

# Nirsevimab protects infants against RSV-linked hospitalization

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Nirsevimab is efficacious for preventing hospitalization for respiratory syncytial virus (RSV)-associated lower respiratory tract infection among infants, according to a study published in the Dec. 28 issue of the *New*

*England Journal of Medicine.*

Simon B. Drysdale, Ph.D., from the Centre for Neonatal and Paediatric Infections at the University of London, and colleagues conducted a pragmatic trial involving [infants](#) aged 12 months or younger, born at [gestational age](#) of at least 29 weeks who were entering their first RSV season in France, Germany, or the United Kingdom. The infants were randomly assigned to receive a single intramuscular injection of nirsevimab (4,037 infants) or standard care (no intervention; 4,021 infants) before or during the RSV season.

The researchers found that 0.3 and 1.5 percent of infants in the nirsevimab and standard-care groups, respectively, were hospitalized for RSV-associated lower respiratory tract infection, corresponding to 83.2 percent efficacy for nirsevimab. Very severe RSV-associated lower respiratory tract infection occurred in 0.1 and 0.5 percent of infants in the nirsevimab and [standard-care](#) groups, respectively, corresponding to 75.7 percent efficacy. In France, Germany, and the United Kingdom, the efficacy of nirsevimab against hospitalization for RSV-associated lower respiratory tract infection was 89.6, 74.2, and 83.4 percent, respectively. Overall, 2.1 percent of the nirsevimab group had treatment-related adverse events.

"These findings suggest that nirsevimab has the potential to reduce the burden of hospitalization for RSV-associated lower respiratory tract infection among infants," the authors write.

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**More information:** Simon B. Drysdale et al, Nirsevimab for Prevention of Hospitalizations Due to RSV in Infants, *New England Journal of Medicine* (2023). [DOI: 10.1056/NEJMoa2309189](https://doi.org/10.1056/NEJMoa2309189)

Natasha B. Halasa, RSV Prevention—Breakthroughs and Challenges, *New England Journal of Medicine* (2023). DOI: [10.1056/NEJMe2312934](https://doi.org/10.1056/NEJMe2312934)

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