



Memo

To: General Practitioners, Director of Public Health Nursing, Director of Public Health, Pediatricians, Clinical Directors of Hospitals.

From: Dr Éamonn O'Moore, Director of National Health Protection.

Date: 06/08/2024

Subject: RSV Immunisation Pathfinder Programme

Ref: DNHP 0381

Dear colleagues,

The Minister of Health recently announced an infant Respiratory Syncytial Virus (RSV) Immunisation Pathfinder Programme will be implemented by HSE for all newborn infants during the coming RSV season (from September 2024 to February 2025), with the administration of a new long-acting RSV monoclonal antibody (Nirsevimab). Nirsevimab will also be administered to those high-risk babies who are currently eligible for Palivizumab. The switch over as recommended by NIAC will happen from the start of the pathfinder programme on **01 September 2024**.

Nirsevimab will be given to all newborn babies this RSV season before they are discharged home from the maternity hospital to protect them in the first days and weeks of life, when the risk of RSV infection with serious outcomes is at its greatest. One dose of Nirsevimab will provide protection to the infant for 150 days, the entire RSV season. Nirsevimab is administered as an intramuscular injection and can be given from birth.

Nirsevimab is highly effective and prevents more than 80% of RSV infections and hospitalisations. Detailed clinical trials, other large scientific studies and experience from other Nirsevimab immunisation programmes in Europe have found Nirsevimab to be safe and well tolerated in infants. Side effects are usually mild and uncommon. Minor side effects are reported in less than 1% of infants who receive it. These side effects include soreness in the skin where the infant got the injection, mild temperature, or a mild rash. Allergic reactions or hypersensitivity reactions have been reported rarely.

As Nirsevimab is a passive antibody immunisation, it does not require the infant to generate its own antibodies using its own immune system, nor does it interfere with the infants' immune response to vaccines in the current immunisation schedule. Therefore, Nirsevimab can be co-administered with any Primary Childhood immunisation. Newborn babies who receive Nirsevimab from hospitals soon after birth can commence the normal course of vaccinations that start at 2 months of age.

As part of the RSV Pathfinder Programme, pregnant women will be provided with written and verbal information on the RSV immunisation programme at their antenatal clinics and soon after birth of their baby. Please find attached to this letter the **Parent Information leaflets** and a link below to **Frequently Asked Questions**.

Further information on the RSV Immunisation Programme can be found at:

<https://www2.hse.ie/conditions/rsv/immunisation/>

FAQ:

<https://www.hpsc.ie/a-z/respiratory/respiratorysyncytialvirus/immunisation/>

See also the recent IMJ editorial from 27 June 2024: https://imj.ie/nirsevimab-reducing-rsv-infections-in-infants/?utm_source=Newsweaver&utm_medium=email&utm_term=Nirsevimab+-+Reducing+RSV+Infections+in+Infants&utm_campaign=June+2024%3B+Vol.+117%2C

We appreciate your support in promoting the RSV immunisation programme. Together we can significantly reduce the impact of RSV on infants in Ireland in the upcoming season and reduce hospitalisations and intensive care unit admissions. If you have any queries, the first point of contact is rsvpathfinderprogramme@hpsc.ie

Yours sincerely,



Dr Éamonn O'Moore

Director of National Health Protection

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