

Help Ensure Access to Paxlovid for COVID-19

Please see the FDA announcement authorizing pharmacists to prescribe Paxlovid with certain limitations.

You play a key role in **limiting treatment delays with Paxlovid (nirmatrelvir/ritonavir) for patients with COVID-19.**

Help HIGH-risk patients start within the 5-day window.

Dispensing. Any type of positive COVID-19 test is enough to qualify for *Paxlovid*, even a home test. And the med is still no cost to patients.

Keep in mind, you do NOT have to obtain an estimated glomerular filtration rate (eGFR). Treat *Paxlovid* as you would any other Rx.

But if you get *Paxlovid* Rx's for patients with an eGFR of 30 to 59 mL/min/1.73 m² and don't have the 150 mg dose pack, continue to discard one AM and PM tab of nirmatrelvir from each card in the 300 mg pack.

Educate that *Paxlovid* is usually well tolerated. But "*Paxlovid* mouth"...a bitter, metallic, or unusual taste...is common. Reassure that it resolves after treatment...and frequent liquids or hard candy may help.

Don't recommend a repeat course of *Paxlovid* for rare "COVID-19 rebound"...recurrent illness or a positive test within about a week of finishing. Advise 5 more days of isolation and a mask for 10 days.

Interactions. Ritonavir is a strong CYP3A4 and P-glycoprotein inhibitor. Use a checker, such as COVID19-DrugInteractions.org...especially if your pharmacy software doesn't include *Paxlovid* yet.

For example, don't stop or decrease oral or inhaled steroids...despite labeled warnings that adding *Paxlovid* may increase risk of adrenal suppression. Five days of the combo isn't likely a concern.

But recommend a different COVID-19 med (molnupiravir, etc) for patients using inhalers that contain salmeterol (*Advair*, etc)...*Paxlovid* may increase risk of CV effects (QT prolongation, tachycardia, etc).

Work with prescribers on direct oral anticoagulant interactions...based on the DOAC, dose, and indication. For instance, suggest reducing *Eliquis* (apixaban) for atrial fib to 2.5 mg bid during *Paxlovid* and for 3 days after. But avoid *Paxlovid* in patients on *Xarelto* (rivaroxaban).

Explain that *Paxlovid* may DECREASE efficacy of clopidogrel...ritonavir inhibits the conversion of clopidogrel to its active form.

Consider a different COVID-19 med for patients at high clot risk...such as coronary stent placement less than 6 weeks ago. But don't generally worry about this interaction for other patients.

Go to our resource, *Treatments of Interest for COVID-19*, for more interaction checkers...and the role of other meds.

Key References:

- <https://www.fda.gov/media/155050/download> (6-21-22)
- <https://www.covid19-druginteractions.org/checker> (6-21-22)
- <https://www.idsociety.org/globalassets/idsa/practice-guidelines/covid-19/treatment/idsa-paxlovid-drug-interactions-resource-5-6-22-v1.1.pdf> (6-21-22)
- https://emergency.cdc.gov/han/2022/pdf/CDC_HAN_467.pdf (6-21-22)

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