

BIONIC

NEWSLETTER

A **BIO**logic drug safety and effectiveness inter**N**ational pharmacoepidemiologic **IC** study in pregnant women with autoimmune disorders or asthma and their children (BIONIC).

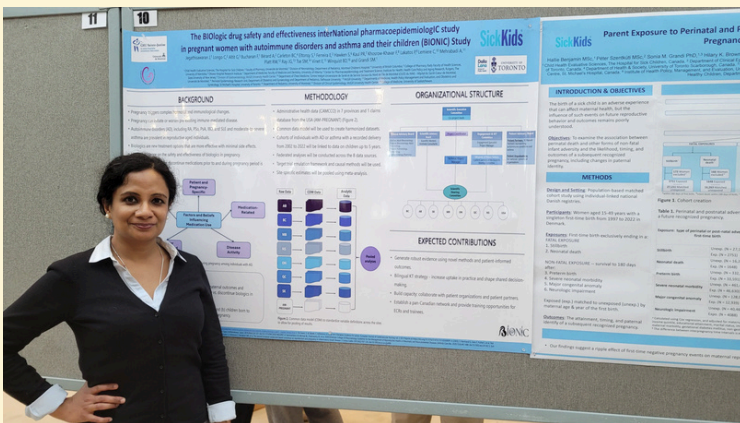


NEWSFLASH

BIONIC Poster Presentation

The 1st BIONIC poster was presented at the annual Sick Kids Research Institute Retreat:

- Jathishinie Jegathisawaran presented a poster on the background, goals, and methodology of the BIONIC study to the Sick Kids research institute (see picture below)



BIONIC OBJECTIVES (EN)

In women with AD or asthma, who continue versus discontinue biologic use in pregnancy, compare the risks of:

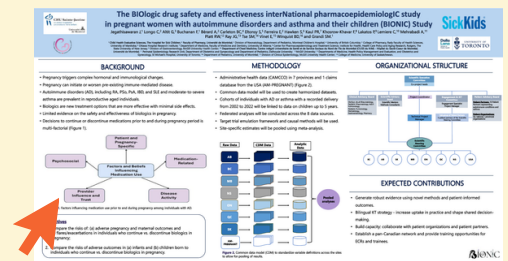
- 1) Maternal complications in, and worsening of disease during, pregnancy.
- 2) Complications in their infants and children.

OBJECTIFS DE BIONIC (FR)

Chez les femmes atteintes de maladies auto-immunes ou d'asthme, qui poursuivent ou interrompent l'utilisation d'un agent biologique pendant las grossesse, comparer les risques suivant:

- 1) Les complications maternelles et l'aggravation de la maladie au cours de la grossesse.
- 2) Les complications chez leurs nourrissons et leurs enfants.

Click to expand BIONIC Poster:



STAYING SAFE AND HEALTHY DURING THE WINTER SEASON

What is Respiratory Syncytial Virus (RSV)?

- RSV is a common respiratory virus that infects the nose, throat, and lungs (1)
- RSV can be especially dangerous for infants (0-12 months), leading to serious complications such as pneumonia (1, 2)
- RSV is an airborne virus, and can be transmitted through coughs, sneezes, and by touching contaminated surfaces (2)



3.6 million
RSV-associated
hospitalizations, with
50% being among
infants under 6 months.

RSV during Pregnancy:

- During pregnancy, changes to the immune system can make respiratory infections feel more severe.
- An RSV vaccine during pregnancy, between 32 and 36 weeks, protects both you and your baby by passing antibodies before birth.
- Vaccination may also lower the chance of serious RSV illness and related complications around delivery.
- Babies can also be protected after birth with a long-acting RSV antibody that provides immediate protection; talk to your healthcare provider about the best option. (2, 3)

For more information on
immunization options, click here:

Which options are available?
Two options are available to protect newborns against RSV during the season (fall, winter):

Abrysvo™	Beyfortus™ (nirsevimab)
Type: Protein subunit vaccine	Type: Medication with monoclonal antibody
When: One dose between 32 and 36 weeks of pregnancy.	When: One injection for newborns and children under one year of age.
How: Helps the mother produce antibodies that are transmitted to the baby via the placenta.	How: The antibody blocks the protein that RSV needs to infect the body.

Talk to your healthcare professional to determine the best option for you and your baby.

Influenza during Pregnancy:

- Influenza (flu) season is typically between November and February in North America (4)
- Flu symptoms such as a fever during pregnancy has been associated with adverse outcomes for a baby (5)
- Getting the influenza vaccine during pregnancy can protect you and your baby for several months after birth. (5)
- This year, a new strand of Influenza A (H3N2) is more severe, and is linked to increased hospitalizations (6,7)

71%
of cases in Canada are
detected as H3N2



For information on respiratory
viruses across populations in
Canada, click here:

Government of Canada / Gouvernement du Canada

Search Canada.ca

Canada.ca > Health > Diseases and conditions > Respiratory virus monitoring in Canada

Explore the data
Canadian respiratory virus surveillance report
Weekly overview of key trends in the activity of respiratory viruses in Canada.

