## **RESPIRATORY SYNCYTIAL VIRUS (RSV)**

THE VIRUS	
	The respiratory syncytial virus (RSV) has a genome and it's a negative single-stranded RNA virus. It belongs to the Mononegavirales order, to the Paramyxoviridae family, to the Pneumovirinae subfamily and to the Pneumovirus genus. There are different variants of the virus which can infect mammals such as bovines, ovine, mice, etc. On the contrary, the human variant hRSV is the most important etiologic agent of bronchiolitis and childish pneumonia.
CLINICAL MANIFESTATION	
	The incubation period is of 4 days. The infection goes on through saliva's drops expectorated by the infected child and which are breathed or carried at conjunctivitis level of others children. The infected child diffuses the virus in the environment for about 5-12 days. The infection generally appears with a nasal secretion and throat ache, then cough and fever. In serious cases the infection becomes graver. There are whistles, cough becomes more serious and there are breathing difficulties and cyanosis. The prognosis of this illness is more serious in infants, in preemies and in children who have a case with nervous system, cardiovascular apparatus, pulmonary or immunologic illness.
EPIDEMIOLOGY	2
	The hRSV diffuses in annual epidemics, which normally appears every winter and that normally go on for 4-5 months. The endemic pick normally occurs in January, February and March. The acquired immunity after the hRSV infection is incomplete and it goes on for a short period of time. That means that reinfections can easily appear. Bronchiolitis and pneumonia from hRSV are frequent in nursing up to one year old. Indeed, even the possible presence at high levels of maternal anti-hRSV and via milk transmitted antibodies couldn't neutralize the virus.
TREATMENT	
	the therapy of not complicated form is symptomatic. By using oxygen to simplify breathing the only medicament, which demonstrated an activity against the VRS is the ribavirin in aerosol.
TEST	
	The BinaxNOW RSV test is destined to the rapid and qualitative survey of the fusion protein of the respiratory syncytial virus (hRSV) directly in samples, such as nose washing and nasal-pharynx swab in children younger than 5.
SAMPLE TAKING	
	The analysis is carried out on nasal-pharynx swabs (ex: polyester, rayon, cotton and foam) and o nasal washing samples. It's recommendable not to use nasal-pharynx swabs in calcium alginic acids.
EXECUTION	
	Daily
Соѕт	
	According to the federal charge rate of the analysis (3159.00) TP 29.



Further information or bibliographic references can be asked to the laboratory.