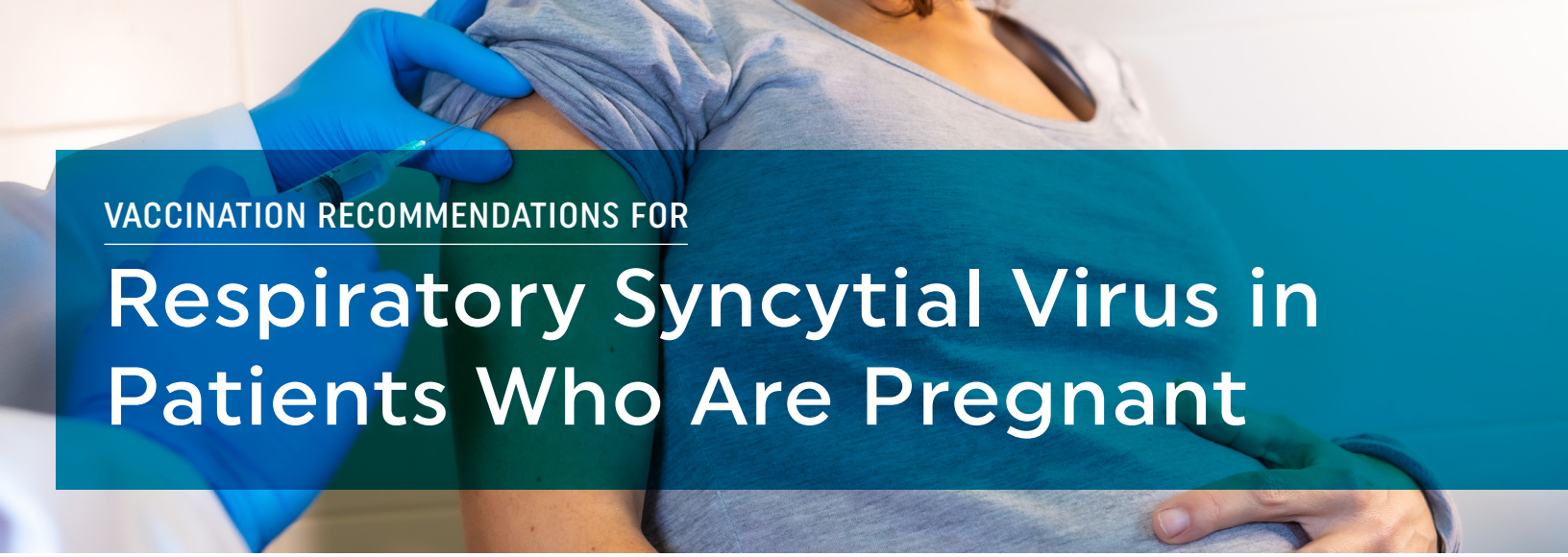

VACCINATION RECOMMENDATIONS FOR

Respiratory Syncytial Virus in Patients Who Are Pregnant

Introduction

RSVpreF (Abrysvo™) is the **ONLY** respiratory syncytial virus vaccine approved for use during pregnancy to protect infants through 6 months from RSV-associated lower respiratory tract infection.[1] A single dose of the vaccine should be administered during weeks 32 through 36 of pregnancy (i.e., 32 weeks 0 days through 36 weeks 6 days).

Recommendation

The American Academy of Family Physicians recommends the RSVpreF (Abrysvo™) maternal RSV vaccine for people who are pregnant during 32 through 36 weeks of gestation, using seasonal administration to prevent RSV-associated LRTI in infants. The vaccine should be administered from September through January in most states for optimal protection.

Contraindication and Precaution

The RSVpreF (Abrysvo™) vaccine should not be administered to a person with a history of severe allergic reaction to any vaccine component (e.g., anaphylaxis).[2] The manufacturer's insert contains additional information about Abrysvo™.

Timing

In the United States, the RSVpreF (Abrysvo™) vaccine should be administered from September through January to the patient who is pregnant to protect against RSV-associated LRTI in the baby for up to 6 months after birth.[1] The protection from the vaccine to the baby does wane over time.

