

WHEN RSV SEASON APPROACHES RECALL THEM IN THE FALL

WHO IS AT RISK?

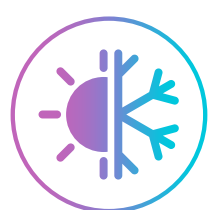
ALL infants, whether born before or during the RSV season¹



Infants born in the summer months entering the RSV season remain at the **highest risk** for MA RSV-LRTI, usually resulting in outpatient or ED care.²

11 MILLION+
IMMUNIZED
WITH BEYFORTUS^{3*}

WHEN TO PROTECT infants against RSV disease?



Help protect infants (<8 months) in **October or November**, before they age out of the AAP-recommended timing for immunization.^{4†}

WHAT IS BEYFORTUS®?



It is not a vaccine. It is a monoclonal antibody (mAb) to help protect against RSV-LRTI. mAbs have been tested and trusted for over 25 years to immunize infants.^{5,6}



Once an infant receives Beyfortus, **it helps provide protection through 5 months**, the typical length of an RSV season, based on clinical data.^{5,7}

OLDER INFANTS NEED PROTECTION TOO²

Infants born before the season should come back to get immunized.⁴

Recommend it, because parents rely on your guidance and expertise.⁸



INDICATION

Beyfortus is indicated for the prevention of respiratory syncytial virus (RSV) lower respiratory tract disease in:

- Neonates and infants born during or entering their first RSV season.
- Children up to 24 months of age who remain vulnerable to severe RSV disease through their second RSV season.

IMPORTANT SAFETY INFORMATION Contraindication

Beyfortus is contraindicated in infants and children with a history of serious hypersensitivity reactions, including anaphylaxis, to nirsevimab-alip or to any of the excipients.

Please see accompanying full [Prescribing Information](#) and visit [Beyfortus.com](#)

IMPORTANT SAFETY INFORMATION (cont'd) Warnings and Precautions

- **Hypersensitivity Reactions Including Anaphylaxis:** Serious hypersensitivity reactions have been reported following Beyfortus administration. These reactions included urticaria, dyspnea, cyanosis, and/or hypotonia. Anaphylaxis has been observed with human immunoglobulin G1 (IgG1) monoclonal antibodies. If signs and symptoms of anaphylaxis or other clinically significant hypersensitivity reactions occur, initiate appropriate treatment.
- **Use in Individuals with Clinically Significant Bleeding Disorders:** As with other IM injections, Beyfortus should be given with caution to infants and children with thrombocytopenia, any coagulation disorder or to individuals on anticoagulation therapy.

Most common adverse reactions with Beyfortus were rash (0.9%) and injection site reactions (0.3%).

AAP, American Academy of Pediatrics; **ED**, emergency department; **LRTI**, lower respiratory tract infection; **MA**, medically attended; **RSV**, respiratory syncytial virus.

*Supported by global estimated exposure based on calculation from sales volume data (September 1, 2023, through October 31, 2025). The number of children exposed is estimated based on the distribution of the recommended dose of Beyfortus administered, considering body weight, season of administration (1st or 2nd), and immunization plan.³

†Recommended timing of Beyfortus administration for most of the continental US. Timing of administration for RSV immunization may differ in certain areas.⁴

References: **1.** Arriola CS, Kim L, Langley G, et al. Estimated burden of community-onset respiratory syncytial virus-associated hospitalizations among children aged <2 years in the United States, 2014-15. *J Pediatric Infect Dis Soc.* 2020;9(5):587-595. **2.** Gantenberg JR, van Aalst R, Bhuma MR, et al. Risk analysis of respiratory syncytial virus among infants in the United States by birth month. *J Pediatric Infect Dis Soc.* 2024;13(6):317-327. **3.** Data on File. Sanofi. **4.** Committee on Infectious Diseases. Recommendations for the prevention of RSV disease in infants and children: policy statement. *Pediatrics.* 2025;156(5):e2025073923. **5.** Beyfortus (nirsevimab-alip). Prescribing Information. Sanofi. **6.** Synagis (palivizumab). Prescribing Information. Sobi. **7.** Obando-Pacheco P, Justicia-Grande AJ, Rivero-Calle I, et al. Respiratory syncytial virus seasonality: a global overview. *J Infect Dis.* 2018;217(9):1356-1364. **8.** O'Leary ST, Opel DJ, Cataldi JR, et al; Committee on Infectious Diseases; Committee on Practice and Ambulatory Medicine; Committee on Bioethics. Strategies for improving vaccine communication and uptake. *Pediatrics.* 2024;153(3):e2023065483.

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Beyfortus®
(nirsevimab-alip) | 50 mg
100 mg
Injection