The aging population, however, may benefit from using oral ribavirin, which has been described in the setting of hematopoietic stem cell and lung transplantation [4]. Although evidence from randomized controlled trials is lacking, ribavirin treatment may have a beneficial effect in reducing morbidity and mortality rates or improving recovery of pulmonary function after RSV infection in transplant recipients [5–7]. As shown elsewhere, oral ribavirin may not be inferior to inhaled therapy in this population and may provide a good and affordable treatment option [8, 9]. Whether these data can also be applied to the population of older adults remains to be confirmed.

The absence of evidence for the efficacy of oral ribavirin in elderly persons, combined with the widespread incidence and detrimental effects of RSV infection in this population, shown by Ackerson et al and others [1, 10], underlines the need for a well-designed randomized controlled trial to determine the benefit of a short course of oral ribavirin for RSV in elderly patients, analogous to the current use of oseltamivir for influenza virus.

This is especially important in the light of upcoming (and probably expensive) new antiviral, for which ribavirin could be considered as an active comparator. Furthermore, considering the high incidence and availability of quick diagnostic methods for RSV, we deem such a study not only needed but also certainly feasible.

Note

Potential conflicts of interest. All authors have submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest. Conflicts that the editors consider relevant to the content of the manuscript have been disclosed.

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