

WebMD[®]

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FALL 2026



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THE LATEST ON RESPIRATORY SYNCYTIAL VIRUS (RSV)

PROTECTION IS KEY

Although RSV is one of the leading reasons babies end up in the hospital each fall and winter, knowing your options to help protect against RSV can make all the difference. A U.S. study following more than 3,000 infants found that babies who received a protective monoclonal antibody were 68% less likely to need a medical visit, 80% less likely to be hospitalized, and up to 85% less likely to develop severe illness requiring ICU admission. These results support the benefits of protecting against RSV and highlight the importance of ensuring that all eligible babies receive it at the appropriate time.

SOURCE: JAMA Network Open

97% Amount of children who get RSV before their second birthday.

SOURCE: National Minority Quality Forum

ABOUT 2.1 MILLION

Number of clinic visits among children younger than 5 linked to RSV each year in the U.S.

SOURCE: National Foundation for Infectious Diseases

START THE CONVERSATION

Uncertainty about RSV monoclonal antibodies remains common among new parents. In a U.S. study involving 28 interviews with 37 parents of newborns, only about 4 in 10 planned to choose a monoclonal antibody to help protect their baby from RSV. Researchers found that limited awareness, concerns about side effects, and misinformation often left parents unsure or hesitant. Parents who trusted their pediatricians and understood the risks of RSV were more likely to accept protection. Discussing RSV with your doctor during pregnancy may help families make informed decisions with greater confidence.

SOURCE: Pediatrics

BEYOND THE FIRST INFECTION

Can babies hospitalized for RSV remain at risk for additional respiratory illness during the same season? When following more than 20,000 infants hospitalized for RSV, it was found that 15% developed another lung infection before the RSV season ended, with many requiring another hospitalization or an emergency room visit. Premature babies, infants with a lower birth weight, and those with older siblings at home were among those at a higher risk. Experts believe these findings underscore the value of improving access to early RSV antibody protection for infants.

SOURCE: Children



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

STATS & FACTS

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



Less than 8 MONTHS

Recommended age for infants to receive an RSV antibody if they are born during or are entering their first RSV season.

74%

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

1 week

Suggested time frame for infants born during RSV season to receive a monoclonal antibody, ideally before leaving the hospital.



About 95%

Amount of pediatricians who said they felt confident discussing and recommending the protective RSV antibody to parents and caregivers.



About 96%

Amount of pediatricians who agreed that the monoclonal antibody is effective against severe RSV disease in infants.



52%

Drop in RSV-related hospitalization rates among infants ages 0 to 2 months during the 2024-2025 season following the use of products that help protect against RSV, such as a monoclonal antibody.

44%

Amount of parents or caregivers who were concerned about the safety of the RSV monoclonal antibody, based on a survey.



SOURCES: CDC, National Minority Quality Forum

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



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

RSV is unpredictable

**Do you have a plan to
help protect your baby?**

RSV (respiratory syncytial virus) usually causes cold-like symptoms, but it can turn into a serious lung infection, such as bronchiolitis and pneumonia, in any baby.



You can't predict which babies this will happen to, not even based on their sibling's experiences.



A typical RSV season lasts 5 months. It usually lasts from fall to spring and peaks in the winter.

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.



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

**Beyfortus:
a layer of
protection
for your baby
this RSV season.**

**There's no 100% certain way to prevent
your baby from being exposed to RSV.
Your baby can get an extra layer of
protection from serious RSV lung infection
with Beyfortus.**

Beyfortus is a preventive antibody, not a vaccine. Preventive antibodies are given directly to baby to target the RSV virus. Beyfortus helps provide fast-acting protection against serious RSV lung infection. The antibodies then work like a bodyguard, fighting against RSV for your baby, which is what their immune system needs at this age.

IMPORTANT SAFETY INFORMATION

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.

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



**Make a
plan today**

**Over 11 million
babies have already
been immunized
with Beyfortus.**

**Ask your baby's doctor
about getting Beyfortus
while you're here.**

IMPORTANT SAFETY INFORMATION

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.

