NEONATAL Medication Monograph

PALIVIZUMAB

This document should be read in conjunction with this **DISCLAIMER**

Highly Restricted: Requires Neonatologist or Microbiologist approval before commencing

Presentation	**Vial:** 50mg/0.5mL 100mg/mL Ready to Use Vial
Description	Humanised IgG, anti RSV monoclonal antibody.
Indications	For immunoprophylaxis against severe Respiratory Syncytial Virus (RSV) lower respiratory tract infections in high risk infants during months of increased incidence of the virus and in patients 4 weeks of age and any of the following criteria: • Born ≤28 weeks gestational with chronic lung disease defined as needing supplemental oxygen, ventilation or CPAP at 28 days of life. • All indigenous neonates born ≤28 weeks gestational • Neonates with hemodynamically significant congenital heart disease • Neonates having undergone a major surgical procedure and requiring prolonged hospitalisation **NOTE: Parent/Guardian consent is to be obtained prior to administration of Palivizumab**
Contraindications	Hypersensitivity to humanised monoclonal antibodies.
Precautions	Moderate to severe acute infection or febrile illness; thrombocytopenia
Dosage	**IM:** 15mg/ kg/ dose Repeat dose monthly during RSV season (usually May-October).

	Supplemental dose may be required following cardiac surgery.
Adverse Reactions	**Common:** Induration and swelling at injection site. Upper respiratory tract infection, otitis media, fever, rhinitis, rash, cough, diarrhoea, wheeze, cyanosis, arrhythmia in patients with congenital heart disease
	Serious: Anaphylaxis and hypersensitivity reactions
Compatible Fluids	Do not add any diluent to the liquid solution
Preparation	Available from CIVAS (KEMH & PCH) No Reconstitution required. Do not Shake the vial
Administration	**IM:** In the anterolateral aspect of the thigh Give injection volumes > 1mL in divided doses
Monitoring	Observe injection site for induration and swelling
Storage	Palivizumab vials should be stored in a refrigerator at 2^{o} to 8oC. Do not freeze.
Notes	Do not re-enter vial after initial withdrawal and discard any unused portions. Use one dose per vial Administer as soon as possible after withdrawal from the vial.
Related clinical guidelines	Neonatal Viral Infections WATAG Advisory note: Palivizumab
References	Society of Hospital Pharmacists of Australia. Palivizumab . In: Australian Injectable Drugs Handbook [Internet]. [St Leonards, New South Wales]: Health Communication Network; 2020 [cited 2020 Sep 04]. Available from: http://aidh.hcn.com.au Murray J, Saxena S, Sharland M. Preventing severe respiratory syncytial virus disease: passive, active immunisation and new antivirals. *Arch Dis Child*. 2014;99(5):469-473. doi:10.1136/archdischild-2013-303764 Updated Guidance for Palivizumab Prophylaxis Among Infants and

	Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection PEDIATRICS Volume 134, Number 2, August 2014 http://pediatrics.aappublications.org/content/134/2/415.full.html Palivizumab for RSV prophylaxis in high risk paediatric patients. Children's Health Queensland Hospital and Health Service Guideline

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