

## ***FP Essentials***

### **Call for Authors – May 2025**

#### **Viral Respiratory Infections**

We are seeking an author or author group to write a manuscript for this edition of *FP Essentials* on the topic of viral respiratory infections. This edition will cover four topics:

1. Upper and Lower Respiratory Infections
2. Influenza
3. COVID-19
4. Respiratory Syncytial Virus

The main text of the manuscript should be approximately 10,000 words in length, divided into four sections of approximately 2,500 words each, plus an abstract of approximately 200 words for each section. In addition, there should be key practice recommendations, a maximum of 15 tables/figures total, and up to 200 references to provide support for all recommendations and factual statements in the manuscript. References must be numbered sequentially by section, with each new section starting over at “1.”

This edition should focus on what is new in each topic and should answer the key questions listed for each section. Each section should begin with an illustrative case, similar to the examples provided, with modifications to emphasize key points; each case should have a conclusion that demonstrates resolution of the clinical situation. The references provided here include information that should be considered in preparation of this edition of *FP Essentials*. However, these should be used only as a starting point in identifying the most current guidelines and references to include in the edition.

#### **Needs Assessment**

Viral respiratory infections remain a significant cause of morbidity and mortality in the United States, posing ongoing challenges for family physicians who are often the first point of care for patients. The COVID-19 pandemic underscored the critical importance of staying up to date with rapidly evolving guidelines for diagnosis, prevention, and management of these infections. Additionally, it shed light on the disproportionate disease burden among socially disadvantaged groups. Moreover, seasonal threats like influenza, emerging pathogens, and the increasing recognition of respiratory syncytial virus in adults highlight the need for comprehensive education on these infections. Surveys of family medicine physicians consistently identify gaps in knowledge and confidence in managing respiratory infections, particularly in distinguishing viral from bacterial causes and integrating new antiviral therapies and vaccines into practice. This edition of *FP Essentials* will equip family physicians with the latest evidence-based approaches to diagnosing and treating viral respiratory infections, addressing common questions about immunization guidelines, and offering practical strategies to manage complications.

## Section 1: Upper and Lower Respiratory Infections

### Example Case

RT is a 36-year-old mechanic with a 10 pack-year smoking history who presents with 4 days of sore throat, nasal and chest congestion, productive cough, and malaise. She denies fever, dyspnea, and chest pain but reports minimal relief with ibuprofen and pseudoephedrine. Her vital signs are normal, lungs are clear to auscultation, but bronchial breath sounds are heard throughout. She reports a history of bronchitis two years ago and asks if she needs antibiotics for her current infection.

### Key Questions to Consider

*Note: Influenza, COVID-19, and respiratory syncytial virus (RSV) are discussed separately in other sections.*

#### Background, Epidemiology, and Impact

- What is the incidence and prevalence of viral upper and lower respiratory infections in the United States? What viruses are the most common? How common are viral vs bacterial respiratory infections?
- What is the societal burden of these conditions, including direct and indirect health care costs, lost productivity, and impact on quality of life?

#### Prevention

- In the community vs health care settings, how effective are hand hygiene and personal protective equipment such as masks in preventing viral respiratory infections? How effective are environmental interventions such as increased ventilation, social distancing, and physical barriers? *Note: These questions pertain to all viral respiratory infections, including influenza, COVID-19, and RSV.*
- What should physicians advise patients regarding the contagious period for viral respiratory infections?
- Excluding influenza, COVID-19, and RSV vaccines (covered in the other sections of this monograph), what vaccines for other viral respiratory infections are currently available or in clinical trials?

#### Diagnosis

- What clinical features suggest viral upper respiratory infections and lower respiratory infections?
- How can viral respiratory infections be distinguished from bacterial respiratory infections? *Consider using a table summarizing diagnostic accuracy measures (eg, likelihood ratios) of symptoms suggesting viral vs bacterial respiratory infections.*
- When should diagnostic tests such as procalcitonin, respiratory pathogen panels using polymerase chain reaction, inflammatory markers (eg, C-reactive protein, erythrocyte sedimentation rate), rapid streptococcal test, complete blood cell count, chest x-ray, or other tests be considered? How accurate and cost-effective are these tests in differentiating viral from bacterial respiratory infections? *Consider using figures and tables to highlight key concepts (eg, likelihood ratios and average cost of these tests).*

#### Treatment

- How effective are symptomatic treatment, fluids/hydration, antivirals, and other therapies for viral respiratory infections?

- What is the evidence for probiotic, vitamin, supplement, indigenous, and complementary and alternative medicine therapies to treat or alleviate symptoms associated with viral respiratory infections?
- How effective are biomarkers and point-of-care tests (eg, C-reactive protein, procalcitonin) in guiding initiation and discontinuation of antibiotics in patients with acute respiratory infections in primary care? Do they have an impact on mortality, overall antibiotic use, and antibiotic-related adverse effects?
- How have physician antibiotic prescribing patterns for upper respiratory infections changed over time? How effective are the following for reducing antibiotic use: physician education, patient education, and delayed or no antibiotics strategy?
- Are there special considerations when treating viral respiratory infections among children, immunosuppressed patients, pregnant individuals, those with multiple comorbidities, and elderly patients? When should antibiotics be considered?
- What are common and rare complications of viral respiratory infections? How do they present, and how should they be managed?

