

Human rhinovirus commonly detected in febrile infants

January 17 2018



(HealthDay)—For febrile infants, human rhinovirus (HRV) is common,



and detection does not alter risk of concomitant urinary tract infection or invasive bacterial infection, according to a study published online Jan. 17 in *Pediatrics*.

Anne J. Blaschke, M.D., Ph.D., from the University of Utah in Salt Lake City, and colleagues examined the risk of concomitant bacterial infection in febrile infants positive for HRV by polymerase chain reaction (PCR). Infants aged 1 to 90 days who underwent respiratory viral testing by PCR (RVPCR) in the emergency department or inpatient setting were identified. The relative risk of bacterial infection was assessed.

The researchers found that 37 percent of 10,964 febrile infants identified had RVPCR. Fifty-five percent of these were positive for a respiratory virus; 35 percent for HRV alone. Overall, 9.5 percent had bacterial infection. The likelihood of bacterial infection was increased for febrile infants with HRV detected versus those with non-HRV viruses (7.8 versus 3.7 percent; relative risk, 2.12). No significantly different risk of urinary tract infection was seen for HRV-positive infants at any age. No meaningful difference was seen in the risk of invasive bacterial infection (IBI) for infants aged 1 to 28 days; the likelihood of IBI was reduced for infants aged 29 to 90 days with HRV (relative risk, 0.52).

"HRV detection may be relevant in considering risk of IBI for <u>infants</u> 29 to 90 days of age," the authors write.

Two authors disclosed financial ties to BioFire Diagnostics.

More information: <u>Abstract/Full Text (subscription or payment may be required)</u>



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Citation: Human rhinovirus commonly detected in febrile infants (2018, January 17) retrieved 5 May 2024 from https://medicalxpress.com/news/2018-01-human-rhinovirus-commonly-febrile-infants.html

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