEYFORTUS</p>
<p>What is BEYFORTUS?</p> <p>BEYFORTUS is a prescription medicine that is used to help prevent a serious lung disease caused by Respiratory Syncytial Virus (RSV) in:</p> <ul style="list-style-type: none"> • newborns and babies under 1 year of age born during or entering their first RSV season. • children up to 24 months of age who remain at risk of severe RSV disease through their second RSV season. <p>BEYFORTUS is an antibody that contains nirsevimab-alip which is used to help prevent RSV disease for 5 months. It is not known if BEYFORTUS is safe and effective in children older than 24 months of age.</p>
<p>Your child should not receive BEYFORTUS if your child has a history of serious allergic reactions to nirsevimab-alip or any of the ingredients in BEYFORTUS. See the end of this Summary of Information for a complete list of ingredients in BEYFORTUS.</p>
<p>Before your child receives BEYFORTUS, tell your healthcare provider about all of your child's medical conditions, including if your child:</p> <ul style="list-style-type: none"> • has ever had a reaction to BEYFORTUS • has bleeding or bruising problems. If your child has a problem with bleeding or bruises easily, an injection could cause a problem. <p>Tell your child's healthcare provider about all the medicines your child takes, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Your infant should not receive a medicine called palivizumab if they have already received BEYFORTUS in the same RSV season.</p>
<p>How is BEYFORTUS given?</p> <ul style="list-style-type: none"> • BEYFORTUS is given as an injection, usually in the thigh (leg) muscle, by your child's healthcare provider. • Your child should receive BEYFORTUS before or during the RSV season. RSV season is the time of year when RSV infections are most common, usually occurring fall through spring. Your healthcare provider can tell you when the RSV season starts in your area. • Your child may still get RSV disease after receiving BEYFORTUS. Talk to your child's healthcare provider about what symptoms to look for. • If your child has heart surgery, your child's healthcare provider may need to give your child an additional BEYFORTUS injection soon after surgery

<p>What are the possible side effects of BEYFORTUS?</p> <ul style="list-style-type: none"> • Serious allergic reactions have happened with BEYFORTUS. Get medical help right away if your child has any of the following signs or symptoms of a serious allergic reaction. <ul style="list-style-type: none"> ○ swelling of the face, mouth or tongue ○ difficulty swallowing or breathing ○ unresponsiveness ○ bluish color of skin, lips or under fingernails ○ muscle weakness ○ severe rash, hives or itching <p>The most common side effects of BEYFORTUS include rash, and pain, swelling or hardness at the site of your child's injection. These are not all of the possible side effects of BEYFORTUS. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.</p>
<p>General information about the safe and effective use of BEYFORTUS.</p> <p>Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. You can ask your pharmacist or healthcare provider for information about BEYFORTUS that is written for health professionals.</p>
<p>What are the ingredients in BEYFORTUS?</p> <p>Active ingredient: nirsevimab-alip</p> <p>Inactive ingredients: arginine hydrochloride, histidine, L-histidine hydrochloride monohydrate, polysorbate 80, sucrose and water for injection.</p>
<p>The risk information provided here is not comprehensive. To learn more, talk about BEYFORTUS with your health care provider. For the FDA- approved product labeling or more information go to www.beyfortus.com or call 1-855-239-3678 (1-855-BEYFORTUS).</p>
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ILLNESS PREVENTION FOR INFANTS: THE BASICS

Inform yourself now to be ready when cold and flu season starts

By Kendall K. Morgan

Reviewed by Brunilda Nazario, MD,
WebMD Chief Physician Editor, Medical Affairs

Some of the illnesses you'll want to prevent your baby from getting in the first year may sound unfamiliar, and there's a good reason for that, says Lori Handy, MD, an associate director of the Vaccine Education Center and an infectious diseases doctor at Children's Hospital of Philadelphia in Pennsylvania.

"I think it's really helpful for new parents to understand that a lot of infections we try to prevent in new babies are unfamiliar to parents due to the success of vaccines," Handy says. "Meningitis due to bacteria or pneumococcus we see infrequently because of vaccines. Diphtheria and polio we don't see at all because of the success of vaccines."