The RSV season can vary in some parts of the United States. In areas with RSV seasonality that is different, such as Alaska, southern Florida, Guam, Hawaii, Puerto Rico, U.S.-affiliated Pacific Islands and the U.S. Virgin Islands, health care professionals should follow their state, local or territorial guidance on the timing of RSVpreF (Abrysvo™) vaccination. The timing of RSVpreF (Abrysvo™) vaccination might vary in these jurisdictions because RSV circulation may be different from the rest of the United States.

For areas with differing seasonality of RSV, maternal RSVpreF (Abrysvo™) vaccination should start 1-2 months ahead of the anticipated RSV season and continue through 2-3 months before the anticipated end of the RSV season.

However, it is important that RSVpreF (Abrysvo™) vaccination be administered from September through January in most states and jurisdictions in the United States, regardless of year-to-year variation in RSV circulation.

Administration

A single dose (0.5 mL) of the RSVpreF (Abrysvo™) vaccine should be administered to people who are pregnant during weeks 32 through 36 of gestation. An intramuscular dose should be administered, preferably to the upper region of the arm (i.e., deltoid). Currently, sufficient evidence does not exist to determine if additional doses are needed.

As the Centers for Disease Control and Prevention notes, current data is unavailable on the effectiveness of the first-lifetime dose during subsequent pregnancies or on the safety of additional doses given in subsequent pregnancies. More data will be needed to determine whether additional doses should be administered in subsequent pregnancies. The CDC will continue to evaluate the data and may update recommendations prior to the 2024-2025 RSV season.

Co-administration with Other Vaccines

It is acceptable to co-administrate other recommended vaccines with the RSVpreF (Abrysvo™) to patients who are pregnant. These include tetanus, diphtheria and pertussis (Tdap), influenza and COVID-19 vaccines, regardless of timing.[2] The co-administration of vaccines can occur during the same clinic day or at any interval between vaccine products. When determining the co-administration of other vaccines with RSVpreF (Abrysvo™), please consider the following[1]:

- Whether the patient is current with recommended vaccines
- Likelihood that the patient will return for additional vaccines
- Risk of acquiring a vaccine-preventable disease
- Vaccine reactogenicity profiles
- Patient preferences

RSV Infection Protection for the Baby

It is crucial to strongly advise and recommend to patients who are expecting the importance of administering the RSVpreF (Abrysvo™) vaccine during pregnancy as a preventive measure for infants.[2]

There are two safe and effective immunizations to prevent RSV-associated LRTI in infants. For infants in the 2023-2024 respiratory season, a new RSV monoclonal antibody—nirsevimab (Beyfortus)—was approved.[3] It is essential to inform patients who are pregnant about the options available to prevent RSV-associated LRTI in infants. Inform patients who are pregnant that the RSV virus may cause mild symptoms resembling a cold in younger or middle-aged adults, but it can pose a much more severe threat to infants and older adults.

For the 2023-2024 Respiratory season, the CDC recommends either[1]:

- Administering RSVpreF (Abrysvo™) vaccine to the patient who is pregnant

OR

- Administering the RSV monoclonal antibody—nirsevimab (Beyfortus)—to the infant

Either the maternal vaccination RSVpreF (Abrysvo™) or the monoclonal antibody nirsevimab (Beyfortus) is recommended, but administration of both is not needed for most infants.

Please note that on January 5, 2024, the CDC advised health care professionals to return to the recommendations approved by the CDC on August 25, 2023, in its Use of Nirsevimab for Prevention of Respiratory Syncytial Virus Disease Among Infants and Young Children: Recommendations of the Advisory Committee on Immunization Practices – United States, 2023.

References

1. Centers for Disease Control and Prevention. Frequently asked questions about RSVpreF (Abrysvo) vaccine for pregnant people. Accessed January 9, 2023. https://www.cdc.gov/vaccines/vpd/rsv/hcp/pregnant-people-faqs.html
2. CDC. Healthcare providers: RSV vaccination for pregnant people. Accessed January 9, 2023. https://www.cdc.gov/vaccines/vpd/rsv/hcp/pregnant-people.html
3. CDC. Clinician Outreach and Communication Activity updated guidance for healthcare providers on increased supply of nirsevimab to protect young children from severe respiratory syncytial virus (RSV) during the 2023-2024 respiratory virus season. Accessed January 9, 2024. https://emergency.cdc.gov/newsletters/coca/2024/010524a.html

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