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.

sanofi

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MAT-US-2607655-v1.0-07/2026

Rx Only BEYFORTUS® (Bay for tus) (nirsevimab-alip) injection, for intramuscular use Summary of Information about BEYFORTUS
What is BEYFORTUS? BEYFORTUS is a prescription medicine that is 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. 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.
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.
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 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.
How is BEYFORTUS given? - 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

What are the possible side effects of BEYFORTUS? 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 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.
General information about the safe and effective use of BEYFORTUS. 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.
What are the ingredients in BEYFORTUS? Active ingredient: nirsevimab-alip Inactive ingredients: arginine hydrochloride, histidine, L-histidine hydrochloride monohydrate, polysorbate 80, sucrose and water for injection.
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).
Manufactured by: Sanofi Vaccines US Inc. Swiftwater, PA 18370 USA US License No. 1725 At: AstraZeneca Pharmaceuticals LP, Frederick, MD 21703 USA BEYFORTUS is a registered trademark of the Sanofi group of companies. ©Sanofi 2026 MAT-US-2404205-v3.0-05/2026

WHAT NEW MOMS SHOULD KNOW

When it comes to babies, RSV is not just the common cold

By Sonya Collins

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

If you're a new or expectant mom this RSV season, it's time to learn about this potentially serious virus and how it can affect babies.

RSV, or respiratory syncytial virus, is a highly contagious and extremely

common virus that gets into the nose, throat, and lungs. In older children and adults, it's usually no more serious than the common cold. But in infants, RSV can be much more serious.

"The younger a child is when they catch RSV, the worse it's going to be," says Patrick Mularoni, MD, a pediatric emergency physician at Johns Hopkins All Children's Hospital in St. Petersburg, FL.

HOW RSV AFFECTS A BABY'S LUNGS

RSV can get into the tiniest breathing tubes of the lungs.

"Babies' airways are narrow to begin with," Mularoni says. "Add inflammation, and they get really small." Even a little swelling can make it harder to move air through them.

That can lead to wheezing, labored breathing, not eating, dehydration, and low oxygen. Some babies need breathing support. Some develop potentially serious bronchiolitis or pneumonia. For these reasons, RSV is among the leading causes of infant hospitalization in the U.S.

HOW RSV SPREADS

RSV is spread through droplets when someone coughs or sneezes, close contact, and contaminated surfaces. Because you can get it more than once, siblings, relatives, and visitors may unknowingly bring it near a newborn.

Most little ones have had it by age 2. "It's not a question of if your child's going to get RSV. It's when," Mularoni says.

Still, it's best to delay that first infection as long as possible.

During RSV season, wash hands often, keep sick people away from your baby, clean frequently touched surfaces, and avoid smoke exposure, which makes babies more vulnerable to RSV. Depending when your baby was born, they may be eligible for a protective antibody. Ask your doctor.



MY BIRTH PLAN

Details to consider ahead of delivery day

Reviewed by Neha Pathak, MD, WebMD Chief Physician Editor

While you can't direct every aspect of your baby's birth, you can have conversations with your care team in the weeks ahead to prepare for what may come. Use this checklist to think through your preferences.

YOUR SUPPORT TEAM

Who do you want in the room?

- ☐ Partner/spouse
- ☐ Family member
- ☐ Friend
- ☐ Doula
- ☐ Other: _____

Ask your doctor:

How many support people can I have with me in my labor room?

What guidelines do support team members have?

PRENATAL CHECKUP

What are the best ways to protect my baby from infectious diseases including:

- ☐ Influenza
- ☐ COVID-19
- ☐ RSV
- ☐ Whooping cough
- ☐ Other: _____

BIRTH ENVIRONMENT

I'd like:

- ☐ Calm, quiet
- ☐ Energized, words of encouragement
- ☐ Dim lighting
- ☐ Music
- ☐ Minimal interruptions

Ask your doctor:

Can I limit the number of people (such as hospital staff) in my labor room?

COMFORT DURING LABOR

I'd like to try:

- ☐ Walking
- ☐ Changing positions
- ☐ Birthing ball
- ☐ Shower or bath (if available)
- ☐ No preference

Ask your doctor:

What monitoring is required during labor?

Will I be able to eat or drink during labor?

Which positions can I try during labor?

MEDICAL PAIN MANAGEMENT

- ☐ I prefer an unmedicated labor
- ☐ IV pain medication
- ☐ Epidural
- ☐ I'm open to discussing options as labor progresses

Ask your doctor:

What pain relief options do you offer during labor?

What is my epidural window?

DELIVERY PREFERENCES

I'd prefer:

- ☐ Avoiding assisted delivery with forceps or vacuum extraction if possible
- ☐ Delaying cord clamping
- ☐ Saving or donating cord blood
- ☐ Immediate skin-to-skin contact with my baby
- ☐ My labor support person to cut the umbilical cord
- ☐ Special instructions for the placenta
- ☐ Other: _____

Ask your doctor:

What interventions do you commonly use during delivery?

How will you communicate with me if unexpected changes need to happen?

