

Fact Sheet

RSV Antibody Therapy (Nirsevimab) for Infants

Respiratory Syncytial Virus (RSV) is highly contagious and spreads easily through coughs and sneezes. Almost all children will be infected by the virus before the age of two.

RSV is the number one cause of hospital admission for Australian children under five years of age.

RSV antibody therapy works to prevent severe RSV-related lower respiratory tract disease in all infants entering their first RSV season, and for children up to 24 months of age who remain vulnerable to severe RSV disease through their second RSV season.

How RSV antibody therapy works

Antibodies are a natural part of our immune system that help to fight off infection and protect against illness.

A preventative therapy that contains a pre-made RSV antibody is administered to the infant via injection. This antibody works rapidly to **prevent**, **or reduce the severity of**, **an RSV infection**.

While one type of antibody therapy (called palivizumab) has been used in infants at high risk of severe RSV for more than 20 years as a five-dose treatment course, **a new antibody therapy (called nirsevimab) requires only one dose** to help protect against severe infection for the duration of the RSV season, or at least five months.

Administration

RSV antibody therapy can only be administered by a healthcare professional – in a hospital, GP practice or health clinic.

The preventative therapy nirsevimab is **designed to be given to all infants once as an injection** into the thigh muscle before the RSV season commences, or at birth for infants born during the RSV season.

In most of Australia, RSV commonly circulates from the **end of autumn to the start of spring**.

The difference between antibody therapy and vaccination

RSV antibody therapy and vaccines are different forms of immunisation that both work to **protect against severe infection**.

Vaccines trigger an immune response that helps the body make its own disease-fighting antibodies when an RSV infection occur.

Antibody therapy involves administering **pre-made antibodies that can immediately recognise and neutralise particles of the RSV virus**.

Benefits of RSV antibody therapy

A large clinical study found that one injection of nirsevimab reduced hospitalisations due to RSV-related lower respiratory tract disease by more than 83% in infants under 12 months of age during a five-month period compared to infants who did not receive the therapy.

Safety of RSV antibody therapy

Antibody therapy has been studied and used in hundreds of thousands of infants worldwide.

Like all medicines, antibody therapy may cause side effects. These may include a rash, reactions at the injection site (such as swelling, redness, and pain), and fever.

Because RSV antibody therapy lasts for only one RSV season, it has **no long-lasting impact on a child's immunity** to RSV or their broader immune system.

Access to RSV antibody therapy

While RSV antibody therapy for all infants has been registered by the Therapeutic Goods Administration, availability is limited. Some states (such as WA) are offering the immunisation to all babies under 8 months of age from April 2024, while efforts are underway to make this preventative therapy available nationwide from 2025.

To find out whether RSV antibody therapy has become available for your infant, please check with your healthcare provider.





