SUPPLEMENTARY TABLE. Sensitivity analysis* of estimated nirsevimab effectiveness against medically attended acute respiratory illness and hospitalization from respiratory syncytial virus, overall and by child's respiratory syncytial virus season — Yukon-Kuskokwim Region, Alaska, October 23, 2023–June 30, 2024

		Primary analysis n = 472		Sensitivity analysis with SARS-CoV-2- and influenza-positive children removed			
				6 case-patients removed n = 466		6 case-patients and 86 controls removed n = 380	
Outcome/RSV season (age on Oct 1, 2023)	**Nirsevimab dosage pattern**	**Total no.**	**Adjusted effectiveness, % (95% CI)***	**Total no.**	**Adjusted effectiveness, % (95% CI)***	**Total no.**	**Adjusted effectiveness, % (95% CI)***
Medically attended ARI							
Overall	No nirsevimab doses	**245**	Ref	**240**	Ref	**191**	Ref
	Nirsevimab receipt ≥7 days earlier	**227**	82 (62–91)	**226**	81 (58–91)	**189**	83 (63–92)
1st season (<8 mos)	No nirsevimab doses	**131**	Ref	**126**	Ref	**102**	Ref
	Nirsevimab receipt ≥7 days earlier	**161**	76 (42–90)	**160**	73 (31–90)	**129**	74 (33–90)
2nd season (8–19 mos)	No nirsevimab doses	**114**	Ref	**114**	Ref	**89**	Ref
	Nirsevimab receipt ≥7 days earlier	**66**	88 (48–97)	**66**	88 (48–97)	**60**	91 (60–98)
Hospitalization							
Overall	No nirsevimab doses	**35**	Ref	**32**	Ref	**28**	Ref
	Nirsevimab receipt ≥7 days earlier	**29**	93 (64–99)	**29**	91 (53–98)	**25**	93 (53–99)

Abbreviations: Ref = reference group; RSV = respiratory syncytial virus.

***** Cases or cases and controls with positive results for SARS-CoV-2 or influenza viruses were excluded. Effectiveness was calculated as (1 – adjusted odds ratio) × 100%. Odds ratios were calculated using multivariable logistic regression, adjusted by age in months at medical visit (continuous), sex, calendar month of medical visit, residence community type, and presence of a high-risk underlying condition.