

RSV

– a cause of recurrent wheeze?

Peter Openshaw

p.openshaw@imperial.ac.uk



Respiratory Syncytial Virus (RSV)

- World-wide distribution, winter epidemics
- Infects 65% of children in first year of life
- Two serogroups, but reinfects with ease

Causes:

- Hospital admission in 2-3% of infants
- 70% of bronchiolitis in infancy
- Coughs and colds in adults
- Wheezy RTI in kids <5 years, asthmatics *etc*

3

Outline

Background: why RSV is special

- Epidemiology and clinical features
- Global importance

The mouse model

- Fundamental insights
- Plausible and relevant mechanisms

Evidence that that RSV does cause long-term disease



Global impact of RSV disease

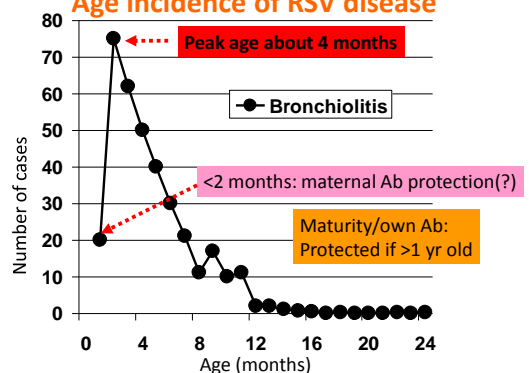
WHO estimates

- 1 in 5 of all childhood ALRIs
- 64 million episodes of ALRI in under 5s
 - Twice the impact of *Pneumococcus*
 - Four times the impact of *Haemophilus*
- 3-4 million RSV hospitalisations
- 160,000 child deaths

99% of RSV deaths are in developing countries

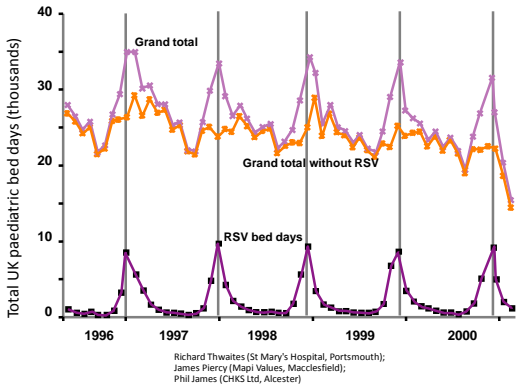
www.thelancet.com Published online April 16, 2010 DOI:10.1016/S0140-6736(10)60206-1

Age incidence of RSV disease



Data from Parrott et al *Am J Epidemiol* 1973; 98:289

Bed days for RSV and all paediatric admissions



Age-Specific Annual Deaths in USA

Age	All Flu	RSV
<1	39	335
1-4	91	32
5-49	1 061	641
50-64	3 084	1 816
≥65	39 977	11 199
Total	44 252	14 028

Thompson et al JAMA 2003

Anne Falsey, Rochester USA

RSV in the over 65s

Each year, RSV causes:

- 3-10% of colds in the elderly
- Progresses to wheezing, progressive hypoxia
- 300,000 US hospitalisations (30% with CXR 'pneumonia')

Pathogenesis: Similar to the FI-RSV disease

- Strong Th2 response
- Innate response is prolonged (high IL-6 levels at day 28)
- Prolonged low-level viral presence

Risk factors:

- COPD/heart failure
- exposed to young children
- Low serum neutralising antibody

Boosting antibody with vaccination might be beneficial.

RSV global symposium, 2nd December 2010, Rotterdam

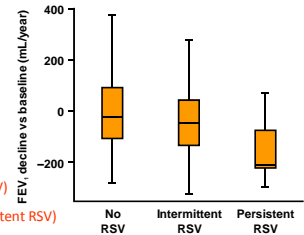
Respiratory Syncytial Virus, Airway Inflammation, and FEV₁ Decline in Patients with Chronic Obstructive Pulmonary Disease

Am J Resp Crit Care Med (2006) 173: 871

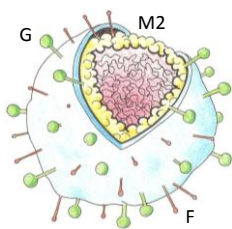
Tom M. A. Wilkinson, Gavin C. Donaldson, Sebastian L. Johnston, Peter J. M. Openshaw, and Jadwiga A. Wedzicha

Academic Unit of Respiratory Medicine, University College London; and Department of Respiratory Medicine, National Heart and Lung Institute, Imperial College, London, United Kingdom

- 88 COPD patients (from East London)
- Prospective study, 14-month duration
- Daily diary cards
- Sputum samples every 3 months
 - 272 samples collected
 - quantitative microbiology
 - RSV by qualitative PCR
- 12 RSV + in all samples ('persistent' RSV)
- 42 RSV +, but not in all sputa (intermittent RSV)
- 34 patients were RSV negative throughout (RSV free)



