

Care Is Calling

You thrive on making a difference.

This RSV season, continue making a difference by prescribing SYNAGIS® (palivizumab), the only prophylaxis against RSV, to prevent serious RSV disease requiring hospitalisation in high-risk infants.^{1,2}

RESPIRATORY SYNCYTIAL VIRUS IS REEMERGING. BE PREPARED. STAY VIGILANT

IMPACT OF COVID 19 ON RSV INFECTION









- Public health measures to reduce COVID-19 circulation resulted in declining rates of RSV infection across the globe in 2020³⁻⁵.
- This resulted in an increasing number of infants who have never been exposed to these common viruses⁶



RSV CHALLENGES FOR WINTER 2021-2022 AND BEYOND

The loss of population immunity to RSV amongst young children may create a larger susceptible population that is potentially likely to have a larger outbreak this winter.7

Our reasonable worst-case scenario modelling similarly suggests that RSV levels could rise rapidly following relaxation of behavioural and environmental interventions. with a peak outbreak in early autumn of between 1.5 and 2 times the magnitude of a 'normal' year.7,8

Outbreaks of RSV in the autumn and influenza in the winter could be around twice the magnitude of a 'normal' year, and might overlap (at least partially) with a peak in COVID-19 infections.7



The AAP interim guidance on administration of palivizumab during this delayed season is the same as for a typical season: Consider administering the humanized monoclonal antibody in up to five monthly doses to prevent RSV in high-risk infants and children in areas experiencing high rates of the virus.9



STAY VIGILANT AND ADMINISTER **RSV PROPHYLAXIS NOW TO PREVENT RSV IN HIGH-RISK INFANTS.**

- References:

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 6. NHS England Primary Care bulletins Issue 135: 8 June 2021. Available at: https://www.england.nihs.uk/coronavirus/primary-care/other-resources/primary-care-bulletin/june-2021/ Access date: January 2022.
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For Gulf:

