

PREEMIES TODAY

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For Immediate Release

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(Springfield, VA) Recently, the American Academy of Pediatrics (AAP) has re-issued new guidelines regarding Respiratory syncytial virus (RSV). In their new guidelines, the AAP recommends that children born between 32 weeks and 35 weeks gestation receive three dosages instead of the previously suggested five dosages of Synagis and are only recommending these injections for infants less than three months old during RSV and flu months. These changes in eligibility guidelines will be exclusive for those with the above criteria and also are in a daycare setting or with older siblings in the home. Children born at 31 weeks and six days gestation and earlier will continue to be recommended to receive the same five dosages during RSV/flu season regardless of whether they are in daycare or have siblings.

To support their changes the AAP states in the Red Book for Infectious Disease that, “The primary benefit of [Synagis] is to reduce the number of RSV-related hospitalizations. There has not been a significant decrease in the rate of mortality or recurrent wheezing for those children taking [Synagis]. The AAP also stated that, there is no overall savings in health care dollars if all at risk children received [Synagis].”

It is the position of Premies Today that all premature infants born prior to 37 weeks are at risk of complications from RSV and the flu. “Families need to continue to be vigilant about hand washing, limiting exposure to germs, and second-hand smoke,” says Premies Today Executive Director Mary Beth Hazelgrove. RSV and the flu can be dangerous respiratory illnesses for premature infants and tend to occur in fall through early spring months. They can lead to a potential hospitalization, damage to the lungs, and sometimes even death. Both are spread through contact of bodily fluids. “We encourage all parents to speak to their pediatricians and advocate for the needs of their individual child,” says Premies Today Chairman Elaine Noto.

All children, born premature or not, will likely have some exposure to RSV by age two. RSV commonly presents as cold-like symptoms in most children. Premature children may have increased in difficulty breathing and future recurrent wheezing problems. Prophylaxis, commonly known by its brand name Synagis, is made from monoclonal antibodies. It does not vaccinate children against RSV, but boosts the immune system to help protect against RSV infection. Injections can cost an average \$1,500 a dosage and are routinely injected into patients monthly based on the child’s weight. There are some financial support programs that may help families cover costs that are not covered by health insurance.

For more information on RSV, go to <http://www.cdc.gov/RSV/>. Families and healthcare professionals may share concerns regarding the new changes online at www.PremieVoices.com sponsored by MedImmune. For information regarding financial support programs, e-mail info@premiestoday.org.

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