

MnVFC Announcement

Date: October 1, 2024

To: MnVFC Providers

From: MnVFC Program

Re: **Nirsevimab (Beyfortus) Administration Can Begin Today**

Please route to:

- Clinical supervisor
- Medical director
- Clinic manager
- Clinic staff
- Pharmacy
- Vaccine staff

Nirsevimab (Beyfortus) administration

Last year, the Advisory Committee on Immunization Practices (ACIP) approved Nirsevimab (Beyfortus) for all infants less than 8 months of age in their first Respiratory Syncytial Virus (RSV) season. This long-acting monoclonal antibody protects infants up to 150 days. Clinical trials show 70 to 80% efficacy in preventing medically attended lower respiratory tract disease (LRTD) in infants and 90% efficacy in preventing ICU admissions. Most common side effects were rash and injection site redness, pain and swelling. Babies weighing less than 5 kg (11 pounds) get 50 mg (0.5 mL), babies weighing 5 kg (11 pounds) or more get 100 mg (1 mL) as a one-time dose.

Sites should start administering Nirsevimab on Oct. 1. Babies born April through September 2024, should receive Nirsevimab at their next clinic appointment. For babies born October 2024 through March 2025, administer Nirsevimab at the next clinic visit if:

- The mother did not receive RSV vaccine at 32 to 36 weeks of pregnancy,
- the mother received RSV vaccine but delivered within 14 days of administration,
- or the baby did not receive Nirsevimab in the hospital.

If your site carries RSV vaccine for pregnant or elderly people (Abrysvo or Arexvy), carefully manage your inventories to make sure you **do not administer RSV vaccine to infants**. Only Nirsevimab, the monoclonal antibody, should be administered to infants. If an RSV vaccine is administered to an infant in error, report this as a vaccine administration error and administer Nirsevimab to the infant.

Nirsevimab (Beyfortus) distribution

Nirsevimab is included in the Vaccines for Children (VFC) program to ensure that all MnVFC-eligible children will have access to it. If you have a birthing hospital in your system and they would like to enroll as a VFC provider, reach out to us. Currently very few hospitals in Minnesota are enrolled in the program or giving Nirsevimab before discharge from the hospital.

We will continue shipping doses requested in the existing MIIC special ordering event through the end of October. You can check the number of doses you have requested in MIIC under “manage special vaccine event.” You can request additional doses if you need them by going to “request special event vaccine” and selecting “2024-2025 Nirsevimab Phase I” from the dropdown menu. There will be at least one more Nirsevimab ordering event this season. Please watch for additional communication as the season progresses.

Resources:

- [Respiratory Syncytial Virus \(RSV\) for Health Professionals \(www.health.state.mn.us/diseases/rsv/hcp.html\)](http://www.health.state.mn.us/diseases/rsv/hcp.html): has additional information, infographics and sample vaccine cards for pregnant people and infants.
- The American Academy of Pediatrics has published a helpful visual guide: [AAP.org: Nirsevimab-Visual-Guide \(PDF\) \(https://downloads.aap.org/AAP/PDF/Nirsevimab-Visual-Guide.pdf\)](https://downloads.aap.org/AAP/PDF/Nirsevimab-Visual-Guide.pdf).
- [CDC: MMWR: Use of Nirsevimab for the Prevention of Respiratory Syncytial Virus Disease Among Infants and Young Children: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023 \(www.cdc.gov/mmwr/volumes/72/wr/mm7234a4.htm\)](http://www.cdc.gov/mmwr/volumes/72/wr/mm7234a4.htm).

MnVFC Program

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