



RSV prophylaxis for newborns and babies: An overview of the most important information



What is RSV prophylaxis?

RSV prophylaxis refers to passive immunisation against the RS virus. It involves antibodies that make it harder for the virus to spread within the human body being injected into the thigh. The Standing Committee on Vaccination (STIKO) has been recommending RSV prophylaxis with the active substance Nirsevimab (brand name: Beyfortus) since June 2024 for all newborns and babies in their first RSV season.



What is RSV?

RSV stands for respiratory syncytial virus. RSV infects the respiratory tract and is transmitted primarily through droplets when coughing, sneezing and speaking. It can also be transmitted through contact with surfaces. The RSV season generally stretches from October to March.

- **Up to 70%** of all babies get infected with RSV during their first autumn or winter.
- **Pretty much all** children get infected with RSV in their first two years.

The symptoms resemble those of a cold in the case of mild illness. Inflammation of the lower respiratory tract ('bronchiolitis') or pneumonia can occur in serious cases. An RSV infection is also a common cause of middle ear infections. Babies who are seriously ill with RSV often have to be treated in hospital. In rare cases, RSV can prove fatal.



Why is RSV prophylaxis recommended?

RSV prophylaxis lowers the risk of an RSV infection turning serious. It reduces the incidence of infected babies having to be admitted to hospital for treatment.

Out of every **1,000 babies under the age of 8 months**, the number needing hospital treatment for an RSV infection is:



Without prophylaxis: 35



With prophylaxis: 7

A reduction in the incidence of serious cases can reduce the pressure on paediatric practices and hospitals in the autumn and winter, thereby improving medical care for all children.



When should you get RSV prophylaxis?

RSV prophylaxis is recommended for all newborns and babies in their first RSV season. The timing will depend on the month of birth:

- In the case of babies born between April and September, RSV prophylaxis should be administered **between September and November** (i.e. before their first RSV season).
- In the case of babies born between October and March, RSV prophylaxis should be administered **as soon as possible after birth**, generally on being discharged from the maternity unit or at the U2 examination (3-10 days old). If it has not been administered on time, then it should be administered as soon as possible within the RSV season.



Prophylaxis **between September and November**



Prophylaxis **as soon as possible after birth**



For how long does the protective effect last?

The protective effect provided by RSV prophylaxis is instantaneous after administering the active substance and generally lasts throughout the RSV season. A one-off dose should therefore provide enough protection for the first RSV season.



Is RSV prophylaxis safe?

RSV prophylaxis is well tolerated. Various studies have demonstrated this. Local reactions such as pain or a temporary rash at the site of the injection are possible. Allergic reactions to the active substance are rarer. Tolerability and safety are constantly being studied.