Highlights for the week ending December 13, 2025 (week 50)

Influenza 27.7% percentage of tests positive Trend: ↗	SARS-CoV-2 (COVID-19) 5.0% percentage of tests positive Trend: ↔	RSV 2.4% percentage of tests positive Trend: ↗
FluWatchers 4.0% percentage of FluWatchers reporting cough and fever Trend: ↗	Outbreaks 284 number of weekly outbreaks Trend: ↗	Hospitalizations 8.2 per 100,000 pop. weekly respiratory hospitalization rate Trend: ↗



STAYING SAFE AND HEALTHY DURING THE WINTER SEASON

Asthma

- The winter months can be challenging for those with Asthma (8), here are a few tips:

- 1** Know your triggers - cold, viruses, dust, scented products
- 2** Continue taking medication as prescribed, and carry your inhaler
- 3** Speak with your doctors about managing your asthma during pregnancy, and follow your action plan

Autoimmune Disorders (AD)

- Pregnancy makes your immune system work harder, with AD making it more challenging especially during the winter (9), here are a few tips:

- 1** Prioritize nutritious foods (fruits, vegetables, protein, whole grains)
- 2** Get rest, manage stress, and engage in gentle exercise
- 3** Seek medical advice to reduce risk of viruses/illnesses

Pregnancy during the winter:



Dehydration - colder weather reduces thirst, and heavier clothing limits fluid intake



Weakened immune system - increases susceptibility to viral illnesses



Lower vitamin D - from less sunlight, which may increase the risk of preterm birth and affect newborn bone health

Drink **8-12** cups of water per day

Maintain proper hygiene (hand washing)

Increase sunlight exposure (outdoors or light therapy)

Consult with your doctor about vitamin D supplements & vaccines

(10)

References:

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- (10) Rosenberg Maternal-Fetal Medicine, 2022. How The Cold Can Impact Your Winter Pregnancy. Retrieved from: <https://rosenbergmfm.com/blog/how-the-cold-can-impact-your-winter-pregnancy/>

Rébecca Fénélon-Dimanche



Rébecca Fénélon-Dimanche is a research project manager at the Faculty of Pharmacy, Université de Montréal, and at CHU Sainte-Justine. Her work focuses on understanding how medications are used in real life by patients with respiratory diseases, with a strong emphasis on patient-centered and registry-based research. She is closely involved in major research infrastructures such as the reMed medication registry and the RESP pulmonary health registry, which combine medication data, clinical information, questionnaires, and qualitative interviews. Her work supports studies examining medication use, adherence, and patient experiences following clinical or pharmacy-based interventions.

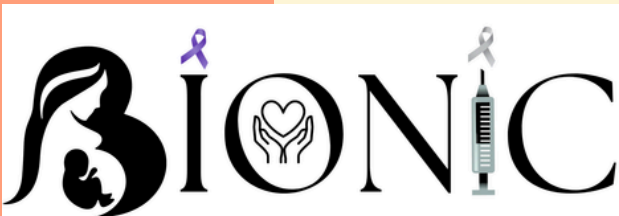
Within pediatric and perinatal asthma research, she contributes to projects aiming to optimize outcomes for pregnant women and children, including mixed-methods and consensus-based initiatives that integrate patient, caregiver, and clinician perspectives. Her work is grounded in the belief that combining multiple data sources is essential to produce meaningful and actionable respiratory research.

Rébecca Fénélon-Dimanche est conseillère de recherche à la Faculté de pharmacie de l'Université de Montréal et au CHU Sainte-Justine. Elle travaille sur des projets portant sur la compréhension de l'usage réel des médicaments chez les personnes atteintes de maladies respiratoires, avec un fort accent sur la recherche centrée sur les patients et les études basées sur des registres de données. Elle est étroitement impliquée dans des infrastructures de recherche majeures telles que la banque de données sur les médicaments reMed et le registre de santé pulmonaire RESP, qui combinent des données médicamenteuses, cliniques, issues de questionnaires et d'entrevues qualitatives. Ses travaux soutiennent des études portant sur l'utilisation des médicaments, l'adhésion aux traitements et l'expérience des patients à la suite d'interventions cliniques ou en pharmacie communautaire.

Dans le domaine de la recherche en asthme pédiatrique et périnatal, elle contribue à des projets visant à optimiser les issues cliniques chez les femmes enceintes et les enfants, notamment à travers des méthodologies mixtes intégrant les perspectives des patients, des parents et des cliniciens. Son approche repose sur la conviction que la combinaison de sources de données complémentaires est essentielle pour produire une recherche en santé respiratoire à la fois rigoureuse et ancrée dans la pratique.

Share Your Thoughts

Let us know what you think of the January BIONIC Newsletter, or tell us what you would like to hear about in the next edition [here](#).



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