

Barriers and vaccination remain the best means of preventing COVID-19 infection and complications. However, some patients with a hematological cancer are unlikely to have an effective immune response. Passive immunity through SARS-CoV-2 neutralizing antibodies is one way to provide additional protection to individuals with compromised immunity or those at high risk of COVID-19 complications.

Pre-exposure prophylaxis of COVID-19 in people who have been recently

### **Evusheld** (tixagevimab and cilgavimab)

**Authorized for** 

	exposed to SARS-CoV-2.	
Adults and adolescents (≥12 years old and weighing at least 40 kg)	<ul> <li>Who are not currently infected with COVID-19 and have not recently been exposed to someone with COVID-19:</li> <li>Who have compromised immunity due to an underlying medical condition or immunosuppressive therapy and who are unlikely to have an effective immune response to vaccination OR</li> <li>For whom COVID-19 vaccination is not recommended.</li> </ul>	
Activity against Omicron	Effective against most variants (Alpha, Beta, Delta, Gamma, Omicron BA.2).  Decreased neutralizing activity against Omicron subvariants BA.1 and BA.1.1.	
Administration	300 mg: two separate and sequential 1.5-mL injections, preferably in each of the gluteal muscles or, alternatively, in the thigh.  * Consider increasing the dose to 600 mg in regions where the BA.1 and BA.1.1 subvariants are present.  Monitoring: min. 30 minutes  Interaction with COVID-19 vaccines has not been studied and cannot be excluded. It is recommended to wait 14 days after the most recent vaccine dose.	
Manufacturer	AstraZeneca https://pdf.hres.ca/dpd_pm/00065403.PDF	





# Sotrovimab

Authorized for	Treatment for a person with COVID-19 (confirmed by NAAT or antigen test) with mild or moderate symptoms for five days or less and not hospitalized due to COVID-19.
Adults and adolescents (≥12 years old and weighing at least 40 kg)	Who are at high risk of the disease progressing to a form that requires hospitalization and/or results in death.
Activity against Omicron	Effective against most variants (Alpha, Beta, Delta, Gamma, Omicron BA. 1 and BA1.1).  Decreased neutralizing activity against Omicron subvariants BA.2 and BA.2.12.1, BA.4 and BA.5.
Administration	500 mg, administered as a single intravenous infusion over 60 minutes.  Monitoring: one hour after the infusion.  * Consider increasing the dose to 1 g in regions where the BA.2, BA.2.12.1, BA.4 and BA.5 subvariants are present.

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Baml	lanivimat	)

GlaxoSmithKline



Authorized for	Treatment for a person with COVID-19 (confirmed by NAAT or antigen test) with mild or moderate symptoms for 10 days or less and not hospitalized due to COVID-19.
Adults and adolescents (≥12 years old and weighing at least 40 kg)	Who are at high risk of the disease progressing to a form that requires hospitalization and/or results in death.
Activity against Omicron	Not very effective against most Omicron subvariants, so it is not used.
Administration	700 mg, administered as a single intravenous infusion over 60 minutes.  Monitoring: min. one hour after the infusion.
Manufacturer	Eli Lilly https://pdf.hres.ca/dpd_pm/00060539.PDF

https://pdf.hres.ca/dpd\_pm/00062881.PDF

Manufacturer

#### **Casirivimab and imdevimab**

Authorized for	Treatment for a person with COVID-19 (confirmed by NAAT or antigen test) with mild or moderate symptoms and not hospitalized due to COVID-19.
Adults and adolescents (≥12 years old and weighing at least 40 kg)	Who are at high risk of the disease progressing to a form that requires hospitalization and/or results in death.
Activity against Omicron	Not very effective against most Omicron subvariants, so it is not used.
Administration	1,200 mg casirivimab + 1,200 mg imdevimab, administered together in a single intravenous infusion over 60 minutes.  Monitoring: min. one hour after the infusion.
Manufacturer	Hoffmann-La Roche https://pdf.hres.ca/dpd_pm/00066206.PDF





## **Outpatient antiviral treatments for COVID-19**

Antivirals decrease the amount of virus in the body by blocking viral replication. This helps to reduce the severity of COVID-19 infection and shorten the duration of the illness.

### Paxlovid (nirmaltrelvir and ritonavir)

Authorized for	Treatment for a person with COVID-19 (confirmed by NAAT or antigen test) with mild or moderate symptoms for five days or less and not hospitalized due to COVID-19.
Adults	Who are at high risk of the disease progressing to a form that requires hospitalization and/or results in death.
Activity against Omicron	Effective against most variants, including Omicron.
Administration	300 mg nirmatrelvir (two 150-mg tablets) and 100 mg ritonavir PO taken twice a day with or without food × five days.  * Adjustment for kidney impairment eGFR ≥ 30 mL/min and < 60 mL/min = 150 mg of nirmatrelvir and 100 mg of ritonavir twice a day × five days.  Monitor interactions with other drugs.
Manufacturer	Pfizer https://pdf.hres.ca/dpd_pm/00066256.PDF



## **Veklury** (remdesivir)

Authorized for	Treatment for a person with COVID-19 (confirmed by NAAT or antigen test) with mild or moderate symptoms for seven days or less and not hospitalized due to COVID-19.
Adults and adolescents (≥12 years old and weighing at least 40 kg)	Who are at high risk of the disease progressing to a form that requires hospitalization and/or results in death.
Activity against Omicron	Effective against most variants, including Omicron.
Administration	Remdesivir 200 mg IV D1 then 100 mg IV D2-3 over 30 to 120 minutes. Not to be administered if CrCl $<$ 30 ml/min. Not to be administered if ALT $\geq$ 5 ULN.
Manufacturer	Gilead Sciences https://pdf.hres.ca/dpd_pm/00065539.PDF

References: 1. Paxlovid Product Monograph, last updated on June 13, 202. 2. Veklury Product Monograph, last updated on April 22, 2022. **3.** INESS https://www.inesss.qc.ca/covid-19/traitements-specifiques-a-la-covid-19.html.

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## **PHARMACIE TORANIET HADDAD**





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