

Short Answer Management Problems

Q39 Respiratory Syncytial Virus

You have been providing prenatal care to a 30 year old woman (G1P0). She attends your office for a routine prenatal visit at 22 weeks. Her estimated date of delivery is in November. At the end of her visit she asks about the new vaccine for protecting her infant from respiratory syncytial virus (RSV).

1. RSV infects almost all infants globally by 2 years of age.

- ☐ True
- ☐ False

2. List two risk factors for severe RSV disease in infants.

You advise her that Health Canada has approved the RSVpreF protein subunit vaccine for use in pregnancy.

3. When in pregnancy does Health Canada recommend administering the vaccine?

4. How long does it take for adequate transfer of maternal antibodies?

RSVpreF administered in pregnancy has been shown to reduce ICU admission, hospitalization and medically attended RSV disease in infants during their first RSV season.

5. How long is the protection conferred by RSVpreF likely to last?

RSVpreF administered in pregnancy may increase the risk of severe local adverse events (specifically redness, swelling and pain).

6. Is there any increase in severe systemic adverse events for pregnant patients?

Educational Point: Respiratory syncytial virus infects almost all infants globally by 2 years of age. Risk factors for severe RSV disease in infants include prematurity, age younger than 1 year, pre-existing cardio-respiratory disease, being immunocompromised, and residence in Indigenous, remote, or northern communities. Although these infants are at higher

risk of severe outcomes, overall burden to the health care system is mostly due to medical care for healthy, full-term infants.

There are 3 immunizing products available for preventing severe RSV disease in infants: 2 monoclonal antibodies, palivizumab and nirsevimab; and 1 vaccine given during pregnancy, RSVpreF.