

# Health Professionals Update

November 19, 2024; Vol. 17, No. 35

### IN THIS ISSUE:

Increase in M. pneumoniae in Ontario

Update: Beyfortus® availabilityREMINDER: Beyfortus® dosing

• Update: Arexvy® and Abrysvo™ availability

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## **Key Messages:**

- Increase in Mycoplasma pneumoniae in Ontario amongst children and adolescents.
- Beyfortus® 50 mg reserved exclusively for hospital partners and is no longer available for general ordering.
- Arexvy® and Abrysvo™ are no longer available for ordering.

# Increase in M. pneumoniae activity in Ontario

Public Health Ontario (PHO) has described an increase in *Mycoplasma pneumoniae* activity in Ontario as of May 2024. Activity rapidly increased in the summer and has remained high.

Disease activity is highest in children and adolescents, including children under 4 years of age. Historically children under 4 years of age have had very low disease activity. Similar trends have been seen in the United States.

## **Clinical presentation**

Symptoms of *M. pneumoniae* infection are similar to other respiratory diseases. Common symptoms of *M. pneumoniae* infection are fever, headache, and a slowly worsening cough. Individuals who have preexisting lung conditions and/or who are immunocompromised are at higher risk of more severe disease.

Consider *M. pneumoniae* infection among <u>patients</u> <u>with community-acquired pneumonia who aren't clinically improving on antibiotics</u> that are known to be ineffective against *M. pneumoniae*, such as betalactams.

### **Testing**

Information on testing for *M. pneumoniae* can be accessed at Mycoplasma pneumoniae – Respiratory PCR | Public Health Ontario. Please note that laboratory testing protocols, including testing criteria and the type and number of specimens, may differ between PHO laboratory and other community or hospital laboratories.

#### **Treatment**

Macrolides, tetracyclines, and fluoroquinolones are effective. Markers of macrolide resistance have been detected in a subset of positive *M. pneumoniae* samples. For patients with suspected or confirmed *M. pneumoniae* infection who are not improving on macrolides, consider using a second-line antibiotic regimen.

Mycoplasma pneumoniae has intrinsic resistance to all β-lactams, including those with β-lactamase inhibitors.

#### Reporting

M. pneumoniae is **not** a reportable disease.

#### **Additional Information**

CMAJ 2024 October 1; 196:E1120;DOI: https://doi.org/10.1503/cmaj.240085

# **Update: Beyfortus® availability**

The Ministry is currently receiving vaccine inventory from Sanofi in a phased delivery schedule over October, November, and December. To ensure equitable access, the ministry has allocated quantities to health units based on population needs / demand.



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This has resulted in a limited supply of <u>Beyfortus®</u> in the province. As such, Beyfortus® 50 mg dose product will be reserved exclusively for our hospital partners and select community partners who provide vaccinations to unattached or un-rostered infants born at home.

## **REMINDER:** Beyfortus® dosing

Beyfortus® dosing is determined based on the infant's weight at the time of administration.

- Infants < 5 kg: 50 mg in 0.5 mL (100 mg/mL)</li>
- Infants ≥ 5 kg: 100 mg in 1.0 mL (100 mg/mL)

For young children aged 12 to 24 months who are at continued high risk for RSV infection during a second season, a **higher dose (200 mg)** is recommended. This dose is administered as two 1.0 mL injections at separate sites.

The **100** mg presentation is still available for ordering through the portal. However, please note that it cannot be split into two **50** mg doses.

# Update: Arexvy® and Abrysvo™ availability

Arexvy® and Abrysvo™ are no longer available for ordering. Peel Public Health has received our full allotment of Arexvy® and Abrysvo™ vaccines from the Ontario Government Pharmacy. Once our allotment is fully distributed, we will not receive any additional inventory from the Ministry. As such, <u>Arexvy® and Abrysvo™ are no longer available to order from our web portal.</u>

Previously placed orders that meet the provincial eligibility criteria continue to be fulfilled in order as they have been received.