Bundesinstitut für
Öffentliche Gesundheit

RSV prophylaxis

Protection from serious RSV respiratory tract infections for newborns and babies

infektionsschutz.de
Wissen, was schützt.

In brief: What is RSV prophylaxis?

RSV prophylaxis is administered like a vaccine, being injected into the thigh. **It should provide protection from serious respiratory tract infections caused by the RS virus.** The Standing Committee on Vaccination (STIKO) has been recommending RSV prophylaxis with the active substance Nirsevimab (brand name: Beyfortus) since June 2024 for all newborns and babies in their first RSV season.

What is RSV and to what symptoms can it give rise?

RSV is the abbreviation for ***R****espiratory* ***S****yncytial* ***V****irus*. The RS virus affects the respiratory tract.

The symptoms resemble those of a cold in the case of mild illness. However, infections can be more serious in babies in particular, with inflammation of the lower respiratory tract ('bronchiolitis') or pneumonia occurring. RSV infection is also a common cause of middle ear infections.

Serious cases often have to be treated in hospital. In rare cases RSV infections can prove fatal. 80 percent of serious RSV infections occur in previously healthy babies.

RSV is transmitted primarily through droplets when **coughing, sneezing and speaking**.

The virus can also be transmitted through contact with **surfaces**.

Why is RSV prophylaxis recommended?

Fewer serious cases

RSV prophylaxis lowers the risk of an infection turning serious. It reduces the incidence of infected babies having to be admitted to hospital for treatment.

Out of every **1,000 babies under the age of 8 months,** the number needing hospital treatment for an RSV infection is:

Without prophylaxis: 35

With prophylaxis: 7

Fewer bottlenecks in medical care

The RS virus becomes widespread in autumn and winter, contributing to bottlenecks in medical care during these seasons. Both paediatric practices and hospitals are affected by these bottlenecks.

A reduction in the incidence of serious cases can reduce the pressure on paediatric practices and hospitals, thereby **improving medical care for all children.**

In Germany, RSV is the most common cause of babies being admitted to hospital for treatment. Up to 70 percent of all babies get infected with the RS virus in their first year of life. Pretty much all children get infected with RSV in their first two years.

Who should have RSV prophylaxis?

RSV prophylaxis is recommended for all newborns and babies in their first RSV season. The younger the child, the higher the risk of serious illness. Newborns and babies under 6 months are at especially high risk of serious infection with RSV.

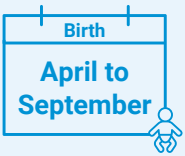
If a baby has previously been diagnosed with an RSV infection, then RSV prophylaxis will generally not be necessary.

When should you get RSV prophylaxis?

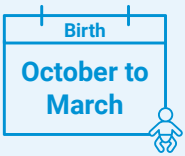
RS viruses are particularly widespread from October to March. Hence the timing of the RSV prophylaxis will depend on when the baby was born:

- In the case of babies born between April and September, RSV prophylaxis should be administered **as a one-off between September and November (i.e. right before the start of their first RSV season).**

- In the case of babies born between October and March, RSV prophylaxis should be administered **as soon as possible after birth.** Ideally, the prophylaxis should be administered upon discharge from the maternity unit or at the U2 examination (3-10 days old). If it has not been administered on time, then it should be administered as soon as possible within the RSV season.



Prophylaxis **between September and November**



Prophylaxis **as soon as possible after birth**

How does RSV prophylaxis work and for how long does the protection last?

RSV prophylaxis refers to so-called passive immunisation. It involves antibodies that fight the virus being injected into the thigh. These antibodies make it harder for the virus to attack the body's cells and spread within the body. As the antibodies are injected directly, RSV prophylaxis provides **immediate protection after being administered**. In that regard, passive immunisation differs from a classic vaccine, in which the body has to create its own antibodies first.

The protection provided by RSV prophylaxis generally lasts throughout the RSV season. A one-off dose should therefore be enough to provide the best possible protection for a baby in their first year.

Is RSV prophylaxis safe?

RSV prophylaxis is well tolerated. Various studies have demonstrated this. Local reactions such as pain or a temporary rash at the site of the injection are possible. Allergic reactions to the active substance are rarer. Tolerability and safety are constantly being studied.

Further information on RSV and how you can protect your child and yourself can be found at www.infektionsschutz.de or www.rki.de/rsv.

Publication

Publisher: Federal Institute of Public Health (BIÖG), 50819 Cologne, Germany.
Produced in collaboration with the Robert Koch Institute.

Editorial: Federal Institute of Public Health (BIÖG)

Design: VALID Digitalagentur GmbH

Photo credits: Adobe Stock, S.Kobold, morrowlight – stock.adobe.com

Article number: D81000469

Last updated: November 2025

Order address: This flyer can be downloaded at www.infektionsschutz.de. It is not intended for resale by the recipient or by third parties.

The brochure is available for download in seven languages.

DE EN FR RU TR AR UA