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NHS Foundation Trust

Covid Medicines Delivery Unit (CMDU): Treatment options

Gillian Turrell

Lead Pharmacist, Medicines Information and Cardiology



Treatment Eligibility



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Treatments are commissioned for symptomatic non-hospitalised adult and paediatric patients with Covid-19 in the following circumstances:

1. Onset of Covid-19 symptoms has been within the last 5 days (for Paxlovid, molnupiravir and sotrovimab) or 7 days (for remdesivir).
2. SARS-COV-19 infection is confirmed by either a lateral flow or PCR (registered via gov.uk or NHS 119)
3. Is a member of the highest risk group (as defined by the Department of Health and Social Care commissioned independent advisory group). This group of patients includes the following:
 - Solid organ cancers
 - Haematological diseases and recipients of haematological stem cell transplant (HSCT)
 - Renal conditions
 - Liver conditions
 - Immune-mediated inflammatory disease
 - Primary and acquired immunodeficiency
4. Is not hospitalised for Covid-19 and is not requiring new supplemental oxygen specifically for the management of Covid-19 symptoms.



Antivirals: Paxlovid[®]

First line – adults only



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Pros:

- Nirmatrelvir/Ritonavir combination – given orally 3 tabs BD for 5 days
- Relative risk reduction of hospitalisation – 88%

Cons:

- Not recommended in pregnancy; breastfeeding should be discontinued during treatment and for 7 days after the last dose.
- Contraindicated in severe hepatic and renal dysfunction
- Multiple significant drug-drug interactions



Antivirals: Remdesivir

Second line – for adults and children over 40kg



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Pros:

- Intravenous administration
- Treatment within 7 days of symptoms onset
- May be used in pregnancy where benefits outweigh risks
- No significant interactions
- Relative risk reduction of hospitalisation – 87%

Cons:

- Intravenous administration – patient needs to attend PIU for daily infusions
- No specific advice on discontinuation of breastfeeding
- Not recommended if ALT $\geq 5 \times \text{ULN}$ or eGFR $< 30 \text{mls/min}$
- Some supply issues



Antivirals: Molnupiravir

Third line – adults only



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Pros:

- Given orally - 4 caps BD for 5 days
- May be used in severe liver and renal disease
- No significant drug-drug interactions

Cons:

- Not recommended in pregnancy; breastfeeding should be discontinued during treatment and for 4 days after last dose
- Relative risk reduction of hospitalisation – 30%



nMAB: Sotrovimab

Fourth line by exception: adults and children over 12 yrs and over 40kg



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Pros:

- IV infusion – single dose
- May be used in pregnancy although there is no safety data
- No dose adjustment in liver or renal impairment
- No significant drug-drug interactions

Cons:

- Requires MDT approval
- No specific advice on discontinuation of breastfeeding



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Useful resources



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- [CAS-ViewAlert \(mhra.gov.uk\)](https://www.mhra.gov.uk)
 - Interim Clinical Commissioning Policy for non-hospitalised patients
 - Clinical guide for treatment options
 - Treatment summary
- Covid medicines interactions checker [Liverpool COVID-19 Interactions \(covid19-druginteractions.org\)](https://www.covid19-druginteractions.org)
- Further information on eligibility criteria [Defining the highest-risk clinical subgroups upon community infection with SARS-CoV-2 when considering the use of neutralising monoclonal antibodies \(nMABs\) and antiviral drugs: independent advisory group report - GOV.UK \(www.gov.uk\)](https://www.gov.uk)