FEATURE ARTICLE...

REVIEW OF RSV VACCINES: ABRYSVO AND AREXVY

Since Gaining FDA approval last year, the RSV vaccines have become among the most popular immunizations in the community pharmacy setting. Some confusion has arisen, however , regarding the proper use of the two vaccines available, which are *not* interchangeable. A recent New York Times article documented more than 150 cases of patients who were administered the incorrect RSV vaccine. Both pharmacists and physicians were implicated in the errors, which included 128 pregnant women mistakenly given Arexvy, instead of Abrysvo, and 25 children under the age of 2 given the adult vaccine. The following side-by-side comparison of Abrysvo and Arexvy serves as a review of the approved indications and proper use of the two available RSV vaccines.

ABRYSVO

Indications: For the prevention of lower respiratory tract disease cause by Respiratory Syncytial Virus (RSV) in the following patient populations:

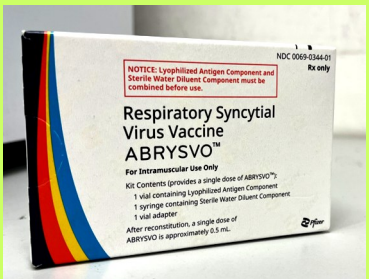
- **Pregnant women at 32 weeks 0 days through 36 weeks 6 days gestation from September through January in most of the continental United States.**
- **Individuals 60 years of age and older. People most likely to benefit from vaccination are those considered to be at increased risk for severe RSV disease, including patients with lung diseases, cardiovascular diseases, diabetes mellitus, neurologic or neuromuscular conditions, liver or kidney disorders, hematologic disorders, or severe immune compromise.**

Dosage and Administration: Administer a single dose (0.5 mL) intramuscularly. After reconstitution, administer Abrysvo immediately or store at room temperature and use within 4 hours.

Preparation: Abrysvo must be reconstituted before administration, resulting in a clear, colorless solution.

Description: Abrysvo contains recombinant RSV preF A and preF B antigenic components derived from genetically engineered Chinese hamster ovary cell lines.

Adverse reactions: The most common adverse reactions reported in pregnant individuals were: Injection site pain (40.6%), Headache (31%), Muscle pain (26.5%), and nausea (20%). In individuals 60 years of age and older, the most common adverse reactions reported were: Fatigue (15.5%), Headache (12.8%), Injection site pain (10.5%), and muscle pain (10.1%).



AREXVY

Indications: For the prevention of lower respiratory tract disease cause by Respiratory Syncytial Virus (RSV) in the following patient populations:

- **Individuals 60 years of age and older. People most likely to benefit from vaccination are those considered to be at increased risk for severe RSV disease, including patients with lung diseases, cardiovascular diseases, diabetes mellitus, neurologic or neuromuscular conditions, liver or kidney disorders, hematologic disorders, or severe immune compromise.** (Arexvy is NOT indicated for use in pregnant women due to an increased risk of preterm birth)

Dosage and Administration: Administer a single dose (0.5 mL) intramuscularly. After reconstitution, administer Arexvy immediately or store protected from light in the refrigerator or at room temperature and use within 4 hours.

Preparation: Arexvy is supplied in two vials that must be combined prior to administration. The reconstituted vaccine should be an opalescent, colorless to pale brownish liquid.

Description: Arexvy contains recombinant RVSpreF3 as the antigen component, which is derived from genetically engineered Chinese hamster ovary cell lines. Arexvy also contains an adjuvant, $AS01_E$ to boost immune response. If possible, avoid co-administration with other adjuvanted vaccines (e.g., Fluad, Shingrix).

Adverse reactions: The most common adverse reactions reported were: Injection site pain (60.9%), Fatigue (33.6%), Myalgia (28.9%), Headache (27.2%), and Arthralgia (18.1%).