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Title: Association between rhinovirus C infection and respiratory symptom severity in an unselected pediatric population, the EUROPA-study

M.P. 7659 van der Schee m.p.vanderschee@amc.uva.nl ^{1,2}, J.G. 8286 Wildenbeest j.g.wildenbeest@amc.uva.nl ³, S. 8287 Hashimoto s.hashimoto@amc.uva.nl MD ¹, K.S.M. 8288 Benschop k.s.benschop@amc.uva.nl ³, A.C. 8289 Schuurman a.c.schuurman@amc.uva.nl ¹, N. 8290 Adriaens n.adriaens@amc.uva.nl ¹, K.C. 8291 Wolthers k.c.wolthers@amc.uva.nl MD ³, A.B. 8292 Sprikkelman a.b.sprikkelman@amc.uva.nl MD ², E.G. 8293 Haarman eg.haarman@vumc.nl MD ⁴, W.M.C. 8294 van Aalderen w.m.vanaalderen@amc.uva.nl MD ² and Peter J. 8295 Sterk p.j.sterk@amc.uva.nl MD ¹. ¹ Respiratory Medicine, Academic Medical Centre University of Amsterdam, Netherlands; ² Paediatric Pulmonology and Immunology, Academic Medical Centre University of Amsterdam, Netherlands and ⁴ Paediatric Pulmonology, VU University Medical Centre, Amsterdam, Netherlands.

Body: Rationale-In a paediatric population hospitalized for bronchiolitis rhinovirus (RV) type C is associated with more severe respiratory symptoms as compared to other RV genotypes (Bizzintino, ERJ, '11). RV infections in infants are linked to the development of asthma but specific clinical features of RV-C infection in the general population are unknown. We therefore aim to study the occurrence and respiratory symptom severity associated with RV-C in an unselected paediatric population. Methods-This is a cross-sectional study from the prospective EUROPA birth cohort, aimed at early prediction of asthma (N=1207;0-3 years). Nose and throat swabs were collected in both asymptomatic infants and infants whose parents consulted the GP for wheeze or dyspnea. RV presence was tested using a 5'UTR rtPCR with genotyping based on the VP4/VP2 region. Symptom severity was assessed by parents scoring the presence and severity of 10 symptoms (range 0-50) and by clinicians using the validated PRAM-score (range 0-12). Results-102 infants (13.3±5.5 months) presented with an infection of whom 53% had a positive RV PCR. RV-A, B & C were found in 35%, 4% and 24% of cases, respectively. 2/17 asymptomatic infants tested positive for RV-A. RV genotypes did not differ significantly regarding symptom severity as scored by parents (μ±SD=14±6.4; p=0.75) and clinicians (1.5±1.9; 0.33). Conclusion-Rhinovirus-C infection occurred in 24% of the infants and is associated with similar symptom severity as other RV-genotypes. Since RV-C appears to be commonly involved in wheezy episodes not requiring hospitalization, it's association with future development of asthma needs to be examined.