#### Prognosis

- How long do viral upper and lower respiratory infections last? How long can the cough persist? What guidance should be given to patients? When should antibiotics be considered for suspected bacterial superinfection?

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## Section 2: Influenza

### Example Case

JP is a 54-year-old patient with controlled type 2 diabetes who presents with 2 days of fever, chills, dry cough, headache, and myalgia. Several students at their school have been diagnosed with influenza. On examination, their temperature is 101.8 °F, they're in no acute distress, and their lungs are clear to auscultation. They are concerned about their risk of complications given their diabetes and ask whether they should be tested for influenza and started on treatment.

### Key Questions to Consider

#### Background, Epidemiology, and Impact

- What is influenza and how is it transmitted?
- What are the current epidemiological trends in influenza, including seasonal variability and population-level impact (eg, mortality, economic) in the United States? What are the factors that lead to pandemic influenza?
- How has the COVID-19 pandemic influenced the transmission patterns and clinical burden of influenza?
- What are the concerns around H5N1 avian influenza? When should there be a concern for H5N1 infection in a patient?
- What is the impact of influenza on medically vulnerable populations (eg, elderly, immunosuppressed, pregnant individuals, children, and those with chronic diseases)? How about those that are socially vulnerable (eg, persons in congregate living, those experiencing homelessness)?
- How do social or structural determinants affect access to influenza prevention and treatment, and what are strategies to address these disparities in access? Has the availability of vaccines at neighborhood pharmacies affected vaccination rates?

#### Prevention

- What are the current recommendations from the Centers for Disease Control and Prevention for influenza vaccination, including specific populations (eg, high-dose vaccine for older adults, intradermal vaccine)? How effective is vaccination? Are there any promising developments in influenza vaccines (eg, universal flu vaccine research, mRNA vaccines)?
- What are the barriers to vaccination, and what strategies can improve vaccine uptake in primary care settings? What are common concerns from patients about influenza vaccination (eg, "Can the flu shot give me the flu?"), and how should family physicians address vaccine hesitancy?
- How effective is chemoprophylaxis (eg, oseltamivir, zanamivir, baloxavir, amantadine, rimantadine) for patients exposed to influenza, especially high-risk individuals? What are the indications, dosing, and associated adverse events?

#### Diagnosis

- What are the clinical features of influenza, and how do they differ from other viral respiratory infections, such as COVID-19, respiratory syncytial virus, and metapneumovirus?
- When should diagnostic tests for influenza (eg, rapid antigen tests, polymerase chain reaction tests, multiplex respiratory pathogen panels) be used in clinical practice?
- How accurate and cost-effective are these diagnostic tests in primary care settings?

- What are the indications for confirmatory testing in high-risk populations or during outbreaks?

#### Treatment and Complications

- Who are candidates for outpatient vs inpatient treatment of influenza? How does inpatient treatment differ from outpatient treatment?
- What are the current recommendations for antiviral therapy (eg, oseltamivir, zanamivir, peramivir, baloxavir) for influenza? When should physicians just prescribe antiviral therapy (eg, symptomatic patients with clear exposure or positive rapid tests who send requests via portal messages)?
- How effective are antiviral medications in reducing symptom duration, complications, and hospitalizations? Does effectiveness vary in higher risk vs lower risk populations, and if so, how? What do antiviral medications cost? What adverse effects are associated with these antivirals?
- Are there new or emerging antiviral agents or combination therapies under investigation for influenza treatment?
- What are common postinfluenza complications and how are they managed?

#### Initial References to Consider

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## Section 3: COVID-19

### Example Case

NH, a 68-year-old patient with hypertension and chronic kidney disease, presents with a 3-day history of fever, fatigue, dyspnea, and dry cough, as well as a positive COVID-19 home antigen test. He was previously fully vaccinated but has not received the latest booster. He is worried about his risk of severe disease and wonders if he should start any treatment.

### Key Questions to Consider

#### Background, Epidemiology, and Impact

- What are the current epidemiologic trends in COVID-19, including prevalence, variants, and population-level impact in the United States?
- How has the evolution of COVID-19 variants influenced the clinical presentation and transmissibility of the virus? Do patients get as sick from COVID-19 as they did at the beginning of the pandemic?
- What are the societal and economic impacts of COVID-19? What populations have been most vulnerable to COVID-19, and what are the drivers of this?
- How has the health care system adapted to the pandemic in terms of telemedicine, workforce resilience, and public health integration? How has the social acceptance or rejection of COVID-19 science, including distrust, impacted the practice of medicine?

