



Protect your baby against Respiratory Syncytial Virus (RSV)

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You can now protect your baby against Respiratory Syncytial Virus (RSV).

What is RSV and why should I protect my baby against it?

RSV is a common virus that causes respiratory infections in young babies. Babies under three months old get sicker with RSV than older children.

Each winter in Ireland one in two babies will get RSV and many will need medical care from their GP or the emergency department of a children's hospital. Four out of a hundred babies are hospitalised due to RSV, with some babies needing special treatment in intensive care units.

Nirsevimab is the best way to protect your baby from RSV.



How can I protect my baby from RSV?

An immunisation called nirsevimab is being recommended for your baby. This will protect your baby from severe RSV infection over the coming months.

Nirsevimab is a single injection into the baby's thigh muscle. It is free of charge. You will be offered the immunisation for your baby before you go home from the maternity hospital. An appointment for older babies eligible for immunisation can be booked on the HSE website.

What is nirsevimab and how does it work?

Nirsevimab is an antibody that can protect against RSV. It is different from a vaccine, which stimulates the immune system to produce antibodies. Instead, nirsevimab provides antibodies directly to protect your infant. Nirsevimab does not interfere with other infant vaccines or medicines and can be given at the same time as other injections.

What are the benefits of protecting my baby from RSV?

Nirsevimab is very effective and prevents more than 80% of RSV hospitalisations. It also reduces the risk of your baby needing ICU treatment and other complications due to RSV infection.

It works straight away so your baby is protected when they enter environments where RSV could be spreading such as the home or in the community.

Nirsevimab will protect your baby against RSV for at least five months over the winter period when RSV levels are highest.

In Ireland, nirsevimab is recommended by the Department of Health, HSE and the National Immunisation Advisory Committee (NIAC). RSV immunisation is also recommended in other countries in Europe, the USA and Australia.

Is nirsevimab safe for my baby?

Detailed clinical trials, large scientific studies and experiences from other nirsevimab immunisation programmes in Europe, have found nirsevimab to be safe and effective. Nirsevimab was licensed by the European Medicines Agency (EMA) in 2022.

What are the side effects?

Side effects are uncommon. Mild and minor effects are reported in fewer than 1% of babies who receive nirsevimab. These include:

- redness of the skin where the baby got the injection
- mild temperature,
- a mild rash.

Allergic reactions or hypersensitivity are rarely reported. Your baby will be monitored closely after the injection.

The nirsevimab immunisation does not contain RSV and cannot cause RSV related illness.

Your healthcare worker will answer any queries you have.

What are the alternatives?

If you choose not to give nirsevimab to your baby, they won't be protected against RSV.

RSV will still be circulating in children and adults and your baby may get infected and become unwell.

If you choose not to immunise your baby against RSV you may need to reduce the risk of your baby getting RSV by:

- cleaning hands properly
- avoiding crowded places
- and limiting contact with people who have cold-like symptoms or other infections.

Who should not get nirsevimab?

Your healthcare worker can advise if they feel that your baby should not get nirsevimab. Your baby must be well when nirsevimab is given. If your baby is being monitored for any condition such as problems with their blood, infection, breathing difficulties or low blood sugar, nirsevimab might be delayed until your baby is well.

Where can I learn more?

Your healthcare worker will talk to you about the nirsevimab immunisation and they will answer any questions that you may have. If you decide to protect your baby from RSV, you will be asked to give verbal consent for your baby to get the injection.



For more information from the HSE
www.hse.ie/RSV



To view patient information from the Europe Medicine Agency visit:

www.ema.europa.eu/en/medicines/human/EPAR/beyfortus

Date:
Batch No:



Cosain do leanbh ar an Víreas Sincítiach Riospráide (RSV)

Cosain do naónán ar RSV

Is féidir leat do leanbh a chosaint ar an Víreas Sincítiach Riospráide (RSV) anois.

Céard is RSV ann agus cén fáth ar chóir dom mo naónán a chosaint air?

Is víreas coitianta é RSV is cúis le hionfhabhtuithe riospráide i naónáin óga. Is breoite a bhíonn naónáin faoi bhun trí mhí d'aois nuair a tholgann siad RSV ná leanaí atá níos sine.

Gach geimhreadh in Éirinn gheobhaidh leanbh amháin as gach beirt RSV agus beidh cúram leighis de dhíth ar chuid mhór acu óna ndochtúir nó ón rannóg éigeandála in ospidéal leanaí. Tá ceathrar as gach céad leanbh san ospidéal mar gheall ar RSV, agus cóireáil speisialta ag teastáil ó roinnt leanaí in aonaid dianchúraim.

Is é nirsevimab an bealach is fearr le do naónán a chosaint ar RSV.



Cén chaoi ar féidir liom mo naónán a chosaint ar RSV?

Tá imdhíonadh ar a dtugtar nirsevimab á mholadh do gach leanbh a bheirtear sna míonna amach romhainn. Cosnóidh sé seo do naónán ar ionfhabhtú RSV le linn míonna an gheimhridh.

Is instealladh aonair é nirsevimab a thugtar isteach i matán leise an naónáin. Tá sé saor in aisce. Taigfear an t-imdhíonadh do do naónán sula rachaidh sibh abhaile ón ospidéal máithreachais. Is féidir coinne do naónáin níos sine atá incháilithe d'imdhíonadh a chur in áirithe trí shuíomh gréasáin FSS.

