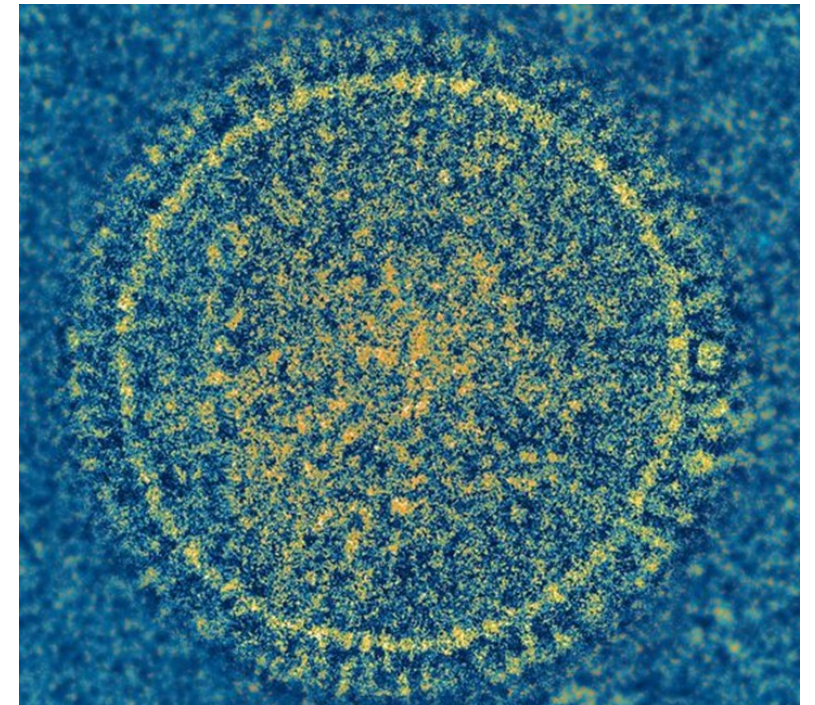


Next Steps for the ACIP Maternal & Pediatric RSV Work Group

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ACIP General Meeting
Oct 20, 2022



Policy questions being considered by the work group

- Should nirsevimab be recommended for all infants <8 months of age entering their first RSV season and all infants born during the RSV season?
- Should nirsevimab be recommended for children <24 months of age entering their second RSV season who remain at increased risk of severe disease?

Evidence reviewed by the work group includes but not limited to

- Epidemiology and burden of RSV in infants
 - RSV seasonality in the United States
 - Outpatient, emergency department visits, hospitalizations, and deaths
- Virology
- Safety and efficacy of nirsevimab
 - Phase 3 study in infants born ≥ 35 weeks gestation (initial and updated results)
 - Phase 2b study in infants born 29–34 weeks gestation
 - Phase 2/3 safety and pharmacokinetic study in infants eligible for palivizumab (including 2nd season)

Evidence to be reviewed by the work group

- Review evidence to identify children <24 months of age entering their second RSV season who remain at increased risk of severe disease
- GRADE of evidence
- Cost effectiveness analysis
- Evidence to Recommendations (EtR)
 - Public health problem
 - Benefits and harms
 - Values
 - Equity
 - Resource use
 - Acceptability
 - Feasibility

Proposed timeline of future ACIP presentations (tentative)

- February 2023
 - Summary of GRADE
 - Cost effectiveness analysis
 - EtR
- June 2023
 - ACIP vote (if product is licensed by this time)
- Agenda items might be added if data on additional products become available

For more information, contact CDC
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TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

