

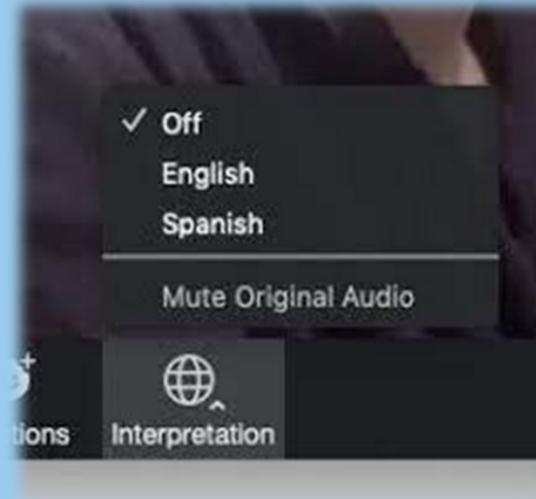
**The Who, What, Where and When of COVID-19 Treatments:
Everything You Need to Know About Lifesaving Antivirals**

TUESDAY, JUNE 28, 2022 | 3:00PM ET / 12:00PM PT

Language Interpretation

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Housekeeping



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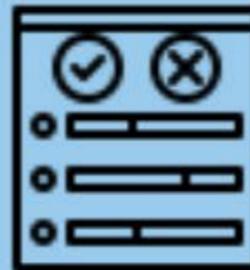
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Slides will be posted to our CBO Webpage



Poll and survey will be shown at the end of the webinar



Webinar recording will be posted to our CBO Webpage

Agenda

Welcome & Introductions

Lisa F. Waddell, MD, MPH

Current CDC Recommendations

John T. Brooks, MD

Test to Treat Initiative

Cameron Webb, MD, JD

National Association of Community Health Center Insights

Julia Skapik MD, MPH, FAMIA

Local Bright Spot:

G.A Carmichael Family Health Center

Dr. James Coleman Jr.

Audience Q&A

Key Takeaways and Closing

Lisa F. Waddell, MD, MPH

Speakers



John T. Brooks, MD

Senior Science Advisor, **CDC Emergency COVID-19 Response**
Chief Medical Officer, **CDC Division of HIV Prevention**



Dr. James Coleman Jr

Chief Executive Officer
G. A. Carmichael Family Health Center



Julia Skapik, MD, MPH, FAMIA

Chief Medical Information Officer
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Cameron Webb, MD, JD