Céard is nirsevimab ann agus cén chaoi a n-oibríonn sé?

Is antasubstaint é Nirsevimab ar féidir leis cosaint a thabhairt i gcoinne RSV. Ní hionann é agus vacsaín, a spreagann an córas imdhíonachta le hantasubstaintí a tháirgeadh. Ina áit sin, tugann nirsevimab na hantasubstaintí féin go díreach do do naónán. Ní chuireann nirsevimab isteach ar vacsaíní ná ar chógais eile a thugtar do naónáin agus is féidir é a thabhairt ag an am céanna le hinstealltaí eile.

Céard iad na buntáistí a bhaineann le mo naónán a chosaint ar RSV?

Tá nirsevimab an-éifeachtach agus cuireann sé cosc ar níos mó ná 80% d'ionfhabhtuithe RSV. Laghdaíonn sé freisin an baol go mbeidh ar do leanbh dul chuig an ospidéal chun cóir Leighis a fháil nó go dtiocfaidh aimhréidheanna

eile air nó uirthi de dheasca ionfhabhtú RSV.

Oibríonn sé láithreach bonn, rud a fhágann go mbeidh do naónán cosanta nuair a bhíonn siad i dtimpeallachtaí a bhféadfadh RSV a bheith ag scaipeadh iontu, amhail an baile nó an pobal.

Cosnóidh nirsevimab do naónán ar RSV go ceann cúig mhí ar a laghad thar thréimhse an gheimhridh, tráth a mbíonn ardleibhéal RSV ag dul thart.

Tá an Roinn Sláinte, Feidhmeannacht na Seirbhís Sláinte (FSS) agus an Coiste Comhairleach Náisiúnta um Imdhíonadh ag moladh nirsevimab in Éirinn. Tá imdhíonadh RSV á mholadh i dtíortha eile san Eoraip, sna Stáit Aontaithe agus san Astráil freisin.

An bhfuil nirsevimab slán sábhálte do mo naónán?

Mar thoradh ar thrialacha cliniciúla mionsonraithe, staidéir mhóra eolaíocha agus taithí ó chlár eile imdhíonta nirsevimab san Eoraip, is eol dúinn go bhfuil nirsevimab idir shlán sábhálte agus éifeachtach. Rinne an Ghníomhaireacht Leigheasra Eorpach (EMA) nirsevimab a cheadúnú in 2022.

Céard iad na fo-iarmháirtí?

Níl fo-iarmháirtí coitianta. Ní thuairiscítear iarmháirtí éadroma ná mion-iarmháirtí ach i níos lú ná 1% de na naónáin a fhraigheann nirsevimab. Ina measc siúd tá:

- deirge sa chraiceann san áit a bhfuair an naónán an t-instealladh
- teocht éadrom,
- gríos éadrom.

Is annamh a thuairiscítear frithghníomhuithe ailléirgeacha nó hipírogaireacht. Déanfar dlúthmhonatóireacht ar do naónán tar éis dó nó di an t-instealladh a fháil.

Níl aon RSV in imdhíonadh nirsevimab agus ní féidir leis a bheith ina chuíos le haon bhreoitacht a bhaineann le RSV.

Freagróidh d'oibrí cúraim sláinte aon cheisteanna atá agat.

Céard iad na roghanna eile?

Má dhéanann tú an cinneadh gan nirsevimab a thabhairt do do naónán, ní bheidh sé nó sí cosanta ar RSV.

Beidh RSV ag scaipeadh i measc leanáí agus daoine fásta mar sin féin agus beidh an seans ann go dtolgfaidh do naónán é agus go n-éireoidh sé nó sí breoite dá bharr.

Má dhéanann tú an cinneadh gan do naónán a imdhíonadh in aghaidh RSV, d'fhéadfadh sé go mbeadh ort an baol go dtolgfaidh do naónán RSV a laghdú ar bhealaí eile:

- lámha a ní i gceart
- fanacht glan ar áiteanna plódaithe
- teorainn a chur le teagmháil le daoine a bhfuil comharthaí slaghdáin nó ionfhabhtuithe eile orthu.

Cé na daoine nár cheart dóibh nirsevimab a fháil?

Is féidir le d'oibrí cúraim sláinte comhairle a thabhairt duit má bhraitheann siad nár cheart do do naónán nirsevimab a fháil. Caithfidh an tsláinte a bheith go maith ag do naónán nuair a thugtar nirsevimab dó nó di. I gcás go bhfuil monatóireacht

á déanamh ar do naónán le haghaidh aon riocht, amhail fadhbanna leis an bhful, ionfhabhtú, deacrácthaí análaithe nó leibhéal íseal siúcra san fhuil, d'fhéadfadh sé go gcuirfí siar nirsevimab go dtí go dtiocfaidh biseach ar do naónán.

Cén áit ar féidir liom teacht ar a thuilleadh eolais?

Labhróidh d'oibrí cúraim sláinte leat faoin imdhíonadh nirsevimab agus freagróidh aon cheisteanna atá agat. Má dhéanann tú an cinneadh do naónán a chosaint ar RSV, iarrfar ort toiliú ó bhéal a thabhairt go dtabharfaí an t-instealladh dó nó di.



Le tuilleadh eolais a fháil ó HSE
www.hse.ie/RSV



Chun féachaint ar fhaisnéis othar ó Ghníomhaireacht Leigheasra na hEorpa tabhair cuairt ar:
www.ema.europa.eu/en/medicines/human/EPAR/beyfortus