Therapeutic Treatments for Covid-19

New Treatments

Newly authorized treatments for COVID-19 are becoming available to help people who are susceptible to developing severe coronavirus disease. We want to help you understand these new medications so you can determine if they might be helpful for you or someone you know.

Two Types

There are two main types of treatments for COVID-19: **antivirals and monoclonal antibodies**. They each work differently and are given at slightly different stages of infection or are given *before exposure to COVID-19* to people who cannot receive the vaccine or are immunocompromised. Both types of treatments are intended for people with a high risk for progression to severe COVID-19 disease, including hospitalization or death.

- Antivirals are medicines that fight COVID-19 directly by changing parts of the virus so it cannot replicate properly in your body.[1]
- Monoclonal antibodies, also called mAbs, are man-made antibodies that help your immune system block the virus from entering the cells in your body.[2]

Time is of the essence

To be most effective, both mAbs and antivirals need to be started shortly after symptoms of COVID-19 begin, or even before exposure. Antivirals need to be started within five days or seven days after symptoms start and monoclonal antibodies within seven days.[3]

Antiviral Treatments

Several antivirals have been authorized by the Federal Drug Administration (FDA) for use in different situations including: out-patient oral medications and infusions given to patients in hospital or clinics. Each has specific requirements regarding to whom they can and cannot be prescribed. Current COVID-19 antivirals include:

Paxlovid – for non-hospitalized patients 12 years and older weighing at least 88 pounds with mild to moderate disease. These pills are taken twice a day for five days and must be started within five days of the start of symptoms.

Molnupiravir – for non-hospitalized patients 18 years and older weighing at least 88 pounds with mild to moderate disease. These pills are taken every 12 hours for five days and must be started within five days of the start of symptoms.

Remdesivir – for hospitalized or non-hospitalized patients 12 years and older weighing at least 88 pounds. Under certain circumstances, Remdesivir may also be prescribed to patients under 12 years of age. This is administered by intravenous infusion over several days in a hospital or outpatient clinic setting. Must be started within seven days of the start of symptoms.

[1] https://combatcovid.hhs.gov/what-are-oral-antivirals
[2] https://combatcovid.hhs.gov/what-are-monoclonal-antibodies
[3] https://www.covid19treatmentguidelines.nih.gov/therapies/statement-on-bebtelovimab/

Monoclonal Antibody Treatments

There are two types of monoclonal antibodies available; those for the treatment of mild to moderate COVID-19 disease and those for the prevention of COVID-19 disease in immunocompromised people.

Monoclonal antibodies for the treatment of COVID-19 are given as an infusion in a clinic setting and must be started within seven days of the onset of symptoms.

Sotrovimab – for patients 12 years and older weighing at least 88 pounds with positive results of coronavirus testing, and who are at high risk for progression to severe COVID-19, including hospitalization or death.
Bebtelovimab – for patients 12 years and older weighing at least 88 pounds and who are at high risk for progression to severe COVID-19, including hospitalization or death, and for whom alternative COVID-19 treatment options approved or authorized by the FDA are not available or clinically appropriate.

Monoclonal Antibodies for the prevention of COVID-19:

Evusheld – for moderately or severely immunocompromised people (due to a medical condition or are receiving medications that suppress the immune system), 12 years and older weighing at least 88 pounds **and**:

- Who are not currently infected with the coronavirus and who have not had a known recent exposure to an individual infected with the coronavirus **and**
- Who may not mount an adequate immune response to COVID-19 vaccination **or**
- For whom vaccination with any COVID-19 vaccine is not recommended due to a history of severe adverse reaction to a COVID-19 vaccine(s) and/or COVID-19 vaccine component(s).[4]

Evusheld is given in two injections, one right after another, in your doctor's office. To be most effective, it is administered every few months.[5]

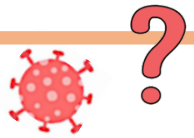
How do I know if I'm eligible for mAbs or antivirals?

Because these medications are currently in short supply, they are usually reserved for people who are at high risk for getting very sick with COVID-19. This includes elders, pregnant people, and people with certain conditions, such as diabetes, cardiovascular disease, or chronic kidney disease, and others.

Your primary care provider or clinic can determine if you are a good candidate for one of these medications. Several factors will be considered including; your age, health status, medications you are taking, and the availability of either the antivirals or mAbs.

Are there any side-effects to antivirals and mAbs?

Side effects to both types of medications have been reported. The most common antiviral side-effects are dizziness, nausea, diarrhea, impaired sense of taste and muscle aches. Antivirals may also interfere with other medications. Side-effects with mAbs include: fever, tiredness, confusion, weakness, nausea, and difficulty breathing.



If I receive an antiviral or mAbs, should I still be vaccinated?

YES! Antivirals and mAbs are short-term treatments. When the treatment fades away, so does your protection. Vaccines teach your body how to fight COVID-19.[6]

Research has shown that unvaccinated people are more than twice as likely to get re-infected with COVID-19[7] and as much as 23 times more likely to be hospitalized compared to those who are fully vaccinated.[8]

If you are eligible, your best protection is to get your vaccine and booster shots.

[4] https://www.covid19treatmentguidelines.nih.gov/about-the-guidelines/whats-new/
[5] https://www.fda.gov/drugs/drug-safety-and-availability/fda-authorizes-revisions-evusheld-dosing
[6] https://www.nebraskamed.com/COVID/covid-19-treatments-what-are-the-options-and-are-they-better-than-vaccines
[7] https://www.cdc.gov/mmwr/volumes/70/wr/mm7032e1.htm?s_cid=mm7032e1_w
[8] https://www.cdc.gov/mmwr/volumes/71/wr/mm7105e1.htm?s_cid=mm7105e1_w