RSV



- Re-infects despite serum antibody
- Formalin treated vaccine made disease worse
- Ex-bronchiolitics often wheeze/asthma Dx
- May persist in some children/COPD patients

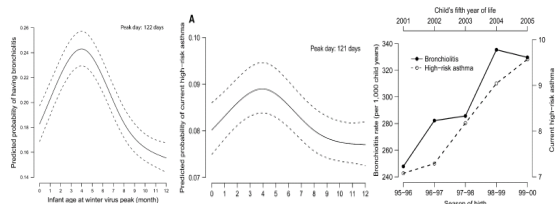
Can respiratory viral infections initiate the process of airway inflammation that leads to asthma?

The evidence :

- Epidemiology
- Plausible mechanisms
- Interventional clinical studies

Evidence of a Causal Role of Winter Virus Infection during Infancy in Early Childhood Asthma

Pingsheng Wu^{1,2,3}, William D. Dupont^{3,6}, Marie R. Griffin^{2,4,5,6}, Kecia N. Carroll⁷, Edward F. Mitchell⁸, Tebeb Gebretsadik³, and Tina V. Hartert^{1,2,4,5}

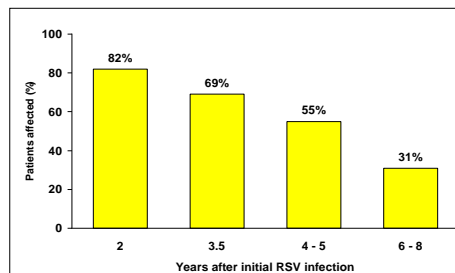


95,310 children
5 winter seasons

Asthma risk peaked in those aged 4/12 at height of winter colds season

Age at winter virus peak was = or > any other known risk factor for asthma

Recurrent Lower Respiratory Symptoms After RSV Bronchiolitis



Henry, et al. *Arch Dis Child*. 1983; 58:713
Webb, et al. *Arch Dis Child*. 1985; 60:1064
Hall, et al. *J Pediatr*. 1984;105:358

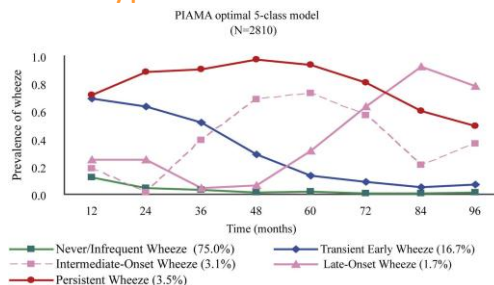
Epidemiological links between RSV and asthma

9 controlled studies (mostly retrospective)
1978-2000

Follow-up from 2 to 13 years

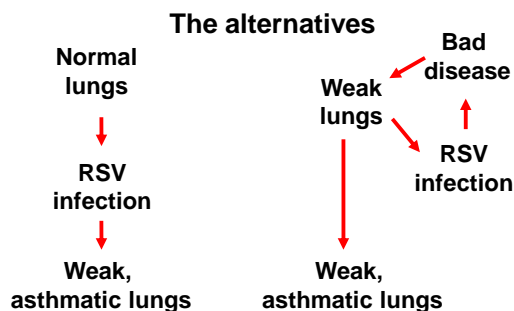
All demonstrate increased frequency of intermittent obstructive disease in post-bronchiolitics

Four types of childhood wheeze



Olga E. Savenije, Raquel Granell, ... Dirkje S. Postma, John Henderson and Marjan Kerhof (2011)
Comparison of childhood wheezing phenotypes in 2 birth cohorts: ALSPAC and PIAMA.
J Allergy Clinical Immunol (2011) 127:1505-1512.e14

Do infantile viral infections cause "asthma"?

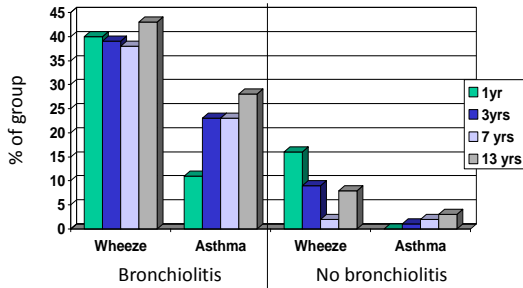


The Sigurs study

- Longitudinal prospective study
- 47 children hospitalized for RSV <1yr old
- 93 non-hospitalized controls
- Surveyed at 1, 3, 7 and 13 years of age
- Definitions
 - Wheeze: >3 episodes of wheezing / 1 yr
 - Asthma: >3 episodes of physician diagnosed wheeze in one year

Sigurs N et al. *Pediatr* 1995; 95:500-05., Sigurs N, et al. *Am J Respir Crit Care Med* 2000;161:1501-07. Sigurs N, et al. *Am J Respir Crit Care Med* 2005;171:137-41.

