#### National Center for Immunization and Respiratory Diseases



# RSV Vaccination in Adults: Introduction

Albert Shaw, MD, PhD
Chair, Adult RSV Work Group
Advisory Committee on Immunization Practices
April 16, 2025

# **Adult RSV Work Group Membership**

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# June 2024 ACIP Recommendations for RSV Vaccination in Older Adults:

ACIP recommends all adults aged ≥75 years and adults aged 60–74 years who are at increased risk of severe RSV disease receive a single dose of RSV vaccine.<sup>1,2</sup>

- 1. Recommendation is for any Food and Drug Administration—approved RSV vaccine (Arexvy [GSK]; Abrysvo [Pfizer]; or mResvia [Moderna]). There is no product preference.
- 2. Eligible adults are currently recommended to receive a single dose of RSV vaccine; adults who have already received RSV vaccination should not receive another dose.

# Chronic medical conditions and other risk factors associated with increased risk of severe RSV disease



Chronic cardiovascular disease



Chronic lung or respiratory disease



#### **Diabetes mellitus**

 complicated by chronic kidney disease, neuropathy, retinopathy or other endorgan damage or requiring treatment with insulin or sodium-glucose cotransporter-2 (SGLT2) inhibitor



Severe obesity (body mass index ≥40 kg/m²)



End stage renal disease/dialysis dependence



Chronic hematologic conditions



Chronic liver disease



Neurological or neuromuscular conditions causing impaired airway clearance or respiratory muscle weakness



Residence in a nursing home



Moderate or severe immunocompromise



Other chronic medical conditions or risk factors that a provider determines would increase risk of severe disease due to viral respiratory infection (e.g., frailty)

- Protein subunit (based on RSV F protein in prefusion conformation)
  - GSK Arexvy<sup>1</sup>: monovalent RSV-A, ASO1<sub>F</sub> adjuvant
  - Pfizer Abrysvo<sup>2</sup>: bivalent RSV-A/RSV-B, no adjuvant
- Messenger RNA (mRNA, encoding RSV F protein in prefusion conformation)
  - Moderna mResvia<sup>3</sup>: monovalent RSV-A, no adjuvant

- https://www.fda.gov/media/167805/download
- 2. <a href="https://www.fda.gov/media/168889/download">https://www.fda.gov/media/168889/download</a>
- 3. https://www.fda.gov/media/179005/download

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- Pfizer Abrysvo<sup>2</sup>: bivalent RSV-A/RSV-B, no adjuvant

#### mRNA

- Moderna mResvia<sup>3</sup>: monovalent RSV-A, no adjuvant

Approved for prevention of lower respiratory tract disease (LRTD) caused by RSV in adults aged ≥60 years

<sup>1. &</sup>lt;a href="https://www.fda.gov/media/167805/download">https://www.fda.gov/media/167805/download</a>

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- Pfizer Abrysvo<sup>2</sup>: bivalent RSV-A/RSV-B, no adjuvant

Approved for prevention of LRTD caused by RSV in adults aged 50–59 years who are at increased risk for LRTD caused by RSV\*

#### mRNA

- Moderna mResvia<sup>3</sup>: monovalent RSV-A, no adjuvant

https://www.cdc.gov/mmwr/volumes/72/wr/mm7241e1.htm

<sup>\*</sup>There is no current ACIP recommendation for RSV vaccination in adults aged <60 years, **except** for the maternal vaccination recommendation:

<sup>1. &</sup>lt;a href="https://www.fda.gov/media/167805/download">https://www.fda.gov/media/167805/download</a>

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# Approved for prevention of LRTD caused by RSV in adults aged 18–59 years who are at increased risk of LRTD caused by RSV\*

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#### mRNA

- Moderna mResvia<sup>3</sup>: monovalent RSV-A, no adjuvant

Also approved and recommended for active immunization in **pregnancy\*** at 32–36 weeks gestational age for the prevention of LRTD and severe LRTD caused by RSV in infants from birth through 6 months of age.

https://www.fda.gov/media/168889/download https://www.cdc.gov/mmwr/volumes/72/wr/mm7241e1.htm

\*There is no current ACIP recommendation for RSV

vaccination in adults aged <60 years, **except** for the maternal vaccination recommendation:

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#### mRNA

- Moderna mResvia<sup>3</sup>: monovalent RSV-A, no adjuvant

Moderna has submitted an application for licensure for adults aged 18–59 years who are at increased risk of LRTD caused by RSV. PDUFA date June 12<sup>th</sup>, 2025.<sup>4</sup>

