

Protecting Your Baby from RSV — British Columbia (2025/2026)

For pregnant people and new parents

What is RSV?

RSV (respiratory syncytial virus) is a common virus that can cause serious breathing problems in young babies — especially in the first few months of life. During RSV season (between Fall and Spring), some babies in British Columbia need hospital care for breathing support.

Two ways to protect babies in BC this season

1. **RSV vaccine in pregnancy (RSVpreF)** — a single injection given to the pregnant person between **32+0 and 36+6 weeks** of pregnancy. The vaccine helps your body make antibodies that pass to the baby before birth and can protect the baby for about 6 months.
2. **Antibody injection given to baby after birth (Nirsevimab)** — a single injection only given to select higher-risk babies after they are born. In 2025/2026, nirsevimab will only be available to select babies who have a high risk of severe RSV illness.

Both of these options can prevent 70 to 90% of hospitalizations associated with RSV infections.

Should I get the RSV vaccine during pregnancy?

- **Yes — most pregnant people are recommended to get it** between 32⁺⁰ and 36⁺⁶ weeks, especially if your baby will *not* qualify for funded nirsevimab after birth.
- It works best if given at least 14 days before delivery so your body has time to produce antibodies to pass onto your baby

Is the RSV vaccine safe? What side effects could be expected?

- **Yes**, the RSV vaccine is safe during pregnancy.
- Common side effects are usually mild: sore arm, redness or swelling at the injection site, muscle aches, or a low-grade fever.
- Large studies in high-income countries (including real-world data) have not shown an increased risk of preterm birth.

Who will get funded nirsevimab in BC? (2025/2026)

Funded for babies who meet specific the higher risk criteria, including:

- Preterm infants (babies born before 35 weeks — see your care team for exact eligibility).
- Infants with significant heart, lung, immune, genetic, or metabolic conditions,
- Infants under 6 months of age living in remote or isolated Indigenous communities or living in congregate settings (e.g., some supportive housing).

If I had the vaccine while pregnant, will my baby still get nirsevimab?

- If you received RSVpreF **at least 14 days before delivery**, your baby is protected and **will likely not** need nirsevimab for further protection.
- A few babies with very high medical risk may still need both if they will continue to be at risk of severe RSV infection beyond 6 months of age — your pediatrician or newborn care team will advise you in this case.

Is the vaccine free?

- RSVpreF is not universally publicly funded in BC for 2025/2026. It **may** be covered by private or workplace insurance or through First Nations Health Benefits.
- If paying out of pocket, the vaccine typically cost **\$250–\$300** including pharmacy fees.
- Nirsevimab is publicly funded for eligible babies as listed above.

Can RSVpreF be given with other vaccines?

- Yes. It can be given at the same visit as the flu shot, Tdap (whooping cough), or COVID-19 vaccine. These are all recommended vaccines in pregnancy.

Where can I get the RSV vaccine?

- Many community pharmacies carry RSVpreF. See the BC Pharmacy Association map for more information: www.bcpharmacy.ca/rsv-vaccines.
- Talk to your prenatal care provider or pharmacist if you want the vaccine or want help checking insurance coverage.

Handout developed by Dr. Jeffrey Wong (*Obstetrician/Gynecologist and Reproductive Infectious Diseases Specialist at BC Women's Hospital*)