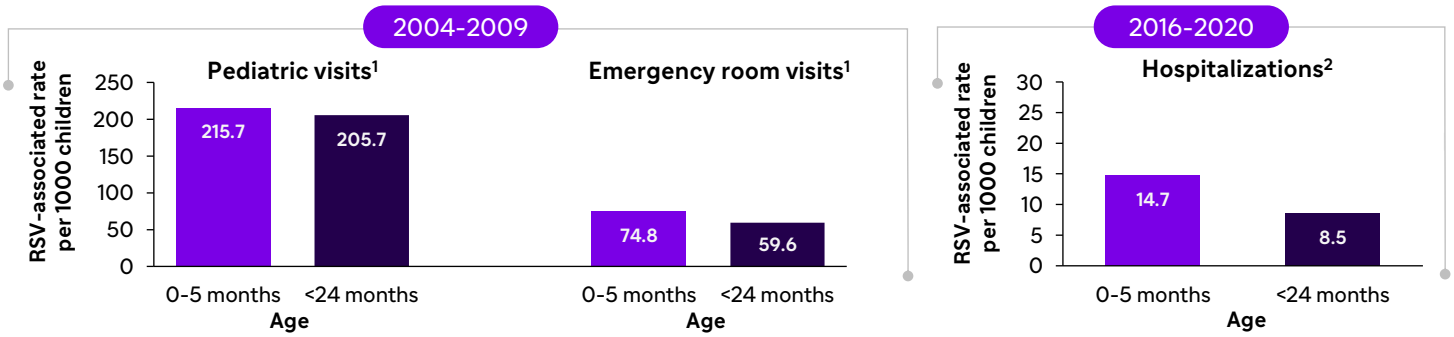
Opportunities Remain to Protect Infants from RSV Disease

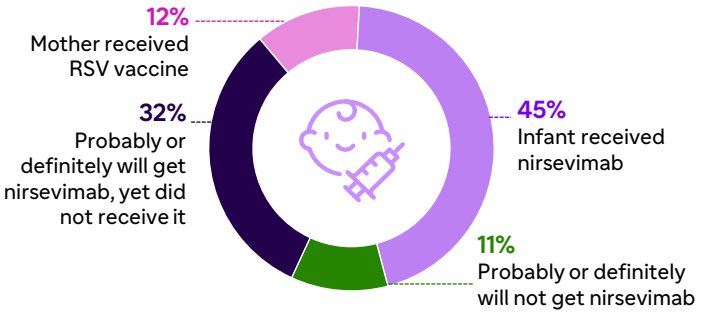
RSV Emergency Room and Outpatient Burden Extends Beyond 5 Months[1]



There is substantial outpatient burden in infants up to 24 months of age and 80% of visits are with infants without comorbid condition[1,2]

Significant Opportunities Remain to Protect Infants From RSV Disease

*At the End of the 2024/2025 RSV Season, Mothers With an Infant <8 Months of Age Reported[3]**



At the end of 2025, 43% of infants still needed protection from RSV disease

*Data presented here are from the National Immunization Survey-Adult COVID Module, which included females aged 18–49 years with infants <8 months (born since April 1, 2024) at the end of the RSV season, i.e., March 2025[3]

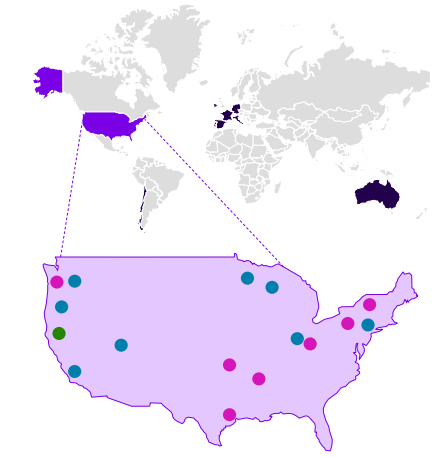
Improving Immunization Coverage

Remind
Parents that an immunization is upcoming or due

Recall
Patients who have missed opportunity or are past due for RSV protection

Avoid Missed Opportunities:
- Checking immunization status at every visit
- Ensure administration to infants at well, sick, or sibling visits
- Give all immunizations that are due

Real-world Evidence of Nirsevimab Has Been Evaluated in the US



Real world evidence generated in countries outside the US

BEAR Study Conducted by Kaiser Permanente Northern California[4]

Nirsevimab effectiveness against RSV medically attended events in infants (BEAR) is an observational retrospective cohort study of *31,900 infants* receiving nirsevimab (15,647) or untreated (16,253)

New Vaccine Surveillance Network (NVSN) Conducted by CDC[5]

A US population-based, prospective surveillance hospitalization study of *1,616 infants* receiving nirsevimab (136) or no intervention (1,480) utilizing a test-negative, case-control design

VISION Study Conducted by CDC[6]

Nirsevimab effectiveness against RSV-associated ED visits and hospitalizations in infants (VISION) is a test-negative observational study of *5039 ED encounters* and *1025 hospitalizations* among the US infants during the 2023–2024 RSV season

ABBREVIATIONS: BEAR, beyfortus™ (nirsevimab) effectiveness against medically-attended rsv events in infants; CDC, Centers for Disease Control and Prevention; ED, emergency department; RSV, respiratory syncytial virus; VISION; virtual SARS-CoV-2, influenza, and other respiratory viruses network

REFERENCES: 1. Lively JY, et al. *J Pediatric Infect Dis Soc*. 2019;8(3):284-286. 2. Curns AT, et al. *Pediatrics*. 2024;153(3):e2023062574. 3. Centers for Disease Control and Prevention. Infant protection against Respiratory Syncytial Virus (RSV) by maternal RSV vaccination or receipt of nirsevimab, and intent for nirsevimab receipt, United States. Accessed June 30, 2025. https://www.cdc.gov/rsvvaxview/dashboard/nirsevimab-coverage-infants.html. 4. Hsiao A et al. *Pediatrics*. 2025;156(2):e2024069510. 5. Moline HL, et al. *JAMA Pediatr*. 2025;179(2):179-187. 6. Payne AB et al. *Lancet Reg Health Am*. 2025 Aug 6;49:101196

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