

From the Chief Medical Officer
Professor Sir Michael McBride



HSS(MD) 33/2022

FOR ACTION

Chief Executives, Public Health Agency/HSC Trusts/NIAS
Deputy Secretary SPPG
GP Medical Advisers, SPPG
All General Practitioners and GP Locums (for onward distribution to practice staff)
OOHs Medical Managers (for onward distribution to staff)

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Our Ref: HSS(MD) 33/2022

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Dear Colleagues

PALIVIZUMAB PASSIVE IMMUNISATION AGAINST RESPIRATORY SYNCYTIAL VIRUS (RSV) IN AT-RISK PRE-TERM INFANTS – START OF PROGRAMME

ACTION REQUIRED

Trusts should take the necessary steps to immediately commence the provision of the Palivizumab passive immunisation programme, offering monthly intramuscular doses (at a dose of 15mg/kg of body weight) for a period of up to 7 months to at risk infants falling within the cohorts recommended in chapter 27a of the [green book](#).

Palivizumab is a humanised monoclonal antibody. It offers a form of passive immunisation, providing short-term protection against respiratory syncytial virus (RSV) and reducing the risk of serious illness, hospitalisation and death. It is offered to infants at the highest risk of severe disease should they contract RSV as set out in Chapter 27a of [The Green Book](#).

RSV is a seasonal virus which usually causes a wave of infection in late Autumn and Winter. The Palivizumab programme is timed to coincide with the RSV wave and usually starts during October. Measures taken to reduce transmission of COVID-19 during the last two years also reduced circulation of other respiratory viruses, including RSV.

There was very little circulating RSV during 2020/21 in Northern Ireland. In 2021/22 RSV exhibited an unseasonal epidemic pattern with peak infections and hospitalisation happening much earlier in the season. During 2021/22 the RSV epidemic peaked in

England, Scotland and Wales during July and August 2021. In Northern Ireland the peak of infections and hospitalisations was later than in other parts of the UK and occurred towards the end of September 2021 (while later than in other UK countries this was much earlier in the season than usual).

A sustained rise in the number of RSV cases detected has now been observed in Northern Ireland and **the Palivizumab programme should begin with immediate effect.**

Eligibility criteria

During the past two years, given the impact of the COVID-19 pandemic and the unknown clinical implications of having a large population of infants and young children who had previously been exposed to RSV, as it did not circulate in the normal way, the eligibility criteria for Palivizumab were extended. Please note that for this season, the **eligibility criteria have returned to the usual criteria as set out in Chapter 27a of [The Green Book](#).** Trusts should apply these criteria when identifying infants who should be invited for immunisation.

The Child Health Partnership has facilitated discussion with all Trusts on this issue so clinical teams have been advised that the Palivizumab programme was likely to commence early and that they should make the necessary plans for this.

Next steps

Trusts should put in place arrangements to immediately commence their Palivizumab programme for eligible infants.

Thank you in advance for putting the necessary arrangements in place.

Yours sincerely



pp PROFESSOR SIR MICHAEL McBRIDE
Chief Medical Officer

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