Senior Policy Advisor for Equity, COVID-19 Response Team
White House



Lisa F. Waddell, MD, MPH

Chief Medical Officer
CDC Foundation

Current CDC Recommendations



John T. Brooks, MD

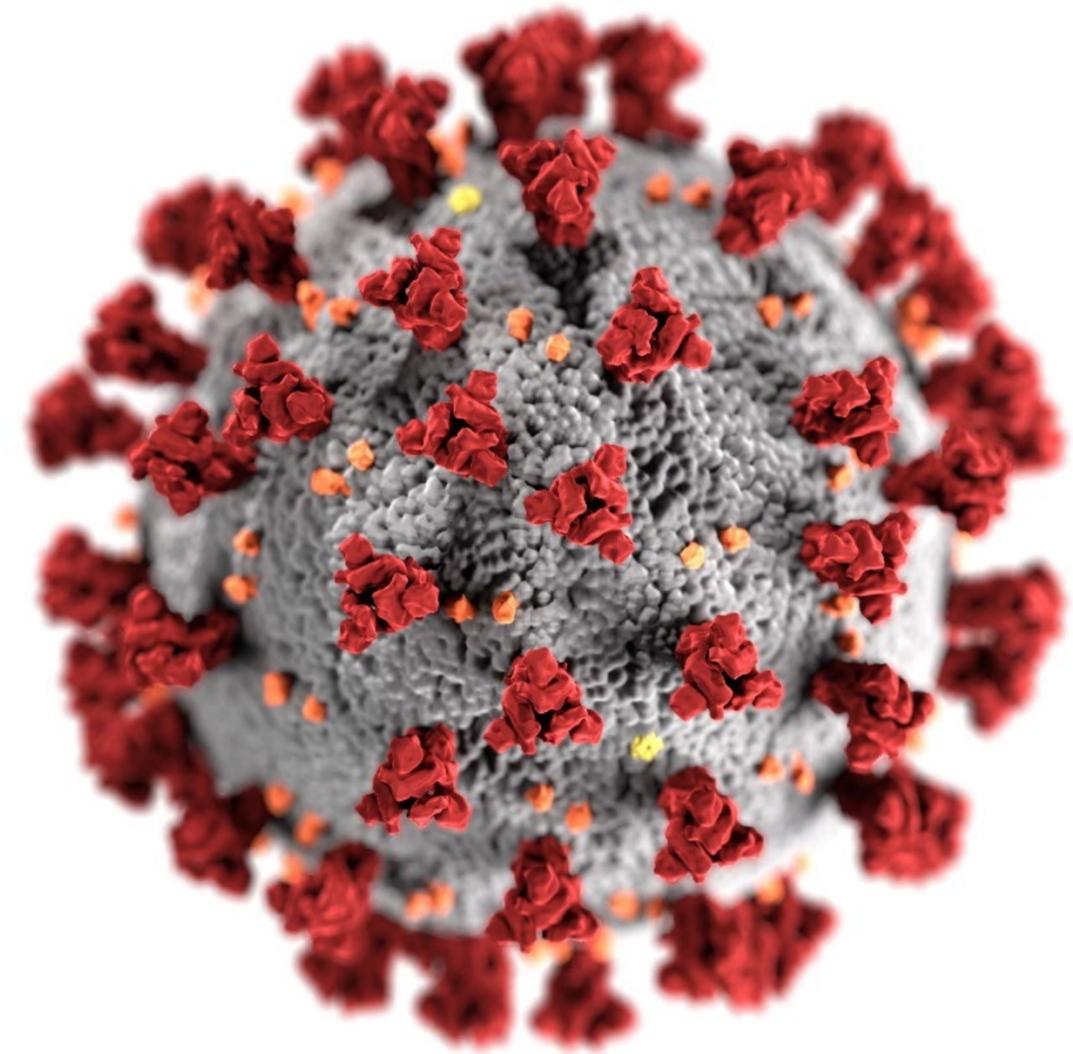
Senior Science Advisor | **CDC Emergency COVID-19 Response**
Chief Medical Officer | **CDC Division of HIV Prevention**

The Who, What, Where and When of COVID-19 Treatments: Everything You Need to Know About Lifesaving Antivirals

John T. Brooks, CDC COVID-19 Emergency Response

CDC Foundation Call

June 28, 2022



cdc.gov/coronavirus



COVID-19 Treatment Guidelines

All patients should be offered symptomatic management **(AIII)**.

For patients who are at high risk of progressing to severe COVID-19,^a use 1 of the following treatment options:

Preferred Therapies

Listed in order of preference:

- **Ritonavir-boosted nirmatrelvir (Paxlovid)^{b,c} (AIIa)**
- **Remdesivir^{c,d} (BIIa)**

Alternative Therapies

For use ONLY when neither of the preferred therapies are available, feasible to use, or clinically appropriate. Listed in alphabetical order:

- **Bebtelovimab^e (CIII)**
- **Molnupiravir^{c,f} (CIIa)**

The Panel **recommends against** the use of **dexamethasone^g** or **other systemic corticosteroids** in the absence of another indication **(AIII)**.

