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Pharmacist's Letter
Canada

Identify Candidates for COVID-19 Monoclonal Antibodies

Bamlanivimab/etesevimab will be the third monoclonal antibody option authorized to treat OUTpatients with COVID-19.

This combo joins bamlanivimab and casirivimab/imdevimab as another single-dose IV infusion. And more are in the works.

These "mabs" block SARS-CoV-2 from entering cells. Combo products may reduce the likelihood of resistant viral variants developing as a result of treatment.

Raise awareness of mabs as a possible COVID-19 treatment. Find locations at the Health and Human Services Therapeutics website...and stay alert for patients who meet emergency use authorization (EUA) criteria.

This includes outpatients positive for COVID-19 who are age 12 or older...with mild to moderate symptoms for less than 10 days...and at high risk of severe complications (age 65 or older, BMI 35 or higher, etc).

Help these patients weigh pros and cons.

Early data suggest ANY mab option may reduce ED or hospital visits by about 5% versus placebo in eligible patients.

But unpublished evidence suggests bamlanivimab/etesevimab may also reduce death by about 2% versus placebo. That's partly why guidelines currently consider it the preferred mab option.

Watch for mortality data with casirivimab/imdevimab soon.

Preliminary lab studies suggest any of these mabs work against the U.K. variant. But casirivimab/imdevimab seems to be needed for some others, such as the South Africa or Brazil variants. Expect evidence to evolve over time.

Still, refer eligible patients for any available option ASAP if they want to be treated. Distribution of specific mabs is targeted to areas where certain variants are common.

Educate that rare hypersensitivity reactions can occur...so monitoring is needed for at least 1 hour after the infusion.

Clarify that patients don't currently have to pay for the med...and many payers will cover the cost of the infusion.

Reinforce that patients still need to self-isolate. These treatments aren't a cure and don't prevent spread of infection.

Defer COVID-19 vaccination for at least 90 days after these mabs...they may interfere with the vaccine immune response.

Use our checklist, *"Mabs" for COVID-19: Patient Assessment and Referral*, to identify eligible patients...and facilitate treatment.

Key References:

-JAMA 2021;325(7):632-44
-N Engl J Med 2021;384(3):238-51
-www.covid19treatmentguidelines.nih.gov/statement-on-bamlanivimab-plus-etesevimab-eua/ (3-24-21)
-www.idsociety.org/practice-guideline/covid-19-guideline-treatment-and-management/ (3-24-21)

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