

Enhancing Respiratory Syncytial Virus Immunoprophylaxis: Addressing Challenges Beyond Palivizumab in the Gulf Region

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Dear Editor,

I read with great interest the expert consensus on Palivizumab for the Prophylaxis of Respiratory Syncytial Virus (RSV) Disease in the Gulf Cooperation Council (GCC) Region by Alharbi et al.¹ This timely review underscores the substantial RSV burden and the need for unified regional guidelines. The authors highlight the efficacy of palivizumab, yet we believe the discourse would benefit from a broader perspective on emerging RSV prophylactic strategies and real-world implementation challenges in the GCC.

A notable challenge emphasized in the article is the lack of regional RSV epidemiological data to guide prophylaxis timing and dose optimization. While palivizumab remains the standard in high-risk infants, recent approvals of long-acting monoclonal antibodies (mAbs) such as nirsevimab offer potential advantages, including a single-dose regimen that may enhance compliance and reduce healthcare burden.² Given that poor adherence to monthly palivizumab dosing remains a major limitation, should the expert panel advocate for transitioning toward nirsevimab, especially for broader RSV prevention strategies in the region?

Additionally, the financial sustainability of palivizumab-based immunoprophylaxis deserves further scrutiny. While the authors dismiss cost as a limiting factor in the GCC, this assumption may not fully capture variations in public versus private healthcare sectors and access disparities across different socioeconomic groups. A cost-effectiveness comparison between palivizumab and emerging alternatives could provide crucial policy guidance.³

Lastly, the impact of COVID-19 on RSV seasonality remains an underexplored dimension in the review. The post-pandemic shifts in RSV transmission call for continuous surveillance programs to refine prophylaxis timing, potentially adjusting recommendations for earlier initiation or extended dosing windows.⁴ Implementing nationwide RSV surveillance registries could strengthen evidence-based policymaking.

While the article successfully consolidates expert opinions, a stronger emphasis on integrating real-world data, cost-effectiveness, and emerging RSV prophylactic strategies would enhance its applicability for healthcare decision-makers in the region. As the GCC navigates the evolving landscape of RSV prevention, a proactive, data-driven approach should guide future policy adaptations.

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