Does Not Require
Hospitalization or
Supplemental Oxygen

<https://www.covid19treatmentguidelines.nih.gov/management/clinical-management/clinical-management-summary/>



^a CDC webpage for criteria of high risk; ^b Caution about drug-drug interactions; ^c If hospitalized, treatment course can be completed; ^d Remdesivir is 3 consecutive day infusion; ^e Bebtelovimab has in vitro activity but no clinical efficacy data; ^f Molnupiravir has lower efficacy than preferred options; ^g There is currently a lack of safety and efficacy data using glucocorticoids in non-hospitalized patients

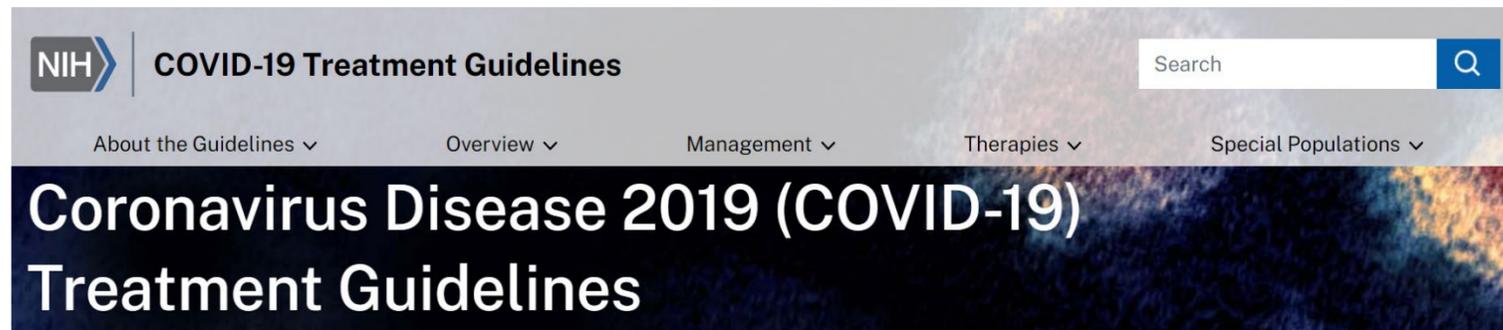
Dosing Details

	Dosing	Duration	Time from Illness Onset	Specific Issues
Nirmatrelvir (N) + Ritonavir (R)	<ul style="list-style-type: none"> • <i>eGFR</i> ≥ 60 mL/min: N 300 mg + R 100 mg po bid • <i>eGFR</i> ≥ 30 to < 60 mL/min: N 150 mg + R 100 mg po bid 	5 days	≤ 5 days	<ul style="list-style-type: none"> • Drug-drug interactions • Do not use if GFR < 30 mL/min • Not recommended with Child-Pugh Class C
Remdesivir	Day 1: 200 mg IV Day 2-3: 100 mg IV	3 days	≤ 7 days	<ul style="list-style-type: none"> • Infusion over 30-120 min • Infusions over 3 consecutive days
Bebtelovimab	175 mg IV	1 day	≤ 7 days	<ul style="list-style-type: none"> • Administer ≥ 30 seconds • No clinical endpoint data • Use only if not other accessible or clinically appropriate options
Molnupiravir	800 mg po bid	5 days	≤ 5 days	<ul style="list-style-type: none"> • Potentially less efficacious than other options • Safety concerns



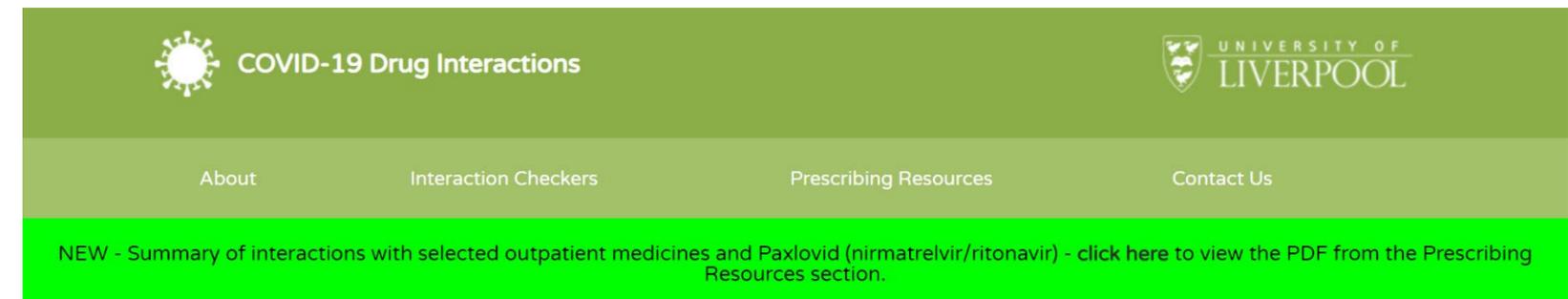
Ritonavir-boosted Nirmatrelvir: Drug-Drug Interactions

