TABLE ROCK PHARMACY & COMPOUNDING

# COVID-19 Treatment: Oral Antivirals

| | Paxlovid | Molnupiravir |
|---|---|---|
| **Age/Wt** | 12yrs+/40kg+ | 18yrs+ |
| **Indication** | Treatment of mild-to-moderate COVID-19 (not post-exposure prophylaxis) in those at high-risk of developing severe COVID (must start w/in 5 days of symptom onset) | Treatment of mild-to-moderate COVID-19 (not post-exposure prophylaxis) in those at high-risk of developing severe COVID (must start w/in 5 days of symptom onset) |
| **Dose/Administration** | 300mg nirmatrelvir (two 150mg tablets) with 100mg ritonavir (one 100mg tablet) - all three tablets taken together every 12 hours for 5 days with or without food | 800 mg (four 200 mg capsules) taken orally every 12 hours for 5 days with or without food |
| **Renal Dose Adjustment** | Yes - eGFR ≥30 to <60 mL/min: **150 mg nirmatrelvir (one 150 mg tablet)** with 100 mg ritonavir (one 100 mg tablet); eGFR <30: not recommended | No |
| **Quantity** | 30 tablets | 40 capsules |
| **MOA** | Nirmatrelvir inhibits a COVID-19 protein to stop the virus from replicating; ritonavir slows down nirmatrelvir's breakdown to help it remain in the body for a longer period at higher concentrations. | Incorporates into the viral DNA, causing viral errors, which stops the virus from replicating. |
| **Contraindications** | Co-administration with certain CYP3A medications (e.g. alfuzosin, amiodarone, simvastatin, colchicine, midazolam), significant hypersensitivity to either drug | None |
| **Drug Interactions** | Several (reference EUA Fact Sheet for guidance on each) | None identified |
| **Warnings** | Several drug interactions, potential for hepatotoxicity, HIV-1 drug resistance | Embryo-fetal toxicity: not recommended for use during pregnancy (must use effective contraception for duration of treatment and for 4 days after the last dose), bone and cartilage toxicity: not authorized for use in patients less than 18 years of age because it may affect bone and cartilage growth |
| **Adverse Reactions** | Dysgeusia (distorted sense of taste), diarrhea, hypertension, and myalgia | Diarrhea, nausea, and dizziness |
| **Missed Dose** | Within 8 hours of scheduled dose: take | Within 10 hours of scheduled dose: take |

**Phone: (828) 438-9355 Fax: (828) 433-1211**

200 West Fleming Drive, Morganton, NC 28655

| | | |
|---|---|---|
| | >8 hours of scheduled dose: skip | >10 hours of scheduled dose: skip |

| COVID-19 Pre-Exposure Prophylaxis: IM Monoclonal Antibody | |
|---|---|
| | **EVUSHELD** |
| **Age/Wt** | 12yrs+/40kg+ |
| **Indication** | **Pre**-exposure prophylaxis of COVID-19 in those ***not*** currently infected with SARS-CoV-2 and have ***not*** had a known recent exposure **and**:<br>● Have moderate-severe immune compromise **or**<br>● Cannot receive a COVID-19 vaccine due to history of severe adverse reaction (e.g. allergic reaction) to a COVID-10 vaccine and/or its components |
| **Limitations of use** | Not authorized for:<br>● Treatment of COVID-19<br>● **Post**-exposure prophylaxis<br>● A vaccination substitute<br>● Those recently vaccinated against COVID-19 (wait at least 2 weeks to administer EVUSHELD in these individuals) |
| **Dose/ Administration** | Two separate, consecutive IM injections:<br>● Tixagevimab 300mg/3mL<br>● Cilgavimab 300mg/3mL<br><br>EVUSHELD may be effective for 6 months; redosing ok after this time period |
| **Renal Dose Adjustment** | No |
| **MOA** | Both monoclonal antibodies bind to different sites of the SARS-CoV-2 spike protein, interfering with its ability to enter human cells |
| **Contraindications** | Individuals with previous severe allergic reactions to any component of EVUSHELD |
| **Drug Interactions** | Unknown though unlikely with renally excreted medications/those that interact with CYP enzymes |
| **Warnings** | ● Hypersensitivity: Possible, as with any IgG1 monoclonal antibodies<br>● Bleeding disorders: As with any IM injection, use caution<br>● Cardiovascular events: Potential risk of MI and cardiac failure |
| **Adverse Reactions** | Headache, fatigue, cough |
| **Important Information** | Patients must wait for a 1-hour observation and clinical monitoring period post administration (in case of serious hypersensitivity reaction) |