

- TO: West Virginia Healthcare Providers, Hospitals and Other Healthcare Facilities
- FROM: Matthew Christiansen, MD, MPH Commissioner and State Health Officer West Virginia Department of Health and Human Resources, Bureau for Public Health
- DATE: August 31, 2023

LOCAL HEALTH DEPARTMENTS: Please distribute to community health providers, hospital-based physicians, infection control preventionists, laboratory directors and other applicable partners.

OTHER RECIPIENTS: Please distribute to association members, staff, etc.

Respiratory syncytial virus (RSV) is a cause of severe respiratory illness in older adults and children under 2 years of age, though people of all ages can get it and become severely ill. Illness caused by RSV is often more severe in young and premature infants, as well as older adults and those with certain underlying conditions. Additionally, RSV is the 2nd leading cause of seasonal respiratory illness outbreaks in West Virginia, behind influenza. In West Virginia, RSV-related death in an individual 5 years and younger is a reportable event. During the 2022-23 season, one pediatric death was reported in the state.

In the United States, RSV causes significant morbidity and mortality to at-risk populations. RSV causes an estimated 60,000-160,000 hospitalizations and 6,000-10,000 deaths annually among adults aged 65 and older. RSV is the leading cause of hospitalization of infants in the U.S., and nearly all infants (97%) will have been infected with RSV by the time they are 2 years old.

On June 21, 2023, the Advisory Committee on Immunization Practices (ACIP) <u>recommended</u> the nation's first two RSV vaccines for older adults. Adults aged 60 years and older may receive a **single dose** of an RSV vaccine, **using shared clinical decision making**.

Additionally on August 3, 2023, ACIP <u>recommended</u> Beyfortus (Nirsevimab), which is **not** a vaccine but a therapeutic for the prevention of RSV for all infants less than 8 months of age who are born during or entering their first RSV season and for infants and children aged 8-19 months who are at increased risk for severe RSV disease and are entering their second RSV season.

Use of RSV Vaccines in Older Adults

Vaccination with a single dose of the (Arexvy, GSK) or (Abrysvo, Pfizer) RSV vaccines have demonstrated moderate to high efficacy in preventing RSV-associated lower respiratory tract disease and have the potential to prevent substantial morbidity and mortality among older adults.

For the 2023-24 season, healthcare providers should offer RSV vaccination to all eligible persons. Both Arexvy and Abrysvo are available now commercially. The adult RSV vaccine will be available in limited amount for uninsured at West Virginia local health departments, once supply is available.

This message was directly distributed by the West Virginia Bureau for Public Health to local health departments and professional associations. Receiving entities are responsible for further disseminating the information as appropriate to the target audience.

Categories of Health Alert messages: Health Alert: Conveys the highest level of importance. Warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation. May not require immediate action.

Health Update: Provides updated information regarding an incident or situation. Unlikely to require immediate action.

For RSV vaccination, the decision to vaccinate a patient should be made based on discussion between the healthcare provider and the patient. As part of the discussion, providers should consider emphasizing the patient's risk for severe RSV-associated disease.

Chronic underlying medical conditions associated with increased risk:

- Lung disease (such as chronic obstructive pulmonary disease and asthma)
- Cardiovascular diseases (such as congestive heart failure and coronary artery disease) •
- Moderate or severe immune compromise •
- **Diabetes mellitus** •
- Neurologic or neuromuscular conditions •
- Kidney disorders •
- Liver disorders •
- Hematologic disorders
- Other underlying conditions that a healthcare provider determines might increase the risk for severe • respiratory illness

Other factors associated with increased risk:

- Frailty •
- Advanced age •
- Residence in a nursing home or other long-term care facility •
- Other underlying factors that a healthcare provider determines might increase the risk for severe respiratory illness

Coadministration of RSV vaccines with other adult vaccines during the same visit is acceptable. Providers should separate injection sites by at least 1 inch if possible and consider administering vaccines that are associated with an enhanced local reaction in separate limbs.

As with all vaccines, RSV vaccination should be delayed for persons experiencing moderate or severe acute illness with or without fever.

Adverse events after vaccination should be reported to the federal Vaccine Adverse Event Reporting System (VAERS) and reported concurrently to West Virginia by calling 1-800-222-1222.

Additional Resources:

- **RSV Vaccine Information Statement** •
- **GSK Arexvy Prescribing Information** •
- Pfizer Abrysvo Prescribing Information •
- **CDC Information for Healthcare Providers**

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RSV Therapeutic for Infants and Children

Beyfortus (Nirsevimab), a therapeutic, can prevent severe RSV disease among infants and young children who are at increased risk for severe RSV. For the 2023-24 season, healthcare providers should offer Nirsevimab from October through the end of March.

- 1 dose of Nirsevimab for all infants aged <8 months born during or entering their first RSV season (50 mg for infants weighing <5 kg [<11 lb] and; 100 mg for infants weighing ≥5 kg [≥11 lb]).
- 1 dose of Nirsevimab (200 mg, administered as two 100 mg injections given at the same time at different injection sites) for infants and children aged 8-19 months who are at increased risk for severe RSV disease and entering their second RSV season.

Nirsevimab is contraindicated in persons with a history of severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a product component.

Nirsevimab can be administered simultaneously with routine childhood vaccines.

Adverse reactions might occur after the coadministration of Nirsevimab with a vaccine; these reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS) and reported concurrently to West Virginia by calling 1-800-222-1222.

Nirsevimab is expected to be available commercially in the coming weeks. Additionally, the WVDHHR Bureau for Public Health will provide Nirsevimab to healthcare providers enrolled in the Vaccines for Children (VFC) program for the West Virginia Children's Health Insurance Program (WVCHIP). Additional information will be coming soon.

Additional Resources:

- Beyfortus Nirsevimab Prescribing Information
- <u>CDC: Information for Healthcare Providers</u>

RSV Vaccine for Pregnant Individuals

On August 21, 2023, the Food and Drug Administration (FDA) approved Abrysvo (RSV vaccine), the first vaccine approved for use in pregnant individuals to prevent lower respiratory tract disease and severed lower respiratory tract disease caused by RSV in infants from birth through 6 months of age. Abrysvo is approved for use at 32 weeks through 36 weeks gestational age of pregnancy. This is the same vaccine approved for the prevention of RSV in individuals 60 years of age and older. This vaccine is pending ACIP recommendations in the coming weeks. Additional information will be coming soon.

For more information, please contact the Office of Epidemiology and Prevention Services, Division of Infectious Disease Epidemiology at (304) 558-5358, extension 2.

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