



## Opening remarks

Mariano Votta, Director, Active Citizenship Network

Good morning everyone, and welcome.

It is always a pleasure and a privilege to meet you in these closed meetings, which are essential opportunities to discuss topics of particular importance to us. I hope you all had a pleasant journey to be here today.

It has become a tradition for the Active Citizenship Network to organize moments of reflection and discussion on vaccination policies. While we have always been committed to promoting a life-long immunization culture, much of our work so far has focused on strengthening messages and advocacy around adult vaccination. Today, however, we want to shift our attention to the youngest population of all.

As you know, Respiratory Syncytial Virus (RSV) is a common respiratory virus that disproportionately affects newborns and infants. The European Centre for Disease Prevention and Control-ECDC<sup>1</sup> reminds us that, on average, an estimated 250,000 children under the age of five are hospitalized each year across Europe due to RSV infection, with one out of three children hospitalized during their first months of life.

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<sup>1</sup> [www.ecdc.europa.eu/en/news-events/protecting-infants-against-respiratory-syncytial-virus-winter-ecdc-issues-advice](http://www.ecdc.europa.eu/en/news-events/protecting-infants-against-respiratory-syncytial-virus-winter-ecdc-issues-advice)

Since 2022, the European Union has authorized safe and effective immunization options to prevent RSV disease in infants. These include long-acting monoclonal antibodies administered to newborns and infants during their first winter season, as well as maternal vaccines given during pregnancy to protect infants in their first months of life. Maternal immunization can help protect infants when they are at their most vulnerable. Vaccines can support and boost the natural process of the mother passing antibodies to the child during pregnancy.

In September 2024, recommendations on the use of maternal RSV vaccines and long-acting monoclonal antibodies to prevent severe RSV disease in infants were issued by the WHO Strategic Advisory Group of Experts on Immunization (SAGE) and subsequently endorsed by the World Health Organization<sup>2</sup>.

To help us better understand these developments, we have invited distinguished independent experts—whom I would like to thank in advance—who will share updated information and their expertise in a language that is both accessible and scientifically sound. In particular, the President of the [European Confederation of Primary Care Paediatricians](#) will provide updated insights on maternal vaccination and the burden of RSV, while our knowledge partner, the [Global Foundation for the Care of Newborn Infants \(GFCNI\)](#), will illustrate how we can play an active role in this field. My colleague Daniela will also present our engagement on this topic in Italy.

Following the publication of key position documents by both the ECDC—“[Protecting infants against respiratory syncytial virus this winter](#)”—and the WHO—“[Position paper on immunization to protect infants against respiratory syncytial virus disease](#)”—this initiative

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<sup>2</sup> <https://www.who.int/publications/i/item/who-wer-10022-193-218>

represents a valuable opportunity to deepen our understanding, which is the first step toward taking action in our respective contexts.

To date, there are still significant gaps in knowledge about RSV, which may represent a barrier to future vaccine uptake. The general public—and sometimes even healthcare providers—are not sufficiently familiar with RSV, its symptoms, or its potential long-term health consequences. In this regard, ECDC senior expert Bruno Ciancio has stated<sup>3</sup>: *“It is imperative that healthcare workers are aware of RSV epidemiology in their community and follow national guidelines for the prevention of RSV in their patients.”*

We are therefore called upon to advocate for greater public awareness of RSV. The video testimonies we will shortly watch remind us that RSV can represent a real tragedy for families. As one parent said: *“Most people don’t know the danger because they don’t know the virus.”*

At the same time, RSV represents a significant burden for healthcare systems. Governments and public health bodies have recognized the impact of RSV in terms of clinical severity and pressure on healthcare systems; however, incomplete surveillance may still limit the full recognition of its true burden.

Now it is time to give the floor to our guests. Before doing so, let me thank our media partners, *Health Europa* and *TrendSanità – Policy and Procurement in Healthcare*. I would also like to remind you that this initiative is part of the EU project “Protecting the value of prevention across Europe: focus on Respiratory Syncytial Virus (RSV) & maternal vaccination”. This project has been made possible thanks to the unconditional support of Pfizer, whom we would also like to thank.




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<sup>3</sup> [www.ecdc.europa.eu/en/news-events/protecting-infants-against-respiratory-syncytial-virus-winter-ecdc-issues-advice](http://www.ecdc.europa.eu/en/news-events/protecting-infants-against-respiratory-syncytial-virus-winter-ecdc-issues-advice)

As always, we encourage you to make the most of this opportunity by interacting and not hesitating to ask questions. We want everyone to feel comfortable this morning, so if you have any special needs, please do not hesitate to let us know.

We look forward to learning together, because being well informed and up to date is often the best prerequisite for promoting stronger civic engagement and advocacy.

Thank you again for your participation, and I wish you a fruitful meeting.

<i>Knowledge partner:</i>	<i>Media partners:</i>
 <p>global foundation for the care of newborn infants</p>	 

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