IN CASE OF A C-SECTION

I'd prefer:

- ☐ A support person be present if possible
- ☐ Immediate skin-to-skin contact if safe
- ☐ Breastfeeding as soon as possible

Ask your doctor:

What should I expect before, during, and after a C-section?
Will my birth partner be allowed in the room with me?

CARE FOR YOURSELF DURING PREGNANCY

I plan to:

- ☐ Eat well
- ☐ Be active
- ☐ Get regular blood tests and ultrasounds
- ☐ Ask my doctor about vaccines recommended during pregnancy—Tdap, seasonal flu, and COVID (to protect me and my baby)—and whether I'm eligible for the RSV vaccine, a one-time dose given late in pregnancy to help protect my baby in their first six months of life

Ask your doctor:

What are the windows for immunizations during pregnancy?
Are there vaccines I should avoid during pregnancy?

CARE FOR YOUR NEWBORN

My preferences:

- ☐ Baby stays in room with me (rooming in)
- ☐ Baby gets care in the nursery if available
- ☐ Delay the first bath
- ☐ No pacifier use
- ☐ Vaccinations such as hepatitis B
- ☐ Vitamin K
- ☐ RSV antibody shot—usually given if I didn't get the RSV vaccine during pregnancy or if my baby is entering RSV season unprotected
- ☐ Erythromycin ointment for eyes

Ask your doctor:

What newborn procedures and screenings happen after birth?
What will happen if a screening has concerning results?

FEEDING MY BABY

I'd like to try:

- ☐ Exclusive breastfeeding
- ☐ Formula supplementation if needed
- ☐ Combination of both breastfeeding and formula

SOURCES: Texas Children's: "How to Create a Birth Plan for Labor and Delivery"; HealthyChildren.org: "RSV Immunizations: Two Ways to Protect Babies"; UF Health: "What to Include in Your Birth Plan"; ACOG: "8 Common Questions About Newborn Screening Tests"



Ask your doctor:

Who is available for help with breastfeeding in the hospital and at home?
How often should I feed my baby?

POSTPARTUM PHYSICAL AND MENTAL RECOVERY

Ask your doctor:

What should I expect physically after delivery?
What are the concerning symptoms to watch for after birth?
Where can I go for postpartum mental support?

MY TOP PRIORITIES

What matters most to me during my birth experience?

ADDITIONAL QUESTIONS FOR MY DOCTOR

IMPORTANT CONTACT INFORMATION

Doctor's Office: _____
After-Hours Number: _____
Hospital: _____
Pediatrician: _____
Emergency Contact: _____

RSV: WHAT TO KNOW

Learn the risks, symptoms, and how to manage

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

High-Risk Newborns and Infants

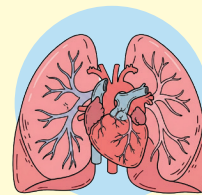
RSV is most likely to cause severe illness in children who are:



Very young
(the younger the child,
the higher the risk)



Native American
or Alaska Native



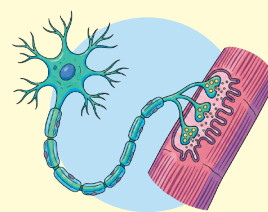
Living with chronic
lung disease or congenital
heart disease



Immunocompromised



Born prematurely



Diagnosed with a
neuromuscular disorder
or cystic fibrosis

RSV Symptoms

Unlike adults, infants with RSV always have symptoms. In babies under 12 months, early RSV symptoms may be subtle, but later they can look like:

- Irritability
- Eating, drinking, and moving less
- Runny nose and cough that can progress to wheezing or trouble breathing
- Pauses in breathing for more than 10 seconds (apnea)

Care for Newborns and Infants with RSV

RSV doesn't have a specific treatment. The goal of RSV management is to keep your child as comfortable as possible by tending to the symptoms.

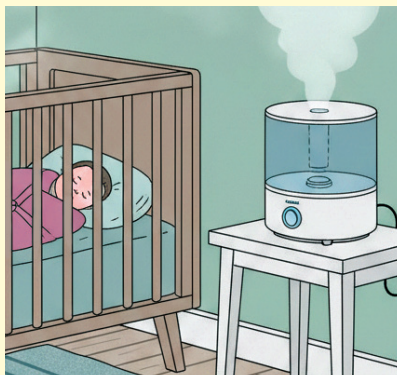


Keep Your Infant Hydrated

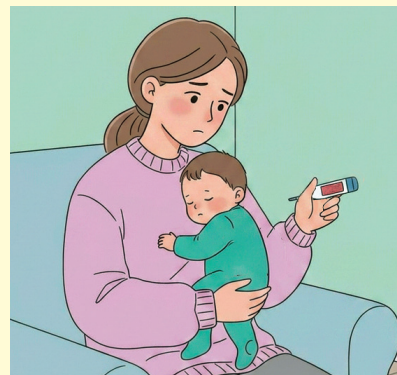
- Offer fluids frequently: breast milk, formula, and water.
- Keep your baby upright and gently suction out their nose with a bulb to help them breathe more easily while bottle feeding or breastfeeding.
- Watch for signs of dehydration: dry mouth, little to no urine output, sunken eyes, fussiness.



