

From old to new: contextualizing viral infections in childhood

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The history of viruses with humanity yields plots that make the most creative playwrights envious. There is a bit of everything, from taciturn and cruel protagonists to romanticized characters who are sometimes harassed and sometimes fight epic battles with different villains. There are twists, turns, and restarts when all seemed lost, new weapons, and obsolete weapons. Of the former plagues or pestilences, we inaugurate the 20th century with the emblematic Spanish flu, a respiratory disease that claimed the lives of millions of people, surpassing the very master of the World War I. These were difficult, limited times, when the cure would come only to those strong enough to get through the self-limited period of the

disease. There were no antivirals or antibacterials. At most, there was recognition, isolation, the burning of breath, and, for the believers, hope translated into prayers.

Science has evolved, and so has knowledge. In 1928, Alexander Fleming, from an accidental experiment, had discovered the key to today's antimicrobial pharmacopoeia, penicillin. From then on, human beings felt empowered, with the reverse empowerment that would lead them towards the false status of invincibility, making them arrogant enough to loosen restrictive and hygienic measures, after all, now there was penicillin. This is a sad and perennial deception, perpetuated in the contemporary era when we cling to utopian

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panaceas and sometimes neglect the essentials. In the following decades the world population reached and multiplied in 10 digits; however, it would never be unaccompanied by the simplest, most microscopic and lethal living structures, the viruses.

Influenza, the main character of the Spanish flu, would return capriciously in the following decades, changing only the alias of its evil, sometimes related to its niche. The virus exercised its great potential of mutation and adaptation. And when there were not enough humans to test its improvement mechanisms or who could resist its nosological entity, other species were used, true living laboratories available for replication and dissemination, which went from being local to reach global proportions, with the recent 2009 pandemic. And those who think that their story has already reached its epilogue are drowning in sweet illusions. And we are not just talking about H1N1 or the star of the hour, H3N2, but about new mutations with unpredictable pandemic potentials.

Influenza has never been alone, though. In a dissimulated novel that makes envious the epic plots, other characters become notorious, such as the metapneumovirus, with its recurring regional pandemics, from the eternal rhinovirus and its persistent coryza and cough, from the morbid adenovirus, daring in its dissemination and capacity to reach different organs and systems, to the superstar of modern virology, the coronavirus, which needs no introduction in the current epidemiological context. From this emerged the need for modern man, or who believes himself to be modern, to confront these imperceptible living beings, inhibitors of viral enzymes, agents capable of preventing multiplication, modulators of inflammatory activity, monoclonal antibodies, and vaccines. Technology served as inputs to human beings, providing intermittent breaths that ensure survival, from the human point of view, or an expressive number of guinea pigs in the viral perspective.

From the shadow of so many anti-heroes, an agent specialized in children, the

respiratory syncytial virus, has gradually made itself noticed. So often underestimated and labeled as seasonal, the RSV has immediately shown that it has not chosen pockets in the underdeveloped world. Its reach is global, from the developed to the developing world. Responsible for an increasing volume of admissions of infants with respiratory failure, the virus has shattered age and climate paradigms. Moreover, it has grown tired of being known as the tormentor of individuals with complex chronic conditions, expanding its potential for morbidity and mortality to healthy children and adults, or eutrophic in the preference of some. Through known and unknown biases, we currently experience bronchiolitis outbreaks in the middle of hot summer days, with victims of different intensities. For most of them, fortunately, the outcome will be in the safety of their homes, under the aegis of their protectors. For others, regardless of the outcome, there will be a period of purgatory spent in ICUs, connected to respirators, being kept sedated, sometimes

blocked, while we passively wait for the self-limitation of the disease. We must not forget that in this disease less is more, and in the absence of specific treatments, it is up to us to try to avoid greater harm.

What led this enigmatic virus to live its love in times of so many other cholera may still remain in the shadows of folkloric or drama-rich mysteries; however, the fact does not hide the negligence that we commit with ourselves and our dependents when we crowd and talk loudly or more loudly to those who often do not even hear us. Negligence tested and attested when we ignore recommendations from health authorities, when we leave the mask on the chin, the wrist, the elbow, or even on the table. A greater negligence when we ignore the age-old recommendation to wash our hands. Despite the spirit of St. Nicholas, Christmas 2021 brought the feeling that evil was being defeated and that the time for sparkling wine had come. We went shopping and crowded stores and malls. We talk as if we were shouting, we touch handrails, escalators, and we forget about the safety meter that acts

as a kind of shield. In the expectation of a Christmas just like in the old days, we brought old vices and contaminated ourselves, and, sick or not, we brought pests, plagues, viruses to those who did not have the right to choose, our children, nephews, grandchildren, our little ones.

The outcome remains beyond our vision and ability to understand. But lessons must be learned, with or without the aid of our will. It is imperative that we believe in hygienic etiquette and sanitary measures. It is salutary for us to understand that not everything must go the way of the collective, and that small pleasures have always been in our homes with our own. We are not going to have forgiveness or indulgence of viruses. On the contrary, in this eternal war with beings at different levels of cellular complexity, everything points to a single winner, the one who has always been here, even before we became what we are. The pharmaceutical industry will not break its perennial commitment to capitalism and will continue investing in

chronic use medications. There are no perspectives for new antivirals, not with proven efficacy. Intensive care beds are at their peak. Tertiary and quaternary hospitals are the same as always. In this odyssey not even dreamt of by Ulysses, we are supporting characters. And there is no point in creating false prophets or calling yourself one. To disseminate false knowledge in social networks is to behave like a braggart, in times when the divine comedy is left to fill our libraries.

From the perspective of health professionals, child care involves first and foremost responsibility. It is essential to guide the caregivers to keep well and behave well. On the other side of the stretcher are us, nurses, doctors, and physical therapists, serving as a support to those in need. Information is available, and access to it has never been so easy. It is up to us to take advantage of it, without Manichaeism, leaving Cartesian doctrines for other times. Difficult times require a rupture from rancorous and unfounded pragmatism. It is the duty of caregivers to recognize adversity,

to set goals and strategies, regardless of what I, you, or we believe. It is our duty, as health professionals, to accept the evidence and honor those who have made evidence-based options available to us. And never forget that we are privileged among so many underprivileged, certain that everything is for them, by them, and with them. It is time to leave the comfort zone of passive characters and take the posture of those who are true narrators.