

Prevention of RSV infection in infants with nirsevimab

What is RSV?

Respiratory syncytial virus, or RSV, causes severe respiratory infections, especially in the smallest infants and the elderly. RSV is the most common cause of lower respiratory tract infection requiring hospitalisation in children under 1 year of age. Common symptoms are a runny nose, cough, mild fever, poor eating, mucus, difficulty breathing and, in the smallest babies, sometimes apneas. The majority of children hospitalised for an RSV infection are basically healthy and born at full term. However, premature births and certain underlying diseases increase the risk of serious infection. Treatment is symptomatic, such as supporting breathing and eating. About 25% of hospitalised children under 1 month old need intensive care, and 15% of children under 3 months old need intensive care.

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Nirsevimab is a long-acting antibody used to prevent lower respiratory tract infection caused by RSV in infants. It is a human antibody, or immunoglobulin, against RSV, which is given as an injection like a vaccine, although it is not a vaccine, but a ready-made antibody. The product is very safe and has already been used extensively in several European countries. In accordance with the recommendation of the Council for Choices in Health Care in Finland and the decision of Finnish Coordinating Center for Health Technology Assessment, nirsevimab will also be offered in Finland during the RSV epidemic season to all newborns and children who are less than 3 months old at the start of the season, as well as to children under the age of one year who belong to at-risk groups.

When and where can you get nirsevimab?

Administration of nirsevimab will begin before the beginning of the RSV epidemic season in late 2024, when the drug becomes available. Nirsevimab is given to newborns in the maternity hospital before going home, and the aim is to give the medicine to others in the clinic in connection with the usual consultation visits. Nirsevimab is free for target groups.