NIH Guidelines Drug-Drug Interactions Chapter



<https://www.covid19treatmentguidelines.nih.gov/therapies/antiviral-therapy/ritonavir-boosted-nirmatrelvir--paxlovid-/paxlovid-drug-drug-interactions/>

Liverpool COVID-19 Drug Interactions Database



<https://covid19-druginteractions.org/checker>

FDA Website Resources

- Fact Sheet for Health Care Providers: <https://www.fda.gov/media/155050/download>
- PAXLOVID Patient Eligibility Screening Checklist Tool for Prescribers: <https://www.fda.gov/media/158165/download>



Ritonavir-boosted Nirmatrelvir: Drug-Drug Interactions

Liverpool COVID-19 Drug Interactions Database

<https://covid19-druginteractions.org/checker>

If a drug is not listed below it cannot automatically be assumed it is safe to coadminister.

COVID Drugs	Co-medications	Drug Interactions
<input type="text" value="Search drugs..."/>	<input type="text" value="Search co-medications..."/>	<input type="checkbox"/> Check COVID/COVID drug interactions
<input checked="" type="radio"/> A-Z <input type="radio"/> Class <input type="radio"/> Trade	<input checked="" type="radio"/> A-Z <input type="radio"/> Class	Drug Interactions will be displayed here
Selected Drugs will be displayed here.	Selected Co-medications will be displayed here	
<input type="checkbox"/> Anakinra <input type="button" value="i"/>	<input type="checkbox"/> Abacavir <input type="button" value="i"/>	
<input type="checkbox"/> Azithromycin <input type="button" value="i"/>	<input type="checkbox"/> Abemaciclib <input type="button" value="i"/>	
<input type="checkbox"/> Bamlanivimab/ Etesevimab <input type="button" value="i"/>	<input type="checkbox"/> Abiraterone <input type="button" value="i"/>	



Ritonavir-boosted Nirmatrelvir: Drug-Drug Interactions

Liverpool COVID-19 Drug Interactions Database

<https://covid19-druginteractions.org/checker>

If a drug is not listed below it cannot automatically be assumed it is safe to coadminister.

COVID Drugs	Co-medications	Drug Interactions
<input type="text" value="nir"/>	<input type="text" value="ator"/>	<input type="checkbox"/> Check COVID/COVID drug interactions
Reset Checker		
<input checked="" type="radio"/> A-Z <input type="radio"/> Class <input type="radio"/> Trade	<input checked="" type="radio"/> A-Z <input type="radio"/> Class	Switch to table view Results Key
<input checked="" type="checkbox"/> Nirmatrelvir/ritonavir (5 days) [Please read the interaction details as management of these interactions may be complex.] (i)	<input checked="" type="checkbox"/> Atorvastatin (i)	Potential Interaction
	<input type="checkbox"/> Acridinium bromide (i)	Nirmatrelvir/ritonavir (5 days) [Please read the interaction details as management of these interactions may be complex.]
	<input type="checkbox"/> Aminophylline (i)	Atorvastatin
	<input checked="" type="checkbox"/> Atorvastatin (i)	More Info ^



COVID-19 Rebound After Paxlovid Treatment



Distributed via the CDC Health Alert Network, May 24, 2022, 9:00 AM ET (CDCHAN-00467)

