

Cén chaoi ar féidir liom mo naónán a chosaint ar RSV?

Tá imdhíonadh ar a dtugtar nirsevimab á mholadh do gach leanbh a bheirtear idir Meán Fómhair 2024 agus Feabhra 2025. Cosnóidh sé seo do naónán ar ionfhabhtú RSV le linn míonna an gheimhridh.

Is instealladh aonair é nirsevimab a thugtar isteach i matán leise an naónáin. Tá sé saor in aisce. Tairgfeart an t-imdhíonadh do do naónán sula rachaidh sibh abhaile ón ospidéil máithreachais.

Céard is nirsevimab ann agus cén chaoi a n-oibríonn sé?

Is antasubstaint é Nirsevimab ar féidir leis cosaint a thabhairt i gcoinne RSV. Ní hionann é agus vacsaín, a spreagann an córas imdhíonachta le hantasubstaintí a tháirgeadh. Ina áit sin, tugann nirsevimab na hantasubstaintí fén go díreach do do naónán. Ní chuireann nirsevimab isteach ar vacsaín ná ar chogais eile a thugtar do naónáin agus is féidir é a thabhairt ag an am céanna le hinstealltaí eile.

Céard iad na buntáistí a bhaineann le mo naónán a chosaint ar RSV?

Tá nirsevimab an-eifeachtach agus cuireann sé cosc ar níos mó ná 80% d'ionfhabhtuithe RSV. Laghdáonn sé freisin an baol go mbeidh ar do leanbh dul chuig an ospidéil chun cóir leighis a fháil ná go dtiocfaidh aimhréidheanna eile air ná uirthi de dheasca ionfhabhtú RSV.

Oibríonn sé láithreach bonn, rud a fhágann go mbeidh do naónán cosanta agus sibh ag fágáil an ospidéil agus ag dul isteach i dtimpeallachtáil a bhféadfadh RSV a bheith ag scaipeadh iontu, amhail an baile nó an pobal.

Cosnóidh nirsevimab do naónán ar RSV go ceann cúig mhí ar a laghad thar thréimhse an gheimhridh, tráth a mbíonn ardleibéal RSV ag dul thart.

Tá an Roinn Sláinte, Feidhmeannacht na Seirbhíse Sláinte (FSS) agus an Coiste Comhairleach Náisiúnta um lmdhíonadh ag moladh nirsevimab in Éirinn. Tá imdhíonadh RSV á mholadh i dtíortha eile san Eoraip, sna Stáit Aontaithe agus san Astráil freisin.

An bhfuil nirsevimab slán sábhálte do mo naónán?

Mar thoradh ar thrialacha cliniciúla mionsonraithe, staidéir mhóra eolaíocha agus taithí ó chláir eile imdhíonta nirsevimab san Eoraip, is eol dúinn go bhfuil nirsevimab idir shlán sábhálte agus éifeachtach. Rinne an Ghníomhaireacht Leigheasra Eorpach (EMA) nirsevimab a cheadúnú in 2022.

Céard iad na fo-iarmhairtí?

Níl fo-iarmhairtí coitianta. Ní thuiriscítear iarmhairtí éadroma ná mion-iarmhairtí ach i níos lú ná 1% de na naónáin a fhraigheann nirsevimab. Ina measc siúd tá:

- deirge sa chraiceann san áit a bhfuair an naónán an t-instealladh
- teocht éadrom,
- gríos éadrom.

Is annamh a thuiriscítear frithghníomhuithe ailléirgeacha

nó hipiríogaireacht. Déanfar dlúthmhonatóireacht ar do naónán tar éis dó nó di an t-instealladh a fháil.

Níl aon RSV in imdhíonadh nirsevimab agus ní féidir leis a bheith ina chúis le haon bhreuiteach a bhaineann le RSV.

Beidh do dhochtúir nó do chnáimhseach in ann aon cheist atá agat a fhreagairt.

Céard iad na roghanna eile?

Má dhéanann tú an cinneadh gan nirsevimab a thabhairt do do naónán, ní bheidh sé ní sí cosanta ar RSV.

Beidh RSV ag scaipeadh i measc leanaí agus daoine fásta mar sin fén agus beidh an seans ann go dtolgfaidh do naónán é agus go n-éireoidh sé ní sí breoite dá bharr.

Má dhéanann tú an cinneadh gan do naónán a imdhíonadh in aghaidh RSV, d'fhéadfadh sé go mbeadh ort an baol go dtolgfaidh do naónán RSV a laghdú ar bhealaí eile:

- lámha a ní i gceart
- fanacht glan ar áiteanna plódaithe
- teorainn a chur le teaghmáil le daoine a bhfuil comharthaí slaghdáin nó ionfhabhtuithe eile orthu.

Cé na daoine nár cheart dóibh nirsevimab a fháil?

Is féidir leis na cnáimhseachá ná leis na dochtúirí comhairle a thabhairt duit má bhraitheann siad nár cheart do do naónán nirsevimab a fháil. Caithfidh an tsláinte a bheith go maith ag do naónán nuair a thugtar nirsevimab dó ná di. I gcás go bhfuil monatóireacht á déanamh ar do naónán le haghaidh

aon riocht, amhail fadhbanna leis an bhfuil, ionfhabhtú, deacrachartaí analaithe ná leibhéal íseal siúra san fhuil, d'fhéadfadh sé go gcuirí siar nirsevimab go dtí go dtiocfaidh biseach ar do naónán.

Cén áit ar féidir liom teacht ar a thuilleadh eolais?

