



Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

September 6, 2023

Dear Colleague:

Every year, RSV causes substantial morbidity and mortality in the United States and in Maryland, including over 1,500 hospitalizations, 350 ICU admissions, and more than 30 deaths per year here – mostly among infants and older adults. Yesterday afternoon, the Centers for Disease Control and Prevention (CDC) issued a Health Alert Network [advisory](#) alerting providers of an increase in RSV activity in the southeastern US. And as we move into the fall respiratory virus season here in Maryland, we want to make you aware of two important new tools available to help prevent Respiratory Syncytial Virus (RSV) infections, and ask for your help in making these broadly available to Maryland residents.

1. New RSV Vaccines

Earlier this summer, the US Food and Drug Administration (FDA) approved two new RSV vaccines: ABRYSVO (Pfizer); and AREXVY (GSK). Both vaccines have been approved for use in adults 60 and older; ABRYSVO was also recently approved for use in pregnant individuals for use at 32-36 weeks gestational age of the pregnancy.

Adults 60 and older:

The CDC Advisory Committee on Immunization Practices (ACIP) now recommends that adults 60 and older may receive an RSV vaccine, using shared clinical decision-making. CDC recommends that the decision to vaccinate an individual patient should be based on a discussion between the healthcare provider and the patient. The decision may be informed by the patient's risk of severe RSV disease and their characteristics, values, and preferences; the healthcare provider's clinical discretion; and the characteristics of the vaccine.

Per CDC, epidemiologic evidence indicates that people 60 and older who are at highest risk of severe RSV disease include those with any of the following chronic conditions:

- Lung disease (such as chronic obstructive pulmonary disease [COPD] and asthma)
- Chronic cardiovascular diseases (such as congestive heart failure and coronary artery disease)
- Diabetes mellitus
- Neurologic conditions
- Kidney disorders
- Liver disorders
- Hematologic disorders
- Immune compromise

Other underlying factors that the provider determines might increase the risk of severe RSV-associated respiratory illness may include the following:

- Frailty
- Advanced age
- Residence in a nursing home or other long-term care facility

RSV can also sometimes also lead to exacerbation of serious conditions such as:

- Asthma
- Chronic obstructive pulmonary disease (COPD)
- Congestive heart failure

RSV vaccine is recommended as a single dose. Studies are ongoing to determine whether (and if so, when) revaccination may be needed.

Pregnant Individuals:

On August 21, 2023, the FDA approved a single IM injection of ABRYVO for use in pregnant individuals at 32 through 36 weeks gestational age of pregnancy to prevent lower respiratory tract disease and severe lower respiratory tract disease in infants. At this time, the CDC ACIP has made no recommendations related to RSV vaccination during pregnancy.

RSV Vaccinations in Maryland:

Maryland providers who care for adults are encouraged to discuss RSV vaccination with their patients and to offer RSV vaccine to patients when indicated. Providers who do not currently have RSV vaccine available should be aware that as of today, September 6, 2023, per an Order of the Secretary of Health, Maryland pharmacists who have met certain criteria may administer RSV vaccine to adults 60 and over without a prescription.

A copy of the Order is available at the following MDH RSV webpage:

<https://health.maryland.gov/phpa/OIDEOR/CIDSOR/Documents/RSV/Final%20-%20MDH%20Order%20-%20RSV%20Vaccination %209.6.23.pdf>

2. New RSV Monoclonal Antibody Product

Earlier this summer, FDA approved and CDC ACIP recommended the use of nirsevimab (Beyfortus™), a long-acting monoclonal antibody product, which has been shown to reduce the risk of both RSV-related hospitalizations and RSV-related healthcare visits in infants by about 80%. CDC recommends one dose of nirsevimab for all infants younger than 8 months, born during – or entering – their first RSV season (typically fall through spring). For a small group of children between the ages of 8 and 19 months who are at increased risk of severe RSV disease, such as children who are severely immunocompromised, a dose is recommended in their second season. More information is available at the following site:

<https://www.cdc.gov/mmwr/volumes/72/wr/mm7234a4.htm>

Thank you for your attention to this information. We appreciate how critical your efforts are at helping reduce the impact of RSV in Maryland.

Sincerely,

A handwritten signature in black ink, appearing to read 'Niles', with a long horizontal flourish extending to the right.

Niles Kalyanaraman, MD, FACP
Deputy Secretary, Public Health Services