PLAN AHEAD

Handy says getting your baby vaccinated on time will protect them when they're most at risk for severe illnesses. To make sure you're ready, ask your questions now.

"In thinking ahead about a new child, it's a good time to talk to your pediatric provider," Handy says. "You'll want to understand how they deliver vaccines and how easy it is to get an appointment. Make a plan to vaccinate according to the recommended schedule."

RSV PREVENTION

Handy says parents should know it's a "great moment" for preventing RSV, which is the leading cause of infant hospitalizations. Babies born during or entering their first



RSV season can now get a shot of RSV antibodies along with their other vaccines to protect against the virus. Giving your infant antibodies also can "prevent hospitalization and reduce medical visits a child may need due to RSV," Handy says.

TAKE STEPS YEAR-ROUND

Handy recommends ensuring parents, other family members, and childcare providers are current on their vaccines, too. Frequent handwashing and avoiding people who are sick also are key.

Remember that "certain viruses are very seasonal," Handy says. "Others circulate year-round. Any time of year, a child may get sick with something."

Taking steps for illness prevention is essential for keeping your infant—and your whole family—healthy all year long.

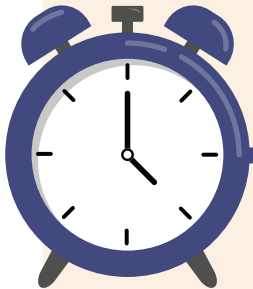
A GROWING PROTECTION

How your baby's immune system forms over time

By Rachel Reiff Ellis Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

A baby's immune system develops over the first 1,000 days of their life. Here are some key milestones:

IN UTERO: The immune system starts developing in the womb. Babies initially get their mother's antibodies through the placenta during the third trimester (last three months) of pregnancy. The type of antibodies your baby gets depends on your levels of immunity. Antibodies help immune systems "remember" a previous infection to help get rid of it. By using the mother's antibodies, babies get some protection, even though they haven't been exposed to germs yet.



BIRTH: The mother passes antibodies to the baby through the placenta and breastfeeding, providing immediate protection. But this isn't full protection—your baby's immune system is still strengthening. If your baby is premature, they'll be even more vulnerable to infection because they won't have received as many antibodies as a full-term infant.



FIRST FEW WEEKS: The baby's immune system is immature and they are vulnerable to infections. The antibodies they get from their mother are still working at this point, and breastfeeding boosts this immunity, too.



AGE 3: Eighty percent of a baby's immune system is set. But it's still considered immature until about age 7. Kids are also often in group settings because of day care and school, and kids often explore the world through their mouths, so germs and sickness are still a big risk. It's important to teach proper handwashing and how to properly cover a cough and sneeze while they're young.



2 TO 3 MONTHS: The baby's immune system is considered to be adequately functioning. Protection is ramping up, but your baby is still at high risk for serious illness if they get germs like the respiratory syncytial virus (RSV) or the common cold. Your doctor can give the RSV monoclonal antibody to children under age 1 while their immune system is maturing, during or just before RSV season.



CAN MY CHILD GET SICK IN THE OFFSEASON?

Risk is lower, but prevention is still crucial

By Rachel Reiff Ellis

Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

In most parts of the United States, respiratory syncytial virus (RSV) season begins in the fall, peaks during the winter, and declines by spring. People tend to spend more time indoors during colder months in close contact during these months. This increases the risk of respiratory viruses like RSV spreading.

But RSV doesn't take a vacation in the warm months. It's still around and can infect your child. Here's what you need to know.

UNLIKELY BUT POSSIBLE

It's absolutely possible to get RSV in nonpeak months, but the risk goes down. This is because the virus is circulating at lower levels.

"Outbreaks can occur during the offseason too, especially in settings like day care centers or nursing homes where people are in close contact," says Debbie-Ann Shirley, MD, MPH, clinical associate professor in the Department of Pediatrics and division chief of pediatric infectious disease in the University of Florida College of Medicine in Gainesville.

