



Louisiana Health Alert Message 23-13: CDC makes recommendations on the use of Respiratory Syncytial Virus Vaccines in older adults

Origination Date:

July 26, 2023

Revision Dates (List All Revision Dates):

Louisiana Health Alert Message 23-13: CDC makes recommendations on the use of Respiratory Syncytial Virus vaccines in older adults.

Recommendations

Following a review by their Advisory Committee on Immunization Practices (ACIP), the Centers for Disease Control and Prevention (CDC) is recommending the use of a single dose of recently approved vaccines by GSK and Pfizer for respiratory syncytial virus (RSV).

The vaccines have been shown to prevent RSV lower respiratory tract disease (LRTD) for use in adults aged ≥ 60 years. For both the GSK and Pfizer vaccines, a single RSV dose demonstrated efficacy in preventing symptomatic RSV-associated LRTD among adults aged ≥ 60 years. CDC actions follow an earlier approval of these vaccines by the U.S. Food and Drug Administration (FDA).

This HAN provides clinical guidance for the use of RSV vaccines in adults aged ≥ 60 years. RSV vaccines have demonstrated efficacy in preventing RSV-associated lower respiratory tract disease and have the potential to prevent substantial morbidity and mortality among older adults.

Background

In the U.S., RSV causes seasonal epidemics of respiratory illness. Each season, RSV causes substantial morbidity and mortality in older adults, including lower respiratory tract disease (LRTD), hospitalization, and death. Most adult RSV disease cases occur among older adults with an estimated 60,000 – 160,000 hospitalizations and 6,000–10,000 deaths annually among adults aged ≥ 65 years.

Who are at Increased Risk?

- Adults with certain medical conditions, including chronic obstructive pulmonary disease, asthma, congestive heart failure, coronary artery disease, cerebrovascular disease, diabetes mellitus and chronic kidney disease.
- Residents of long-term care facilities.
- People who are frail or of advanced age (incidence of RSV-associated hospitalization among adults increases with age, with the highest rates among those aged ≥ 75 years).
- RSV can also cause severe disease in persons with compromised immunity, including recipients of hematopoietic stem cell transplantation and patients taking immunosuppressive medications.

Clinical Guidance

CDC recommends that adults 60 and older may receive an RSV vaccine, using shared clinical decision-making. Unlike routine and risk-based vaccine recommendations, recommendations based on shared clinical decision-making do not target all persons in a particular age group or an identifiable risk group. The decision to vaccinate

a patient should be based on a discussion between the health care provider and the patient, guided by the patient's risk for disease and their characteristics, values and preferences, the provider's clinical discretion and the characteristics of the vaccine.

Providers and patients should consider the patient's risk for severe RSV-associated disease. Epidemiologic evidence indicates that persons aged ≥ 60 years who are at highest risk for severe RSV disease and who might be most likely to benefit from vaccination include:

- Patients with chronic medical conditions such as lung diseases, including chronic obstructive pulmonary disease and asthma.
- Patients with cardiovascular diseases such as congestive heart failure and coronary artery disease.
- Those with moderate or severe immune compromise (either attributable to a medical condition or receipt of immunosuppressive medications or treatment).
- People with diabetes mellitus; neurologic or neuromuscular conditions; kidney disorders, liver disorders, and hematologic disorders.
- People who are frail; of advanced age; and/or have other underlying conditions or factors that the provider determines might increase the risk for severe RSV-associated respiratory disease.
- Adults aged ≥ 60 years who are residents of nursing homes and other long-term care facilities.

RSV Vaccination Timing

As single dose of the RSV vaccine is currently recommended; evidence does not exist at this time to determine the need for revaccination.

Optimally, vaccination should occur before the onset of the RSV season; however, typical RSV seasonality was disrupted by the COVID-19 pandemic and has not returned to pre-pandemic patterns. For the 2023–24 season, clinicians should offer RSV vaccination to adults aged ≥ 60 years using shared clinical decision-making as early as vaccine supply becomes available and should continue to offer vaccination to eligible adults who remain unvaccinated.

Co-administration of RSV vaccines with other adult vaccines during the same visit is acceptable.

Precautions and Contraindications

As with all vaccines, RSV vaccination should be delayed for people experiencing moderate or severe acute illness with or without fever.

RSV vaccines are contraindicated for and should not be administered to those with a history of severe allergic reaction, such as anaphylaxis, to any component of the vaccine.

More Information

- 7/21/2023 MMWR: [Use of Respiratory Syncytial Virus Vaccines in Older Adults: Recommendations of the Advisory Committee on Immunization Practices](#)
- 7/24/2023: Vaccine Information Statement for Patients: [RSV Vaccine: What You Need to Know](#)