Palivizumab
Newborn use only

2020

Alert	Cost effectiveness is unclear. Use of this drug should be done in conjunction with local hospital guidelines. Consider the infant's susceptibility to severe RSV disease, RSV prevalence and seasonality, risk of exposure including siblings and social factors, and parental preference.
Indication	Prophylaxis against RSV infection in at risk infants
Action	Humanised monoclonal antibody that neutralises and inhibits fusion of respiratory syncytial virus (RSV) with the host cell, preventing its replication.
Drug type	Humanised monoclonal antibody
Trade name	Synagis solution for injection. [1]
Presentation	100 mg/mL; 0.5 mL (50 mg), 1 mL (100 mg) vial
Dose	15 mg/kg once per month during periods of RSV risk (e.g. May to August in Southern Australia). Preferably administer first dose before RSV season (e.g. April in southern Australia).
Dose adjustment	Therapeutic hypothermia: not applicable. ECMO: after cardiopulmonary bypass surgery, give a dose once child is stable (serum concentration markedly reduced after these procedures). Renal: not applicable. Hepatic: not applicable.
Maximum dose	Monthly doses of 15 mg/kg to maximum 5 doses. Infants discharged during RSV season may receive fewer doses.
Total cumulative dose	
Route	IM
Preparation	Do not dilute or mix with any other medications Do not shake the vial
Administration	IM injection. Draw up required dose and administer into anterolateral thigh. Give injection volumes >1 mL as divided doses.
Monitoring	Hypersensitivity including anaphylaxis.
Contraindications	Palivizumab is contraindicated in patients with hypersensitivity to the active substance or other humanized monoclonal antibodies. [1]
Precautions	Keep all equipment needed for the treatment of severe hypersensitivity reactions ready before the administration of palivizumab.
Drug interactions	
Adverse reactions	These did not occur more commonly than in the placebo arm of a trial. [2]. Common (>1%): fever, rash, rhinitis, wheeze, cough, diarrhoea, injection site reaction, cyanosis (in children with congenital heart disease); Infrequent (0.1–1%) anaemia, elevated liver enzymes; Rare (<0.1%) hypersensitivity (including anaphylaxis). [3]
Compatibility	Not applicable. Do not reconstitute palivizumab with any other diluents or medicinal components.
Incompatibility	Do not reconstitute palivizumab with any other diluents or medicinal components.
Stability	Administer immediately.
Storage	Refrigerate at 2^{O} to $8\,^{O}$C. Do not freeze. [1]
Excipients	Histidine and glycine and the active ingredient, palivizumab, at a concentration of 100 milligrams per mL. [1]
Special comments	Educate the parents regarding adverse effects such as fever, irritability and diarrhoea.
Evidence	Refer to full version.
Practice points	Refer to full version.
References	Refer to full version.

VERSION/NUMBER	**DATE**
Original 1.0	**28/05/2020**
Version 1.1	**16/11/2020**
REVIEW	16/11/2025

Authors Contribution

Original author/s	David Osborn, Srinivas Bolisetty
Evidence Review	David Osborn
Expert review	
Nursing Review	Eszter Jozsa, Kirsty Minter
Pharmacy Review	Michelle Jenkins, Carmen Burman, Cindy Chen, Wendy Huynh, Thao Tran
ANMF Group contributors	Nilkant Phad, John Sinn, Himanshu Popat
Final editing and review of the original	Srinivas Bolisetty, David Osborn, Wendy Huynh, Michelle Jenkins
Electronic version	Ian Callander, Cindy Chen
Facilitator	Srinivas Bolisetty