

April 10, 2026 (season activity update from previous letter dated March 20, 2026)

BC Pediatricians
BC Hospital Pharmacies
BC RSV Clinics
Public Health & regional Health Authorities
BC Centre for Disease Control

Re: End-of-Season Notice for 2025–2026 Nirsevimab Immunoprophylaxis

Dear Partners in the BC RSV Immunoprophylaxis Program:

Because RSV activity often persists longer in rural and remote regions, administration of nirsevimab may be extended by an additional two weeks (**until April 30, 2026**), specifically, high-risk children who have not yet received prophylaxis with the following conditions:

- Chronic lung disease, including bronchopulmonary dysplasia, requiring ongoing assisted ventilation, oxygen therapy (e.g. Home O2, CPAP, BIPAP)
- Hemodynamically significant congenital cardiac disease or cardiomyopathy
- Severe or profound combined immunodeficiencies (e.g. SCID, CD40 ligand deficiency, DOCK8, etc., ... requires adjudication by a Pediatric Immunologist)
- Severe congenital airway anomalies impairing clearing of respiratory secretions
- Neuromuscular disease impairing clearing of respiratory secretions
- Cystic fibrosis with respiratory involvement and/or growth delay
- Down syndrome (and other trisomy syndromes)
- Preterm infants born below 28 weeks of gestation born after March 31, 2024

As well as eligible infants newly discharged from NICUs, maternity or newborn units, to designated rural or remote areas, who have not been sufficiently immunized during pregnancy (i.e. >14 days before birth).

For all other children, seasonal administration of nirsevimab should end on March 31, 2026.

We thank you all for your support of the BC RSV Immunoprophylaxis Program.



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