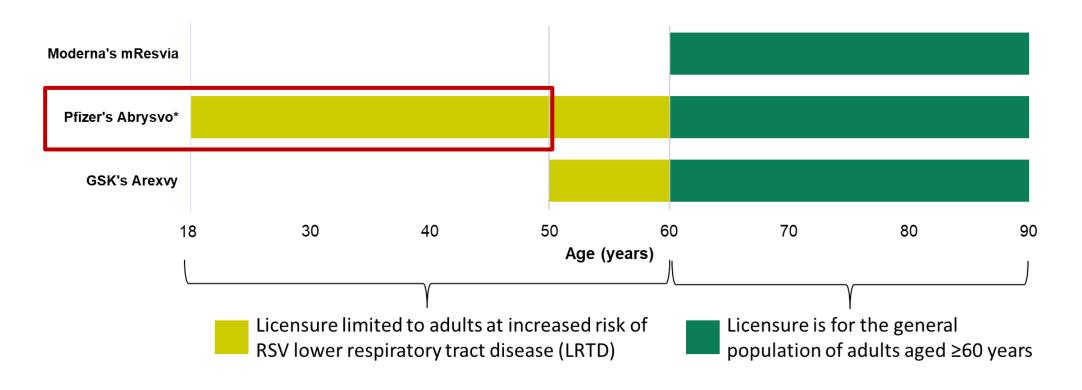
#### PDUFA: Prescription Drug User Fee Act

- 1. <a href="https://www.fda.gov/media/167805/download">https://www.fda.gov/media/167805/download</a>
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- 3. <a href="https://www.fda.gov/media/179005/download">https://www.fda.gov/media/179005/download</a>
- 4. <a href="https://investors.modernatx.com/news/news-details/2025/Moderna-Reports-Fourth-Quarter-and-Fiscal-Year-2024-Financial-Results-and-Provides-Business-Updates/default.aspx">https://investors.modernatx.com/news/news-details/2025/Moderna-Reports-Fourth-Quarter-and-Fiscal-Year-2024-Financial-Results-and-Provides-Business-Updates/default.aspx</a>

# Today's meeting

- Adult RSV Work Group will propose a policy recommendation for age expansion of the use of RSV vaccines to include adults aged 50-59 years at increased risk of severe RSV disease.
- Immunobridging and safety data in adults aged 50-59 years at increased risk of severe RSV disease were previously presented to ACIP by GSK and Pfizer; today Moderna will present immunobridging and safety data in adults aged 18-59 years at increased risk.
- ACIP will also see presentations from manufacturers on immunogenicity and safety of re-vaccination and economic analyses of RSV vaccination in adults aged 50-59 years at increased risk.
- Then we will share the complete Evidence to Recommendation framework and propose a policy recommendation for an ACIP vote.

# Acknowledging there is also one FDA-approved vaccine for RSV prevention in adults aged <50 years, the Work Group continues to evaluate recommendations for RSV vaccination in this age group



<sup>\*</sup>Pfizer's Abrysvo is also licensed and recommended for use in pregnancy to prevent RSV LRTD in infants after birth. No other RSV vaccine should be administered in pregnancy.

# Policy for the use of RSV vaccines in adults aged <50 years will be revisited at the June 2025 meeting.

- The Work Group recognizes that certain adults aged <50 years may benefit from RSV vaccination
- However, the Work Group has indicated there are likely important differences in considering a recommendation for adults aged <50 years compared to adults aged ≥50 years, including:
  - Absolute risk of RSV-associated disease and which medical conditions increase risk the most
  - Risk-benefit balance
  - Cost-effectiveness
  - Importance of ability to restore protection with revaccination
- As of today's meeting, information on the absolute risk of RSVassociated disease among adults with risk conditions is still being analyzed and estimates of risk-benefit balance and cost-effectiveness of vaccination in younger adults are not yet available.

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# Policy for the use of RSV vaccines in adults aged <50 years will be revisited at the June 2025 meeting.

- The Work Group is also reviewing or anticipates reviewing the following data deemed critical for a recommendation in adults aged <50 years:
  - The projected balance of public health benefits and risks considering uncertainty in vaccineassociated Guillain-Barré syndrome risk in a younger population
  - Evidence of RSV vaccine immunogenicity or effectiveness in adults with the most severely immunocompromising conditions
  - The duration of protection over time in adults aged ≥60 years who were vaccinated in 2023
  - Available data on immunogenicity of revaccination with different vaccine platforms and revaccination intervals
- The Work Group has indicated it needs to review these data and needs additional time to consider the best policy option in adults aged <50 years.</li>
- The Work Group welcomes ACIP's thoughts about adults aged <50 years during discussion at the end of today's session.

# Agenda: Wednesday April 16, 2025

- Manufacturer Presentation: mRNA-1345 (Moderna)
   Immunogenicity in Adults Aged 18-59 Years at Increased Risk; 24-Month Re-Vaccination
- Dr. Frances Priddy (Moderna)

 Manufacturer Presentation: Arexvy (GSK) 36-Month Re-Vaccination • Dr. Susan Gerber (GSK)

- Economic Analysis of Adult RSV Vaccination, including benefits and risk discussion
- Dr. Ismael Ortega-Sanchez (CDC) on behalf of Dr.
   David Hutton (University of Michigan)

- Comparison of Economic Analyses of Adult RSV Vaccination
- Dr. Ismael Ortega-Sanchez (CDC)

Evidence to Recommendations

Dr. Michael Melgar, Dr. Diya Surie (CDC)

Clinical Considerations

Dr. Diya Surie (CDC)

ACIP discussion and vote

For more information, contact CDC 1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

