

Help Avoid Mishaps With Flu and COVID-19 Treatments

You'll hear questions about **how to treat COVID-19 and influenza**.

Expect your pharmacist to not immediately recommend an antiviral Rx with most healthy patients...and instead advise fluids, rest, etc.

But if an antiviral is needed, help keep patients safe.

COVID-19 meds. Nirmatrelvir/ritonavir (*Paxlovid*) will be used for most at-risk outpatients age 12 and up...within 5 days of symptom onset.

Nirmatrelvir/ritonavir still seems effective at preventing hospitalization and death...even with circulating variants.

For now, the government covers the med...but expect costs to shift to payers in 2024.

Continue to check strengths, sigs, and notes closely during order entry. Most patients will get the 300 mg/100 mg dose pack...and take 2 nirmatrelvir tabs plus 1 ritonavir tab bid for 5 days.

If needed, assist with entering meds into an interaction checker, such as COVID19-DrugInteractions.org...since they can be serious.

Expect remdesivir (*Veklury*) to be saved for patients who can't take nirmatrelvir/ritonavir. Remdesivir is for adults and kids down to 28 days old, but it's a daily infusion for 3 days and often isn't practical.

And oral molnupiravir (*Lagevrio*) will be a last resort. It's less effective than other options...and only for patients age 18 and up.

Flu meds. Oseltamivir (*Tamiflu*) or baloxavir (*Xofluza*) will be saved for NONsevere flu in outpatients with risks (diabetes, etc).

Expedite any payer or inventory issues. Oseltamivir or baloxavir reduces flu symptoms by about a day...only if started within 48 hours of symptom onset.

Know the differences. Baloxavir is 1 dose...causes less GI upset than oseltamivir...and can be used down to age 5. But baloxavir costs about \$150/dose...oseltamivir caps cost about \$40 for 5 days.

Listen for patients asking if flu antivirals are effective for COVID-19...and vice versa. They aren't...even though many flu and COVID-19 symptoms overlap. But both meds can be taken at the same time if patients have both infections.

Continue to encourage flu and COVID-19 vaccines...even in unvaccinated patients who've had either infection this season. Immunization can help prevent illness caused by other strains.

Compare other antivirals (*Relenza*, etc) for flu treatment and prevention in our resource, *Antivirals for Influenza*. Use our algorithm, *Outpatient COVID-19 Treatment Options*, for more tips about meds.

Key References:

- CDC. Interim Clinical Considerations for COVID-19 Treatment in Outpatients. October 4, 2023. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/outpatient-treatment-overview.html> (Accessed October 13, 2023.)
- NIH. COVID-19 Treatment Guidelines. Clinical Management of Adults. October 10, 2023. <https://www.covid19treatmentguidelines.nih.gov/management/clinical-management-of-adults/clinical->

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-CDC. Influenza Antiviral Medications: Summary for Clinicians. September 27, 2023.

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-Medication pricing by Elsevier, accessed Oct 2023.

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