Use a saline rinse in your child's nose to thin out mucus and help it flow out.



Turn on a cool-mist humidifier in the room where your baby sleeps to keep the air moist and ease cough and congestion.



If your baby has a fever, medicines such as infant acetaminophen (Tylenol) can help lower it and relieve any pain they may have.

SOURCES: CDC: "RSV in Infants and Young Children"; Dartmouth Health Children's: "Caring for Children Sick at Home with RSV"; Mayo Clinic: "Respiratory Syncytial Virus (RSV)"; Texas Health: "Breastfeeding When Your Baby Is Sick"

RSV'S EMOTIONAL IMPACT

How your child's illness can affect your life

By Rachel Reiff Ellis

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

RSV's reach goes beyond your child's respiratory tract. It gets in the way of a household's sleep, parents' work schedules, family routines, finances, and everyone's mental well-being. All of this can take an emotional toll on the whole family. Here's what to watch for and how to manage.

RSV'S WIDER IMPACTS

RSV isn't hard only on the child who has it, says Heather Gosnell, MD, a pediatrician and founder of Eat Plants MD Coach in Phoenix, AZ.

"It's a whole-family crisis," Gosnell says. "This isn't a typical cold that resolves in a few days; it can be severe and prolonged, and everything else gets put on hold. It's exhausting from start to finish."

It's common to struggle to have to balance hospital visits, childcare for siblings, and financial stress at the same time. Gosnell says missing work can cause worry about job security and may even require filing Family and Medical Leave Act (FMLA) paperwork to protect your job during your child's long hospital stays or recovery periods.

Shannon Fox-Levine, MD, a pediatrician with Bluebird Kids Health in Florida, says RSV can affect entire households both emotionally and also physically.

"RSV can cause symptoms in all family members, and it's challenging to care for young children when parents themselves are sick," she says.

WHEN RSV REQUIRES A HOSPITAL STAY

While many children can recover from RSV at home, some develop breathing problems serious enough to require emergency care or oxygen support.

"The most frightening moment for most parents is when RSV escalates to an

ER visit or hospitalization," Gosnell says. "What makes it especially hard is that there are no medications to treat RSV itself; everything we do is supportive care, so parents are essentially watching and waiting while their baby struggles to breathe."

Signs of breathing distress in children can include fast breathing, wheezing, grunting, chest retractions, blue lips, or pauses in breathing. These symptoms can be scary even for experienced parents.





“Seeing your child on oxygen, IV fluids, or other respiratory support can also be a deeply emotional and overwhelming experience,” Fox-Levine says.

BUILDING SUPPORT

Gosnell says the most important thing she tells parents is to work as a team and try not to carry the burden alone.

“Lean on extended family and friends wherever you can,” she says. And if your child is hospitalized, she encourages turning to your child’s

wider care team. Hospital social workers can help navigate additional resources and support services that many parents don’t even know are available.

Stress, sleep deprivation, and caregiving for days on end can affect mental health. If you’re struggling in any way, don’t hesitate to talk to your child’s doctor.

“It’s normal to be stressed by caring for ill children,” Fox-Levine says. “Reassurance by healthcare providers boosts confidence in your ability to treat the illness and know the signs and symptoms to seek further care for.”

ASK FOR HELP

Heather Gosnell, MD, offers ways others can ease your load while you’re dealing with your baby’s RSV.

- + Request meals or food delivery gift cards.
- + Accept offers of childcare for nonsymptomatic siblings.
- + Inquire about family leave at work.

looking to
STAY WELL
every day



Fuel Your Body with Good for You Ingredients



ECHINACEA

Beautiful flower traditionally thought to help your body's defenses

LEMONGRASS

Tasty herb commonly thought to be a supportive hand to your overall health



ROSE HIPS

Tart and tasty herb commonly used to help support your well-being

ELDERFLOWERS

Light colored flower traditionally considered to help support a healthy lifestyle



BIGELOW
BENEFITS

Redefining Wellness
EVERY DAY