#### Prevention

- What are the current recommendations from the Centers for Disease Control and Prevention for COVID-19 vaccination, including booster doses (including the forthcoming influenza-COVID combination vaccine), and how do these vary by age, comorbidities, and prior infections? How does the vaccine differ from other vaccinations? When is a COVID-19 booster recommended in patients that have been recently infected with COVID-19?
- What are socio-ecologic and intrapersonal barriers to COVID-19 vaccination and booster uptake, and how can family physicians address these barriers? Is COVID-19 vaccine hesitancy different from hesitancy regarding other vaccines?

#### Diagnosis

- What are the clinical and laboratory features of COVID-19, and how can it be differentiated from other viral respiratory infections such as influenza and respiratory syncytial virus?
- What are the recommended diagnostic tools for COVID-19, including rapid antigen tests, polymerase chain reaction, and home testing kits? When should advanced diagnostic tests (eg, genomic sequencing for variants) be considered?

#### Outpatient Treatment

- What are the indications for outpatient vs inpatient treatment of COVID-19?
- What are the current antiviral therapies for COVID-19 approved by the Food and Drug Administration (FDA) (eg, nirmatrelvir/ritonavir, remdesivir, molnupiravir)? What are the indications and effectiveness for these treatments, and what are the indications and efficacy of monoclonal antibody therapies in treating COVID-19?
- How should family physicians manage patients with COVID-19 who are immunocompromised or have significant comorbidities in the outpatient setting?

- How effective are supportive treatments (eg, inhaled corticosteroids) in managing mild to moderate COVID-19 in the outpatient setting?
- What are the updates on outpatient management strategies for COVID-19, including virtual care models? What anticipatory guidance should patients receive on quarantine duration? When can patients return to work or school with/without a mask?

#### Inpatient Treatment

- What are the indications for escalation of care for patients with COVID-19?
- How is severe COVID-19 defined?
- What are the current FDA-approved or authorized therapies for hospitalized patients with COVID-19 (eg, remdesivir, corticosteroids, IL-6 inhibitors)? What are their indications, efficacy, and potential adverse effects? *Use tables.*
- What is the role of anticoagulation in hospitalized patients with COVID-19, and how should it be managed in patients at high risk for thromboembolic events?
- What are the most recent updates on inpatient care protocols, including infection control measures and oxygen therapy strategies?

#### Complications

- What is long COVID? What are its clinical features, risk factors, and protective factors? Are there effective therapies? *Please use a table to summarize key concepts.*
- What other long-term complications have been associated with COVID-19 (eg, cardiovascular, pulmonary, behavioral)?
- What are the blood clotting complications of COVID-19? What is the proper period of anticoagulation for patients with COVID-19 associated blood clots? What should be done for subsequent COVID infections for those who had blood clots after COVID infection? How does the prevalence of COVID-19 related clots change the evaluation of patients with “unprovoked” blood clots?

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## Section 4: Respiratory Syncytial Virus

### Example Case

HM, a 2-month-old infant born at 35 weeks' gestation, presents with mild fever, nasal congestion, cough, and decreased feeding for 2 days. On exam, her respiratory rate is 50, with mild intercostal retractions and diffuse faint wheezing, but she is not in acute distress. Her parents are worried and note that her 3-year-old brother has mild respiratory syncytial virus (RSV). HM's mother did not receive maternal RSV vaccine (ABRYSVO) during pregnancy.

### Key Questions to Consider

#### Background, Epidemiology, and Impact

- What is RSV infection and how is it transmitted?
- What are the current epidemiologic trends of RSV in the United States, including seasonal patterns and outbreaks?
- What is the burden of RSV in various populations, including infants, young children, older adults, and those with comorbidities or immunosuppression?
- How does RSV impact health care utilization, including hospitalizations and emergency department visits?

#### Prevention

- What are the latest recommendations from the Centers for Disease Control and Prevention for RSV vaccination, and which populations are targeted (eg, older adults, infants, pregnant individuals)? *Consider tables or figures to summarize key concepts.* Describe the epidemiology that led to the newest recommendations.
- What is the role of monoclonal antibodies (eg, nirsevimab, palivizumab) in preventing RSV, and how are they administered in high-risk populations?
- Diagnosis
- What clinical features help distinguish RSV from other respiratory viruses like influenza, COVID-19, or rhinovirus in children vs adults? *Consider figures or tables to summarize key concepts.*
- What diagnostic tests are available for RSV, including rapid antigen tests and polymerase chain reaction?
- When is RSV testing indicated in primary care, and how does it influence management?

#### Treatment

- What are the indications for outpatient vs inpatient treatment of RSV in children and adults?
- What are the evidence-based recommendations for managing mild to moderate RSV infections in the outpatient setting among children and adults?
- What are the evidence-based recommendations for managing moderate to severe RSV infections in the inpatient setting among children and adults?
- Are adjunctive therapies (eg, inhaled bronchodilators, epinephrine, corticosteroids, nebulized hypertonic saline) effective and safe? Are they cost-effective?

#### Complications

- What are the common complications of RSV and how should they be managed?
- What long-term respiratory conditions have been associated with RSV infections?

## Initial References to Consider

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