Labhróidh na cnáimhseachá ná na dochtúirí leat faoin imdhíonadh nirsevimab agus freagróidh aon cheisteanna atá agat. Má dhéanann tú an cinneadh do naónán a chosaint ar RSV, iarrfar ort toiliú ó bhéal a thabhairt go dtabharfaí an t-instealladh dó ná di.



Le tuilleadh eolais a fháil ó HSE
www.hse.ie/RSV



Chun féachaint ar fhaisnéis othar ó Ghníomhaireacht Leigheasra na hEorpa tabhair cuairt ar:
www.ema.europa.eu/en/medicines/human/EPAR/beyfortus



Protect your new born baby against Respiratory Syncytial Virus (RSV)

Protect your baby against RSV

You can now protect your new born baby against Respiratory Syncytial Virus (RSV).



What is RSV and why should I protect my baby against it?

RSV is a common virus that causes respiratory infections in young babies. Babies under three months old get sicker with RSV than older children.

Each winter in Ireland one in two new born babies will get RSV and many will need medical care from their GP or the emergency department of a children's hospital. Four out of a hundred new born babies are hospitalised due to RSV, with some babies needing special treatment in intensive care units.

Nirsevimab is the best way to protect your baby from RSV.

How can I protect my baby from RSV?

An immunisation called nirsevimab is being recommended for your baby. This will protect your baby from severe RSV infection over the coming months.

Nirsevimab is a single injection into the baby's thigh muscle. It is free of charge. You will be offered the immunisation for your baby before you go home from the maternity hospital.

What is nirsevimab and how does it work?

Nirsevimab is an antibody that can protect against RSV. It is different from a vaccine, which stimulates the immune system to produce antibodies. Instead, nirsevimab provides antibodies directly to protect your infant. Nirsevimab does not interfere with other infant vaccines or medicines and can be given at the same time as other injections.

What are the benefits of protecting my baby from RSV?

Nirsevimab is very effective and prevents more than 80% of RSV hospitalisations. It also reduces the risk of your baby needing ICU treatment and other complications due to RSV infection.

It works straight away so your baby is protected when they leave hospital and enter environments where RSV could be spreading such as the home or in the community.

Nirsevimab will protect your baby against RSV for at least five months over the winter period when RSV levels are highest.

In Ireland, nirsevimab is recommended by the Department of Health, HSE and the National Immunisation Advisory Committee (NIAC). RSV immunisation is also recommended in other countries in Europe, the USA and Australia.

Is nirsevimab safe for my baby?

Detailed clinical trials, large scientific studies and experiences from other nirsevimab immunisation programmes in Europe, have found nirsevimab to be safe and effective. Nirsevimab was licensed by the European Medicines Agency (EMA) in 2022.

What are the side effects?

Side effects are uncommon. Mild and minor effects are reported in fewer than 1% of babies who receive nirsevimab. These include:

- redness of the skin where the baby got the injection
- mild temperature,
- a mild rash.

Allergic reactions or hypersensitivity are rarely reported. Your baby will be monitored closely after the injection.

The nirsevimab immunisation does not contain RSV and cannot cause RSV related illness.

Your doctor or midwife will answer any queries you have.

What are the alternatives?

If you choose not to give nirsevimab to your baby, they won't be protected against RSV.

RSV will still be circulating in children and adults and your baby may get infected and become unwell.

If you choose not to immunise your baby against RSV you may need to reduce the risk of your baby getting RSV by:

- cleaning hands properly
- avoiding crowded places
- and limiting contact with people who have cold-like symptoms or other infections.

Who should not get nirsevimab?

Your team of midwives or your doctor can advise if they feel that your baby should not get nirsevimab. Your baby must be well when nirsevimab is given. If your baby is being monitored for any condition such as problems with their blood, infection, breathing difficulties or low blood sugar, nirsevimab might be delayed until your baby is well.

Where can I learn more?

Your team of midwives or your doctor will talk to you about the nirsevimab immunisation and they will answer any questions that you may have. If you decide to protect your baby from RSV, you will be asked to give verbal consent for your baby to get the injection.



For more information from the HSE
www.hse.ie/RSV



To view patient information from the European Medicine Agency visit:
www.ema.europa.eu/en/medicines/human/EPAR/beyfortus

Date:
Batch No:



Cosain do naónán nuabheirthe ar an Víreas Sincítiach Riospráide (RSV)

Cosain do naónán ar RSV

Is féidir leat do naónán nuabheirthe a chosaint ar an Víreas Sincítiach Riospráide (RSV)anois.

Céard is RSV ann agus cén fáth ar chóir dom mo naónán a chosaint air?

Is víreas coitianta é RSV is cúis le hionfhabhtuithe riospráide i naónán óga. Is broite a bhíonn naónán faoi bhun trí mhí d'aois nuair a tholgann siad RSV ná leanáit atá níos sine.

Gach geimhreadh in Éirinn, cuirtear ceathrar as gach 100 naónán nuabheirthe san ospidéal de dheasca RSV, agus teastaíonn cóireáil speisialta in aonad dianchúraim i roinnt cásanna. Ina theannta sin, tolgann duine amháin as gach beirt naónán nuabheirthe in Éirinn RSV sa gheimhreadh agus caithfidh an-chuid acu cúram Leighis a fháil ó dhochtúir teaghlaigh nó sa rannóg éigeandála in ospidéal leanaí.

Is é nirsevimab an bealach is fearr le do naónán a chosaint ar RSV.

