

Break Down Barriers to Getting COVID-19 Meds

Many patients who may benefit from COVID-19 meds (*Paxlovid*, etc) aren't getting treatment.

COVID-19 is still leading to thousands of hospitalizations and hundreds of deaths per day in the US...but meds remain underutilized.

Continue to help identify patients who may qualify for treatment...and pull in your pharmacist to address misconceptions.

Outpatients are usually eligible if they have one or more risk factors for developing severe COVID-19, such as diabetes or obesity...regardless of vaccination status.

Be aware that the emergency use authorizations (EUAs) for *Paxlovid* (nirmatrelvir/ritonavir) and *Lagevrio* (molnupiravir) no longer require that patients have a positive COVID-19 test to get an Rx.

But testing is still a good idea...and your protocol may require it...to limit inappropriate med use.

Expect *Paxlovid* to be the go-to treatment for most at-risk outpatients age 12 and up. It still seems effective at preventing hospitalization and death...even with circulating variants.

Some patients worry about "COVID-19 rebound" with *Paxlovid*. But it can happen in any patient...with OR without treatment.

Another concern is interactions...but these can often be managed. If needed, help your pharmacist find guidance on handling an interaction with a resource, such as [COVID19-DrugInteractions.org](https://www.covid19-druginteractions.org).

Know how other options for outpatients with COVID-19 stack up.

For example, *Veklury* (remdesivir) seems similarly effective to *Paxlovid* and can be used in patients down to 28 days old. But it's an IV (intravenous) med given daily for 3 days at a healthcare facility.

And *Lagevrio* is for patients age 18 and up. But it'll be saved as a last resort...since it's the least effective med.

Speak up if you see *Paxlovid* or *Lagevrio* Rx's in will call for more than a day...these should be started ASAP within 5 days of symptom onset.

For now, clarify that these oral meds are no cost to patients.

But anticipate that payer coverage will vary when the COVID-19 health emergency ends in May.

Review our resource, [Outpatient COVID-19 Treatment Options](#).

Key References:

-<https://www.covid19treatmentguidelines.nih.gov/> (2-24-23)

-<https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/outpatient-treatment-overview.html> (2-24-23)

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