- Reports of recurrent illness a few days after Paxlovid™ treatment
- Manufacturer noted in the clinical trial that a small number of participants had ≥ 1 positive SARS-CoV-2 RT-PCR test results after testing negative, or an increase in the amount of SARS-CoV-2 detected by PCR (NP swabs) after completing their assigned treatment course in the study.
- This finding was observed *both* in persons randomized to Paxlovid™ and to placebo.
- There was *no* increased occurrence of hospitalization or death, and there was no evidence that the rebound in detectable viral RNA was the result of SARS-CoV-2 resistance to Paxlovid™



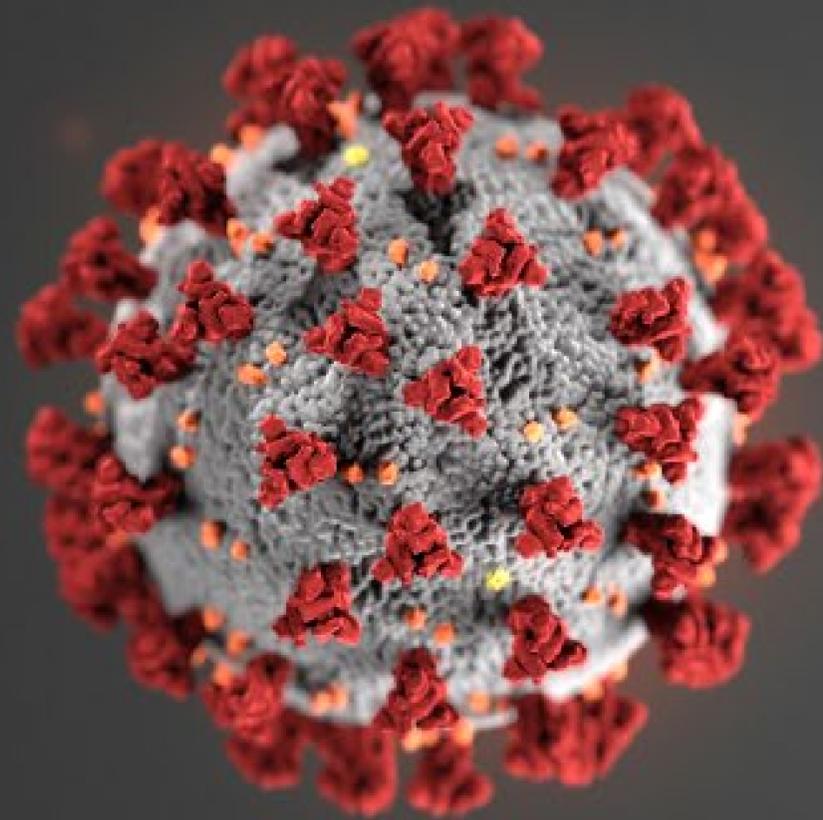
COVID-19 Rebound After Paxlovid Treatment



Distributed via the CDC Health Alert Network, May 24, 2022, 9:00 AM ET (CDCHAN-00467)

- There is currently no evidence that additional treatment for COVID-19 is needed.
- CDC recommends re-isolating during the rebound
 - CDC Health Advisory: <https://emergency.cdc.gov/han/2022/han00467.asp>
 - Isolate again and restart the recommended 5-day isolation period at the time of recurrence of symptoms or a new positive COVID-19 test result.
 - End re-isolation after 5 days if you are fever-free for 24 hours without the use of fever-reducing medication and your symptoms are improving.
 - Wear a mask for 10 days after rebound.





For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



Test to Treat Initiative



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Thank You



Lisa F. Waddell, MD, MPH
Chief Medical Officer
CDC Foundation

- Today's slides and a recording of this webinar will be posted online; a link will be provided
- Please take the brief evaluation poll that will appear on your screen shortly
- Let us know your feedback and thoughts for future webinar topics in the post-webinar survey
- Thank you for your time and participation!