MISSISSIPPI STATE DEPARTMENT OF HEALTH

This is an official
MS Health Alert Network (HAN) - Update

MESSAGE ID: **MSHAN-20220713-00580-UPD (Health Alert)**

RECIPIENTS: **All Physicians, Hospitals, ERs, ICPs, NPs, PAs, and Healthcare Providers – Statewide**

Wednesday, July 13, 2022

SUBJECT: **COVID-19 Therapeutics Update**

Key Messages

- **Paxlovid, an oral antiviral medication, is the preferred option for the treatment of mild-to-moderate COVID-19 infection in individuals 12 and older at high risk of progression to severe disease from COVID-19 infection (see the Clinical Decision Aid at COVID-19 Therapeutics Decision Aid (hhs.gov)). Ample supply of Paxlovid is available, but this medication has been underutilized for the treatment of COVID-19.**
- **Bebtelovimab, a monoclonal antibody for the treatment of acute COVID-19 in the outpatient setting, is less effective and in extremely short supply and should be reserved for individuals with a contraindication to preferred therapies. Availability of bebtelovimab after the third week of August is uncertain.**

Dear Colleagues,

- Paxlovid (ritonavir-boosted nirmatrelvir) is an oral antiviral medication that is authorized for the outpatient treatment of mild-to-moderate COVID-19 caused by SARS-CoV-2.
- The CDC and NIH currently recommend the use of Paxlovid as a preferred option for eligible adult and pediatric patients (12 years of age and older) who test positive for COVID-19 and are at high risk for progression to severe COVID-19. This recommendation is the result of a recent clinical trial in which Paxlovid reduced the risk of hospitalization and death by 88% in unvaccinated outpatients with COVID-19 at higher risk of severe disease.
- Based on the data from BLAZE-4, bebtelovimab has been shown to improve symptoms in patients with mild-to-moderate COVID-19. Additionally, a reduction in SARS-CoV-2 viral load on Day 5 was observed relative to placebo, though the clinical significance of this is unclear.
- Bebtelovimab should be reserved for individuals with a contraindication to first-line therapies as it is less effective and in extremely short supply. Bebtelovimab, purchased and allocated to MS by the USG, will not be available after the third week of August. It is uncertain at this time if bebtelovimab will be available through the pharmaceutical company Lilly when the USG supply is depleted.
- Paxlovid is absolutely contraindicated in those with a history of clinically significant hypersensitivity reactions or those with significant drug interactions. Some medications that

interact with Paxlovid can be temporarily discontinued during the five-day course of the antiviral medication. An example would be a patient with stable cardiovascular disease taking a statin.

- Paxlovid is contraindicated in those taking drugs that are highly dependent on CYP3A for clearance and for which elevated concentrations are associated with serious and/or life-threatening reactions:
  - Alpha1-adrenoreceptor antagonist: alfuzosin
  - Analgesics: pethidine, propoxyphene
  - Antianginal: ranolazine
  - Antiarrhythmic: amiodarone, dronedarone, flecainide, propafenone, quinidine
  - Anti-gout: colchicine
  - Antipsychotics: lurasidone, pimozide, clozapine
  - Benign prostatic hyperplasia agents: silodosin
  - Cardiovascular agents: eplerenone, ivabradine
  - Ergot derivatives: dihydroergotamine, ergotamine, methylergonovine
  - HMG-CoA reductase inhibitors: lovastatin, simvastatin
  - Immunosuppressants: voclosporin (Lupkynis™)
  - Microsomal triglyceride transfer protein inhibitor: lomitapide (Juxtapid®)
  - Migraine medications: eletriptan, ubrogepant (Ubrelvy®)
  - Mineralocorticoid receptor antagonists: finerenone (Kerendia®)
  - Opioid antagonists: naloxegol (Movantik)
  - PDE5 inhibitor: sildenafil (Revatio®) when used for pulmonary arterial hypertension
  - Sedative/hypnotics: triazolam, oral midazolam
  - Serotonin receptor 1A agonist/serotonin receptor 2A antagonist: flibanserin (Addyi®)
  - Vasopressin receptor antagonists: tolvaptan (Jynarque®)
- Paxlovid is also contraindicated in those taking drugs that are potent CYP3A inducers where significantly reduced nirmatrelvir or ritonavir plasma concentrations may be associated with the potential for loss of virologic response and possible resistance.
  - Anticancer drugs: apalutamide (Erleada®)
  - Anticonvulsant: carbamazepine, primidone, phenytoin
  - Cystic fibrosis transmembrane conductance regulator potentiators: lumacaftor/ivacaftor (Orkambi®)
  - Herbal Products: St. John's Wort (hypericum perforatum)

- For detailed information regarding all drug-drug interactions with Paxlovid, please refer to "Table 1: Established and Other Potentially Significant Drug Interactions" in Section 7 of the Paxlovid Fact Sheet.

Regards,

Paul Byers, MD
State Epidemiologist

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Alerting Message Specification Settings

Originating Agency:	Mississippi State Department of Health
Alerting Program:	**MS Health Alert Network (MS HAN)**
Message Identifier:	MSHAN-20220713-00580-**UPD**
Program (HAN) Type:	**Health Alert**
Status (Type):	Actual ()
Message Type:	Alert
Reference:	MSHAN-00580
Severity:	Unknown
Acknowledgement:	No
Sensitive:	Not Sensitive
Message Expiration:	Undetermined
Urgency:	Undetermined
Delivery Time:	600 minutes

Definition of Alerting Vocabulary and Message Specification Settings

Originating Agency: A unique identifier for the agency originating the alert.

Alerting Program: The program sending the alert or engaging in alerts and communications using PHIN Communication and Alerting (PCA) as a vehicle for their delivery.

Message Identifier: A unique alert identifier that is generated upon alert activation (MSHAN-yyymmdd-hhmm-TTT **(ALT=Health Alert, ADV=Health Advisory, UPD=Health Update, MSG/INFO=Message/Info Service**).

Program (HAN) Type: Categories of Health Alert Messages**.**

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation; may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.

Health Info Service: Provides Message / Notification of general public health information; unlikely to require immediate action.

Status (Type):

Actual:	Communication or alert refers to a live event
Exercise:	Designated recipients must respond to the communication or alert
Test:	Communication or alert is related to a technical, system test and should be disregarded

Message Type:

Alert:	Indicates an original Alert
Update:	Indicates prior alert has been Updated and/or superseded
Cancel:	Indicates prior alert has been cancelled
Error:	Indicates prior alert has been retracted

Reference: For a communication or alert with a Message Type of "Update" or "Cancel", this attribute contains the unique Message Identifier of the original communication or alert being updated or cancelled. "n/a" = Not Applicable.

Severity:

Extreme:	Extraordinary threat to life or property
Severe:	Significant threat to life or property
Moderate:	Possible threat to life or property
Minor:	Minimal threat to life or property
Unknown:	Unknown threat to life or property

Acknowledgement: Indicates whether an acknowledgement on the part of the recipient is required to confirm that the alert was received, and the timeframe in which a response is required (Yes or No).

Sensitive:

Sensitive:	Indicates the alert contains sensitive content
Not Sensitive:	Indicates non-sensitive content

Message Expiration: Undetermined.

Urgency: Undetermined. Responsive action should be taken immediately.

Delivery Time: Indicates the timeframe for delivery of the alert (15, 60, 1440, 4320 minutes (.25, 1, 24, 72 hours)).