

Health Advisory – Preventing Respiratory Syncytial Virus (RSV) in Infants

January 3, 2024

Situational Update

Respiratory syncytial virus (RSV) season is here and it is critical to continue protecting our most vulnerable patients from RSV disease. In California, more than 10% of respiratory specimens tested positive for RSV during the week ending December 16, 2023. In Sacramento County, 13 cases of RSV-related ICU admissions in children less than five years old have been reported to Sacramento County Public Health (SCPH) so far this season. Please see actions and recommendations for healthcare providers below.

Actions Requested of Healthcare Systems and Clinicians

1. Report electronically to SCPH – via CalREDIE or confidential fax at (916) 854-9709 – severe RSV cases (ICU admissions and deaths) for those less than five years of age.
Medical records (e.g., admission notes, laboratory results, discharge summary, vaccination information) for all ICU and fatal cases should be uploaded into the CalREDIE filing cabinet or sent via confidential fax.
2. **Offer antibody products (nirsevimab or palivizumab) to all infants younger than 8 months of age born during the current RSV season.**
3. If your practice sees young or vulnerable infants and have not yet ordered nirsevimab (Beyfortus), order now to protect as many patients as possible with available Vaccine for Children (VFC) supplies.

General Recommendations for RSV Antibody

Nirsevimab is recommended for:

- All infants younger than 8 months of age born during RSV season or entering their first RSV season. Except in rare circumstances, most infants younger than 8 months of age do not need nirsevimab if they were born 14 days or more after their mother received the RSV vaccine.
- Some children aged 8 through 19 months who are at increased risk for severe* RSV disease and entering their second RSV season.

Palivizumab use is limited to:

- Some children younger than 24 months of age with certain conditions that place them at increased risk for severe* RSV disease. It must be given once a month during RSV season.

**infants and children at increased risk for severe disease include: children born prematurely and have chronic lung disease, children with severe immunocompromising conditions, children with cystic fibrosis who have severe disease, and American Indian and Alaska Native children.*

NOTE: There are still 50 and 100 mg nirsevimab doses available to order from the VFC program for eligible children. Providers will need to check with manufacturers about any remaining doses for privately insured children. **Providers are encouraged to order and administer remaining doses as soon as possible.**

For additional information guidance, please see the following links:

- RSV Prevention (CDC): <https://www.cdc.gov/rsv/about/prevention.html>
- RSV Immunization for Children 19 months and Younger (CDC): <https://www.cdc.gov/vaccines/vpd/rsv/public/child.html>
- Limited Availability of Nirsevimab in the US – Interim CDC Recommendations to Protect Infants from RSV during the 2023-2024 RSV Season (CDC): <https://emergency.cdc.gov/han/2023/han00499.asp>

Sincerely,



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