The timing and severity of RSV season can vary from year to year and community by community, says Shirley.

"Notably, Florida often experiences an earlier onset and a longer duration of RSV season compared to other regions of the country," she says.

REMAIN VIGILANT

No matter the season, prevention is key. This is especially true for those at highest

risk of severe illness from the infection.

"This includes really young infants, babies born prematurely, and children with heart and lung conditions," says Daniel Smith, MD, an infectious disease specialist with Bryan Health in Lincoln, NE.

Talk to your doctor about how to



MASKOT/VIA GETTY IMAGES

keep your child safe all year, and create habits that will help ward off sickness.

“Whether in season or offseason, parents can help to protect children from RSV by practicing good hand hygiene and avoiding close contact with people who are ill,” Shirley says.

“Families should also avoid smoke exposure, as smoke is harmful to the lungs, especially young, developing ones.”

Practice preventive measures to protect against respiratory viruses all year-round. Talk to a trusted health care provider if you have concerns about RSV and your child.

WATCH FOR SYMPTOMS

Know these RSV signs in infants:

- + Runny nose
- + Cough
- + Irritability
- + Decreased activity
- + Eating or drinking less
- + Apnea (pauses in breathing for more than 10 seconds)

MAKE SURE YOUR BABY GETS REST

Sleep is essential for infant growth, development, immunity, and more

By Kendall K. Morgan Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

Sleep is essential to the health of our bodies and brains at any age. For new babies, sleep and rest is especially vital. Making sure your child is getting enough rest and sleep will support their growth and development all year round. It helps support their developing immune systems, too, says Meredith Grossman, MD, a pediatrician at Mount Sinai Pediatrics Faculty Practice Associates in New York City.

“There are immune factors produced when you’re sleeping and these can help you to fight infections,” Grossman explains. “When you’re not getting enough sleep, you aren’t producing these immune factors and cells so you’re less equipped to fight infection.”

YOUR CHILD’S SLEEP NEEDS

Your baby’s sleep habits and needs will change over time as your child grows. Here’s a rough guide of what to expect:

Newborn. Your baby will sleep about 17 hours per day, but they may not sleep more than two hours at a time.

3 months. Your baby will continue sleeping often during the day, but they may begin to sleep without waking for six to eight hours through the night.

4 to 12 months. Your baby still needs 12 to 16 hours of sleep each day, including daytime naps.

1 to 2 years. Your growing toddler still needs an afternoon nap, getting in 11 to 14 hours of sleep each day.

SLEEP AND IMMUNITY

Studies have linked poor quality sleep or not enough sleep to an increased risk for getting sick after exposure to viruses. While more studies have been done in adults than kids, sleep also will affect the immunity your child builds in those critical early months.

“There is data from studies in adults that immune response to immunizations is decreased if there is sleep deprivation,” says Mary Wagner, MD, a pediatrician and sleep medicine specialist at University of Florida Health in Gainesville. “Additionally, studies have shown those with decreased sleep may be more susceptible to respiratory infections.”

TIPS FOR BETTER SLEEP

Wagner says it’s important for new parents and other caregivers to recognize how much sleep their child needs. Pay attention to signs of sleepiness in your baby, which might be quite



individual. Some common signs of sleep readiness in infants include rubbing their eyes, yawning, looking away, or crying.

To support your child's sleep, it helps to prepare the right environment. Wagner recommended a quiet space that's dark without screens or other light sources. Develop a daily routine around your child's sleep needs and stick to it as best you can.

OVERCOMING SLEEP CHALLENGES

If you run into challenges with sleep or a sleep regression, you're

not alone. "Even if you have a good sleeper, then they get a cold, their first tooth, or you travel, it can be two steps forward, one step back," Grossman says.

Grossman says it's OK to give your child a little extra TLC at night when needed. As soon as things settle down, get right back to your regular sleep routine. If you find your baby just isn't sleeping enough, Grossman says, reach out to your pediatrician for help.

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 every day



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