



A Call for Protection of the Nation's Babies from RSV from the National Medical Association

African American infants at the greatest risk; action and research needed to ensure adequate prevention

September 19, 2011 (Silver Spring, Maryland) --- The National Medical Association (NMA) is the nation's oldest and largest association of African American (AA) physicians and is issuing a "Call to Action" regarding Respiratory Syncytial Virus (RSV), an infection is a major cause of respiratory illness in infants and young children. RSV causes an estimated 90,000 hospitalizations and 4,500 deaths per year in children 5 years of age and younger. In collaboration with the National Black Nurses Association (NBNA), the NMA is sounding the alarm about RSV infection rates, and the serious health risks they pose.

In August 2010, the NMA and the NBNA released a consensus report on RSV, a key recommendation of which was a nationwide campaign public awareness campaign. The report was authored by twenty (20) renowned experts on RSV and minority health, convened by NMA and NBNA, and focused their attention on the effects of RSV on the African American community. "RSV disproportionately impacts vulnerable African American premature and small for dates infants causing unnecessary deaths and hospitalizations," said Dr. Winston Price, pediatrician and member of the Consensus Panel. "Assuring access to adequate RSV prophylaxis for this at-risk population group is an important way to save lives and improve resources for minority healthcare delivery."

Based on their recommendations; the NMA has adopted an action plan which will impact health policy, prevention strategies and ultimately impact the lives of babies. "The rates of RSV in African American children are alarming, the NMA relies heavily on experts to give sound recommendations based on the latest medical evidence on how to best protect newborns," said Dr. Cedric Bright, President of the NMA. "Our goal is to raise awareness among parents, health professionals and our nation around RSV and to make sure that every child in America receives adequate treatment based on the best scientific evidence."

The NMA has reached out to several civic, social and healthcare organizations, as well as the general public to increase awareness and advocate for children. RSV "season" typically begins in October and goes through May. The NMA and the NBNA want to assure that at risk children are well protected. "The National Black Nurses Association stands firm with the National Medical Association to help protect our Nation's most vulnerable citizens...children; and more specifically children who have been born prematurely. It is important that they receive the appropriate health care and to further eliminate the health care disparities that already exist," stated Millicent Gorham, NBNA Executive Director.

Unfortunately, most Americans are unaware of RSV. One of the risk factors for RSV in infants is premature birth. According to the CDC, 18% of African-American women give birth to a premature baby meaning nearly 100,000 African-American babies are born early every year in the US. Currently, there is not a vaccine available to completely prevent RSV infection; however antibody protection is available for preterm babies. Current recommendations for protecting premature infants from RSV include dosage of an antibody known as Palivizumab at least one month before RSV season starts and every month for five months. Parents should speak with their pediatrician about the best recommendations and length of treatment for their children.

These guidelines, as are most medical guidelines, are subject to review and revisions. The NMA, NBNA, and other organizations, have expressed serious concerns about proposed clinical guidelines published by the American Academy of Pediatrics Committee of Infectious Disease (AAP/COID), which decrease the length of time that infants receive the antibody that protects them from RSV. The NMA/NBNA RSV Consensus Panel has recommended that additional research be conducted to ensure that physicians provide the maximum protection to infants and children at risk of RSV.

“There is a gamble that we may take with decreasing the dosing schedule for infants. The NMA stands behind our experts who state that there is not enough clinical evidence to support decreasing the weeks of protection offered to at risk babies. We are concerned for all premature infants, but particularly given the disproportionate number of premature African American babies, we fear that we are leaving them vulnerable with no scientific or clinical evidence to support such a change,” said Dr. Bright. .

As part of the NMA’s “*We Stand with You: NMA physicians and their patients united for improved health for all*” campaign, the organization asks that healthcare providers; including the American Academy of Pediatrics; as well as parents, communities, churches, social and civic organizations “Stand up for children” and increase RSV awareness, commit to increased research and require that any changes in prevention regimens be based on scientific evidence. “It truly does “Take a Village” to raise and protect a child; the NMA cannot be silent on this issue as children’s lives may be at stake,” said Dr. Bright

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Founded in 1895, the National Medical Association is the nation’s oldest and largest medical association representing the interests of more than 50,000 African American physicians and the patients that they serve. The NMA repeatedly advocates for policies that would assure equitable and quality health care for all people. To review and/or download the RSV Consensus Paper, visit www.nmanet.org or call the organization. To learn more about “We Stand with You: NMA Physicians and Their Patients United for Improved Health for All”, visit www.westandwithyou.com.