

Minutes: Summary of discussion points and decisions of the RSV ComNet meetings on the 8th and 9th of June

RSV ComNet I Scientific Meeting

9:30-11:00, 8th of June 2020

Agenda: see Annex 1

Attending:

(10)(2e) (10)(2e) (10)(2e) (10)(2e) (10)(2e)
 The Netherlands: (10)(2e), (10)(2e), (10)(2e), (10)(2e), (10)(2e),
 (10)(2e)

Absent: (10)(2e) (10)(2a) (10)(2e) (the Netherlands)

(10)(2e) presented the RSV ComNet I NL and IT country report. The document was reviewed by the group page by page

Important decisions:

- The Country Report will be finalized by 30 June 2020
- It was agreed that we would drop 'bacterial throat infection' from the case definition
 (10)(2e) noted that this was added by (10)(2a) but they are not participating in the ComNet).
 (10)(2e) noted that this point is covered by the point 'according to the clinician's judgment' al expertise'
- It was agreed to use consistent definitions for the Day_14 and Day_30 questionnaires in the Country Report
- (10)(2a) did ask about hospitalisations at D_30
- (10)(2e) noted that they do not use a multiplex but have RT-PCR for four different viruses (RSV, influenza, Rhinoviruses and enteroviruses), and that in the Netherlands both an oropharyngeal and nasopharyngeal swab were collected.
- It was agreed we will drop the PedsQL from D_30 in ComNet II and we will replace it with a parental Quality of Life questionnaire. SP has a group working on this Quality of Life and they will provide input.
- Under Medications (D_14 questionnaires), it was agreed that we should add nebulizers to the questionnaire as this is common in (10)(2a)
- It was agreed that Italy will look for publications regarding the organization of their health care system to explain differences in health care use between regions.
- It was agreed that (10)(2a) will provide the mean age and gender of the paediatricians to help see if we have a certain selection of paediatricians.
- (10)(2e) suggests we do more research on co-infections (which are very common in (10)(2a). This can have an impact on, for example, clinical impact of infection. We will discuss this point in the afternoon with SP.
- (10)(2e) suggests we repeat data collection (create a cohort) of the children to see how they develop over time (long-term impact of RSV). We will discuss this point in the afternoon with SP

- (10)(2e) indicates children will probably be vaccinated next winter if (10)(2a) and one could study the link between influenza vaccination and RSV in ComNet II. Again, we will discuss this with SP in the afternoon
- (10)(2e) suggests we look at relevant clinical outcomes at D_30 in ComNet II. In particular Otitis media (which needs to be carefully defined) and pneumonia
- The publication plan was accepted (July publication of the Country Report, October submission of RSV ComNet 1 paper)
- It was agreed that (10)(2e) will send around an outline for the discussion (Country Report). There will be a country specific discussion and a general discussion.

RSV ComNet I Scientific Meeting

12.30-14.00h, 8th of June 2020

Agenda: see Annex 1

Attending:

(10)(2a) (10)(2e) (10)(2e) (10)(2e) (10)(2e) (10)(2e) (10)(2e)
The Netherlands: (10)(2e) (10)(2e) (10)(2e) (10)(2e) (10)(2e) (10)(2e)
 (10)(2e) (10)(2e) (10)(2e)
Sanofi Pasteur: (10)(2e) (10)(2e)
Absent: (10)(2e)

(10)(2e) gave a short introductory presentation.

We then had presentations related to the (10)(2a) study results (10)(2e) and the Dutch results (10)(2e) and (10)(2e) presented the new ComNet II study protocol following by a group discussion.

- It was agreed that we will add the collection of fever when at D_1. It will not define a RSV ARI case, but it will be used to see how often the WHO case definition does not include fever.
- It was also agreed we will drop 'bacterial throat infection' from the case definition
- It was agreed we need to add birth weight and feeding difficulties to the D_1 or D_14 questionnaire
- It was agreed that we should collect information on nebulizers (under medication)
- It was agreed that we need to look at medication use in more detail (as there is so much more medication use in (10)(2a))
- SP accepted that we change the D_30 questionnaire to another questionnaire or approach to estimate quality of life. A research group from SP is currently developing a new (disease specific) HRQoL questionnaire (based on validated questionnaires). (10)(2e) will also look into the literature for appropriate HRQoL of parents as proxy to estimate the impact of a child with RSV on the family.
- SP asked about performing the study in children 0-2 year-olds only (10)(2e) indicated that this would lead to major changes in the RSV ComNet II Amendment in each country and it is questionable whether we would reach our desired sample sizes (+150 positive cases). Nivl will check the consequences of performing ComNet II only on the 0-2 age group.