Wheezing and asthma after RSV hospitalisation



Sigurs N et al. *Pediatr* 1995; 95:500-05., Sigurs N, et al. *Am J Respir Crit Care Med* 2000;161:1501-07. Sigurs N, et al. *Am J Respir Crit Care Med* 2005;171:137-41.

Plausible mechanisms of delayed effects

- Viral chronicity, persistence or latency
- 'Hitchhike' of other chronic pathogen
- Remodeling (altered lung growth)
- Permanent epithelial damage
- Immunological priming or tolerance
- Bystander antigenic sensitization

Evidence for Persistence of RSV

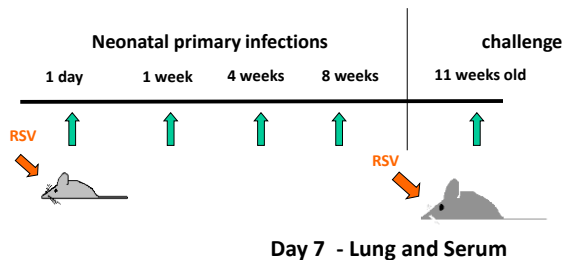
1. Occurs in T cell immunodeficiency
2. Closely related to measles
3. Persistence occurs *in vitro*
4. Seen in:
 - Cattle
 - Guinea pig
 - Mouse

Schwarze J et al. *Am.J.Respir.Crit.Care Med.* 2004;169:801-5

Wilkinson, Donaldson, Johnston, Openshaw and Wedzicha
ATS, 2004; AJRCCM 173: 876 (2006)

Age at First Viral Infection Determines the Pattern of T Cell-mediated Disease during Reinfection in Adulthood

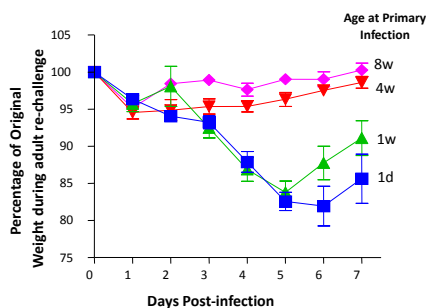
Fiona J. Culley, Joanne Pollott, and Peter J.M. Openshaw



J. Exp. Med. © The Rockefeller University Press • 0022-10
 Volume 196, Number 10, November 18, 2002 1381-1386

Age at First Viral Infection Determines the Pattern of T Cell-mediated Disease during Reinfection in Adulthood

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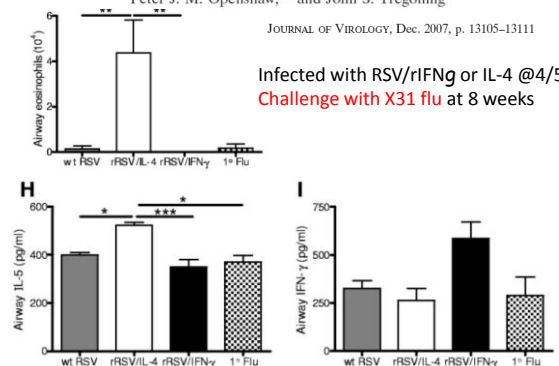
J. Exp. Med. © The Rockefeller University Press • 0022-10
 Volume 196, Number 10, November 18, 2002 1381-1386

Virally Delivered Cytokines Alter the Immune Response to Future Lung Infections

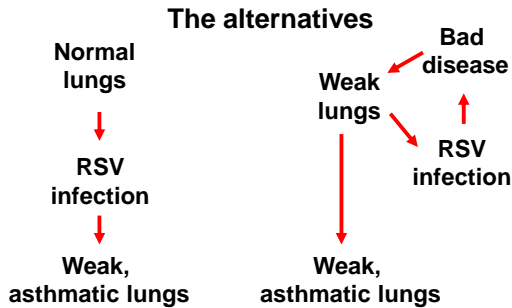
James Harker,¹ Alexander Bukreyev,² Peter L. Collins,² Belinda Wang,¹
 Peter J. M. Openshaw,^{1*} and John S. Tregoning¹

JOURNAL OF VIROLOGY, Dec. 2007, p. 13105-13111

Infected with RSV/rIFN γ or IL-4 @4/52
 Challenge with X31 flu at 8 weeks



Does RSV cause 'asthma'?

