# COVID THERAPEUTICS

## Quick Reference for Prescribers

### What therapeutic options are available for COVID positive patients?

| Therapeutic | Reduction In hospitalization & death | Route | Treatment Initiation from Symptom Onset | Treatment Duration | Considerations | Preference |
|---|---|---|---|---|---|---|
| **Paxlovid (Nirmatrelvir/ Ritonavir)** 300mg/100mg po BID x 5days | 88% | Oral | Within 5 days | 5 days | Patients age 12+ and ≥ 40kg<br><br>Multiple drug interactions<br><br>Adjust dosing for renal impairment<br><br>Not recommended in severe hepatic impairment | **1st Tier** |
| **Remdesivir** | 87% | IV | Within 7 days | 3 days (1-2 hr) | Patients ≥ 3.5kg<br>Renal and hepatic considerations | **1st Tier** |
| **Sotrovimab** | 85% | IV | Within 10 days | 30 minutes | Patients age 12+ and ≥ 40kg | **2nd Tier** Reserve use for those whom: Paxlovid & Remdesivir are contraindicated or unavailable Outside treatment window for Paxlovid & Remdesivir |
| **Molnupiravir** 200mg 4 tabs po BID x 5 days | 30% | Oral | Within 5 days | 5 days | Patients age 18+<br><br>Not recommended in pregnancy<br><br>Contraceptive recommendations for males and females. | **3rd Tier** Utilize when other treatment options are contraindicated or unavailable |
| **Bebtelovimab** | Clinical trial not powered or designed to determine difference in clinical outcomes | IV | Within 7 days | 1 minute | Patients age 12+ and ≥ 40kg | **3rd Tier** Utilize when other treatment options are contraindicated or unavailable |

### Where should I refer a patient for IV treatments (Bebtelovimab, Remdesivir or Sotrovimab)?

Please check cv.nmhealth.org for a list of current providers. Please send a referral or have the patient call ahead of time as appointments may be required and inventory status may change.

### How do I prescribe oral therapeutics?

- Please check cv.nmhealth.org for a list of pharmacy locations. Community Walgreens #16544 will overnight medications to a patient's home or preferred pick-up location. Community is open Monday-Friday. Weekend orders after Friday at 4pm must be sent to a drive thru location.
- **Ask patients to go through the drive-thru to minimize exposure to pharmacy staff and customers.**
- Please include date of symptom onset. It helps the pharmacy staff ensure the patient receives the medication within the treatment window.

**NMDOH**
NEW MEXICO DEPARTMENT OF HEALTH

Revised 2/2022

**Adult or pediatric patient (age 12 and older weighing at least 40 kg) with mild-to-moderate COVID-19 & at high risk for progression to severe disease**

**Consider one of the following therapeutics, if available:[1]**

**PAXLOVID[2]** within **5 days of symptom onset**
**eGFR $\geq$60 mL/min :** 300 mg nirmatrelvir taken with 100 mg ritonavir twice daily for 5 days
**eGFR $\geq$30-<60:** 150 mg nirmatrelvir taken together with 100 mg ritonavir twice daily for 5 days
Evaluate concomitant use of CYP3A inducers and medications with high dependency on CYP3A for clearance as these may be contraindicated[2,3]

OR

**sotrovimab[4]** 500 mg IV begun **ASAP within 10 days of symptom onset**

OR

**remdesivir[5]** 200mg IV x 1 dose on Day 1, 100mg IV x 1 on Days 2-3 begun **ASAP within 7 days of symptom onset**

**Is Patient:**
- Hospitalized for COVID-19 **OR**
- Requiring $O_2$ **OR** an increase in baseline home $O_2$ due to COVID-19

No

**Symptom onset within the past 5-7 days?**

Yes

**Does patient have severe renal impairment (eGFR <30mL/min) OR severe hepatic impairment (Child-Pugh Class C)**

No

No

If none of the above therapeutics are available or clinically appropriate for patient treatment within 5 days of symptom onset and patient is **age 18 or greater**

Yes

Yes

**Consider sotrovimab[4]** 500 mg IV begun **ASAP within 10 days of symptom onset**

No

**Is possibility of pregnancy, if applicable, ruled out?**

Yes

No

**Symptom onset within the past 10 days?**

Yes

Yes

If none of the other therapeutics are available or clinically appropriate for patient treatment within 7 days of symptom onset and patient is age 12 or greater and weighing at least 40 kg

**Consider Bebtelovimab[7]** 175 mg IV begun **ASAP within 7 days of symptom onset**

**Consider molnupiravir[6]** 800mg by mouth every 12h for 5 days begun **ASAP within 5 days of symptom onset**

Prescribers must review and comply with the mandatory requirements outlined in the **molnupiravir EUA[6]**

No

**Consider sotrovimab[4]** 500 mg IV begun **ASAP within 10 days of symptom onset**

**Treatment of symptoms, Management per NIH & CDC Guidelines**

References:
[1] NIH's COVID-19 Treatment Guidelines Panel's Statement on Therapies for High-Risk, Non-hospitalized Patients With Mild to Moderate COVID-19. https://www.covid19treatmentguidelines.nih.gov/therapies/statement-on-therapies-for-high-risk-nonhospitalized-patients/
[2] PAXLOVID EUA. https://www.fda.gov/media/155050/download
[3] NIH's COVID-19 Treatment Guidelines Panel's Statement on Potential Drug-Drug Interactions Between Ritonavir-Boosted Nirmatrelvir (Paxlovid) and Concomitant Medications. https://www.covid19treatmentguidelines.nih.gov/therapies/statement-on-paxlovid-drug-drug-interactions/
[4] Sotrovimab EUA. https://www.fda.gov/media/149534/download
[5] Veklury (remdesivir) Prescribing Information. https://www.gilead.com/-/media/files/pdfs/medicines/covid-19/veklury/veklury_pi.pdf
[6] Molnupiravir EUA. https://www.fda.gov/media/155054/download
[6] Bebtelovimab EUA. https://www.fda.gov/media/156152/download

**Outpatient pediatric patients 3.5 kg to <40 kg or pediatric patients <12 years of age weighing at least 3.5 kg, with mild-to-moderate COVID-19 & at high risk for progression to severe disease**

**Consider remdesivir\*[1]** begun **ASAP within 7 days of symptom onset**

**Pediatric patients <12 years and $\geq$40 kg:** 200mg IV x 1 dose on Day 1, 100mg IV x 1 on Days 2-3

**Pediatric patients 3.5 kg to <40 kg or pediatric patients <12 years weighing at least 3.5 kg:** 5 mg/kg IV on Day 1, 2.5 mg/kg on days 2-3

\*Use 100mg lyophilized vial for EUA pediatric use

**No**

**Symptom onset within the past 7 days?**

**Yes**

Pediatric patient (greater than 28 days old) with severe renal impairment (eGFR <30mL/min)
**OR**
Full-term neonate (7 to 28 days old) with serum creatinine greater than or equal to 1 mg/dL?

**No**

**Yes**

**Treatment of symptoms, Management per NIH & CDC Guidelines**

February 1, 2022