- SP agreed co-infections are important but it would be very difficult to get internal funding for this activity
- SP agreed that creating a cohort study and looking at influenza vaccination are also interesting topics but the study may not be designed for these questions (e.g. do we have the right sample size?) and it is not an immediate priority at this moment
- (10)(2e) gave a short presentation about the results of the retrospective testing of the RSV samples on COVID-19. All samples were tested negative. (10)(2e) added that also in the Netherlands there was a zero prevalence for COVID-19 in children aged below 5 years (sentinel surveillance system). He also mentioned that the COVID-19 social distancing and extra social hygiene methods might influence the spread of RSV in the next season.
- Group photo (see Annex 2)

RSV ComNet II Kick-off Meeting

9.30-12.30h, 9th of June 2020

Agenda: see Annex 1

Attending:

(10)(2a) (10)(2e) (10)(2e) (10)(2e) (10)(2e) (10)(2e) (10)(2e),
The Netherlands: (10)(2e), (10)(2e), (10)(2e), (10)(2e) (10)(2e)
 (10)(2e), (10)(2e) (10)(2e) (10)(2e)
Sanofi Pasteur: (10)(2e) (10)(2e) (10)(2e)
 (10)(2a) (10)(2e)
 (10)(2a) (10)(2e) (10)(2e) (10)(2e)
Absent: (10)(2e) (the Netherlands), (10)(2e) (10)(2a)

- We reviewed the findings of the ComNet I project in (10)(2a) and the Netherlands
- (10)(2e) outlined the objectives of the ComNet II project, with two new countries (10)(2a) and (10)(2a)
- The RCGP presentation was well-received and they aim to have around 500 swabs in children aged <5 years, with data collected by telephone surveys. Patients will be entered into the study at swabbing (informed consent (10)(2a) liked the idea of using both telephone interviews and digital questionnaires to collect the data. We could considering comparing the two strategies by collecting half of the data by telephone interviews and half of the data by digital questionnaires.
- The FIIBAP presentation was well-received and they will aim to have about 300 swabs (10)(2a) is worried about the impact of Covid-19 and it is difficult to plan things as health care centres will only open in September.
- It was agreed that we need to define a Statistical Plan for ComNet 2
- It was agreed that we need to work on our communication as the project grows and open communication was a key factor in the success of RSV ComNet I

(10)(2e), (10)(2e) and (10)(2e), 15 June 2020

Annex 1

Day 1: RSV ComNet I Scientific Meeting 8th of June

Morning: 9.30-11.00h (Central European time)

Invited participants: Researchers/delegates involved in RSV ComNet I.

- 9.25 - 9.30 Connection open
- 9.30 - 9.35 Introductions
- 9.35 - 9.55 NL and ^{(10)(2a)} country report: page by page discussion and finalisation of the tables, figure and text
- 9.55 - 10.20 Adjustments to the RSV ComNet disease burden protocol
- 10.20 - 10.35 Outline & focus of the protocol paper
- 10.35 - 10.50 Covid-19 update
- 10.50 - 11.00 Other publications: cost analysis, other??
- 11.00 - 11.05 Any other business

Afternoon: 13.30-15.30h (Central European time)

Invited participants: Researchers/delegates involved in RSV ComNet I & Sanofi Pasteur

Chair: ^{(10)(2e)}

- 13.25 - 13.30 Connection open
- 13.30 - 13.35 Introductions
- 13.35 - 13.40 Short presentation by Sanofi Pasteur
- 13.40 - 14.00 Presentation of the ^{(10)(2a)} country report (implementation and results) ^{(10)(2e)}
- 14.00 - 14.20 Presentation of the Netherlands country report (implementation and results) ^{(10)(2e)}
- 14.20 - 14.30 Presentation of the RSV ComNet II protocol ^{(10)(2e)}
- 14.30 - 15.00 Discussion of the results and ComNet II protocol
- 15.00 - 15.10 Presentation of publication plans, including timeline milestones and deliverables ^{(10)(2e)}
- 15.10 - 15.15 Covid 19 presentation update ^{(10)(2e)}
- 15.15 - 15.20 Preparations for the meeting on 9 June
- 15.20 - 15.30 Any other business + **group photo ComNet I**

Day 2: RSV ComNet II: Kick-off meeting 9th of June

Aim: Presenting the results of RSV ComNet I and kick-off for RSV ComNet II

Invited participants: Delegates from all countries participating in ComNet II and Sanofi Pasteur

9.30h – 12.30h (Central European time)

Chair: (10)(2e)

- 9.15-9.30 Connection open
- 9.30-9.40h **Introductions**
- 9.40-9.45h Opening & welcome, including meeting objectives (Nivel)
- 9.45-9.55h Introduction by Sanofi Pasteur, including *new developments of vaccines and mAbs for RSV* (Clarisse Dermont)
- 9.55-10.05h **General introduction to the RSV ComNet I study** ((10)(2e))
- 10.05-10.25h RSV ComNet I: Implementation & results in the Netherlands ((10)(2e))
((10)(2e))
- 10.25-10.45h RSV ComNet I: Implementation & results in (10)(2a) (10)(2e))
- 10.45-10.55h Discussion & questions
- 10.55-11.05h Freshen up break
- 11.05-11.15h **RSV ComNet II: introduction** ((10)(2e))
- 11.15-11.35h Network and work plan for RSV ComNet II in the (10)(2a) (10)(2e))
- 11.35-11.55h Network and work plan for RSV ComNet II in (10)(2a) (10)(2e))
- 11.55-12.10h General project planning & COVID-19 challenges ((10)(2e))
- Project planning
- Go/no go moment evaluation
- Planned outputs: country reports, manuscripts, protocol
- What happens if you have problems with the study? Where can you find help?
- 12.10-12.20h Any other business and **group photo!**
- 12.20-12.30h 10 minutes reserved for an unexpected presentation

Annex 2: Group photo Day

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(10)(2e)

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