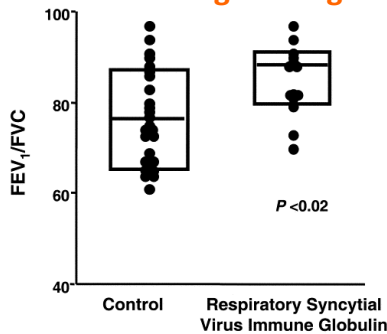


Effect of RSV-IVIG on lung function

- Long-term follow-up study compared
 - 13 children with BPD who received RSV-IVIG for RSV LRI in infancy
 - 26 age-matched controls with BPD who did not receive RSV-IVIG (not matched for history of documented RSV infection)
- 6/13 treated cases had history of RSV infection vs 21/26 controls

Wenzel SE, Gibbs RL, Lehr MV, Simoes EAF. Respiratory outcomes in high-risk children 7-10 years after prophylaxis with respiratory syncytial virus immune globulin. *Am J Med* 2002;112:627-33.

Effect of RSV-IVIg on lung function



Wenzel SE, Gibbs RL, Lehr MV, Simoes EAF. Respiratory outcomes in high-risk children 7-10 years after prophylaxis with respiratory syncytial virus immune globulin. *Am J Med* 2002;112:627-33.

Effect of RSV-IVIg on lung function

- FEV1/FVC and airway conductance significantly better ($p < 0.02$)
- Less atopy ($p < 0.04$)
- Missed school ($p = 0.01$), colds ($p < 0.03$), and asthma attacks ($p < 0.04$) less likely

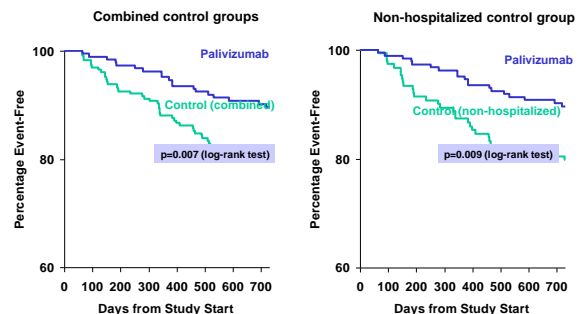
Wenzel SE, Gibbs RL, Lehr MV, Simoes EAF. Respiratory outcomes in high-risk children 7-10 years after prophylaxis with respiratory syncytial virus immune globulin. *Am J Med* 2002;112:627-33.

Palivizumab prevention study

- **Multicenter, multinational trial at 27 sites**
 - Matched double-cohort design
- **Preterm infants ≤ 35 wGA**
 - ≤ 3 years of age at time of enrollment
 - No CLD/CHD
- **Two cohorts**
 - 'Palivizumab' group (prophylaxis ≤ 6 months of age)
 - 'No palivizumab' controls
- **Two-year prospective follow-up**
- **Intention to treat analysis**

Simões, Groothuis, Kimpen *et al* (*J Pediatr* 2007; 151:34-42)

Time to Onset of Physician - Documented recurrent wheeze

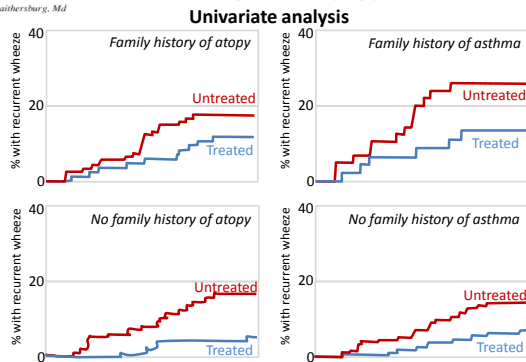


Simões, Groothuis, Kimpen *et al* (*J Pediatr* 2007; 151:34-42)

The effect of respiratory syncytial virus on subsequent recurrent wheezing in atopic and nonatopic children

JACI 126:256-282, 2010 doi:10.1016/j.jaci.2010.05.026
 Eric A. F. Simões, MB, BS, DCH, MD,* Xavier Carbonell-Estrany, MD, PhD,* Christian H. L. Rieger, MD,* Ian Mitchell, MA, MB, ChB,* Linda Fredrick, MS,* and Jessie R. Groothuis, MD,* on behalf of the Palivizumab Long-Term Respiratory Outcomes Study Group* Aurora, Colo, Barcelona, Spain, Bochum, Germany, Calgary, Alberta, Canada, Abbott Park, Ill, and Gaithersburg, Md

Not perfect studies...



- Industry-funded
 - Non-randomised, physician allocated
 - Retrospective
 - Non-blinded from families
 - Reported wheeze by parents
- It should probably not have worked...*
- Only delayed RSV, did not prevent it

Delaying RSV infection in infants

- Would reduce the severity of RSV disease
- Might reduce subsequent wheeze

Reducing RSV infections in adults

- Would reduce community circulation
- Would be cost effective in high risk groups
- Would especially benefit the elderly