ASPR Administration for Strategic
Preparedness & Response

Information Sheet – COVID-19 Treatments: Key Messages for Long-Term Care Facilities

COVID-19 cases are increasing. Staying up to date with COVID-19 vaccines and timely access to treatment are the best ways to reduce the risk of hospitalization and death due to the illness.

COVID-19 Treatments are safe, effective, and widely available.

- There is strong scientific evidence that antiviral treatment of outpatients at risk for severe COVID-19 reduces their risk of hospitalization and death.
- Authorized and approved COVID-19 treatments are widely available. There are no supply constraints limiting patients from being treated.
- Based on preliminary analysis, these treatments are expected to be active against all currently circulating variants.

Treatments should be considered for any patient over the age of 50 or with a high-risk health condition.

- Even if vaccinated, patients are more likely than others to get very sick from COVID if:
  - They are 50 years of age or older
  - They have one or more health issues, such as heart, lung, or kidney disease; being overweight; diabetes; severe asthma; or some types of disabilities
  - They have a compromised or weakened immune system
- In short, anyone over the age of 50 and anyone with a high-risk health condition should be prescribed COVID-19 treatment as clinically appropriate.

Treatments must be started early, even if symptoms are mild.

- Treatments are most effective when started early, even if symptoms are mild.
- In fact, treatments must be started within 5 days of symptom onset for oral medications (Paxlovid and Lagevrio) and 7 days of symptom onset for IV medication (Veklury).
- Providers should discuss a COVID-19 Action Plan in advance with patients, in case of infection, including the optimal medication choice and how to access the medication.

The antiviral oral pill Paxlovid (ritonavir-boosted nirmatrelvir), along with Veklury (remdesivir), are the preferred treatments for eligible patients.

- Paxlovid (ritonavir-boosted nirmatrelvir) is the preferred oral antiviral taken twice daily for 5 days.

  - Paxlovid is not recommended in patients with severe renal (eGFR < 30) or hepatic impairment. Dose reduction for patients with moderate renal impairment (eGFR $\geq$30-<60) is recommended.

  - For all eligible patients, drug interactions need to be assessed and certain medications may need dose adjustments. (Helpful resources include the FDA checklist for Paxlovid Prescribing and the Liverpool drug interaction checker).

  - Preliminary evaluation of drug-drug interactions can be done in advance, before a positive test, but should be rechecked at the time of treatment initiation.

- For patients for whom Paxlovid is not appropriate, Veklury (remdesivir) IV infused once a day for 3 days is also a preferred treatment.
    - Veklury is not recommended for use in patients with severe renal (eGFR < 30) or hepatic impairment.
- See the FDA's [Fact Sheet for Healthcare Providers](#) for detailed information about Paxlovid and the [U.S. Prescribing Information](#) for Veklury.

Lagevrio (molnupiravir) is an alternative oral antiviral for patients for whom neither Paxlovid nor Veklury are clinically appropriate or feasible.

- Lagevrio is taken twice daily for 5 days.
- Lagevrio is not recommended in patients who may be pregnant.
- There are no known drug interactions with Lagevrio based on limited available data.
- See the FDA's [Fact Sheet for Healthcare Providers](#) for detailed information about Lagevrio.

Long-Term Care Facilities should ensure timely access to effective COVID-19 treatments for all eligible patients, including through pre-positioning the medications directly at facilities:

- The oral antivirals Paxlovid and Lagevrio are currently being distributed for free by the US Government; contact your LTC serving pharmacy or covid19therapeutics@hhs.gov for access.
- The oral antivirals can be positioned within a Long-term Care or Skilled Nursing facility, following local regulations, so long as they are only dispensed to patients once a prescription is entered.
- Veklury is available commercially for outpatient use through the distributors Cardinal [1-855- 855-0708 / GMB-SPD-CSORDERENTRY@cardinalhealth.com] and Amerisource Bergen [1-800-746-6273 / C19therapies@AmerisourceBergen.com]. LTC and SNF providers can access this product directly from the distributor or through their servicing pharmacy.

Resources:

- [Decision tree](#) https://aspr.hhs.gov/COVID-19/Therapeutics/Documents/COVID-Therapeutics-Decision-Aid.pdf

- [FDA checklist for Paxlovid Prescribing](#) https://www.fda.gov/media/158165/download

- [Liverpool drug interaction checker](#) https://www.covid19-druginteractions.org/checker

- [Paxlovid information one pager](#) https://aspr.hhs.gov/COVID-19/Therapeutics/Products/Paxlovid/Documents/paxlovid-information-sheet.pdf

- [Lagevrio information one pager](#) https://aspr.hhs.gov/COVID-19/Therapeutics/Products/Lagevrio/Documents/Lagevrio-Information-Sheet.pdf

- [Side by side](#) https://aspr.hhs.gov/COVID-19/Therapeutics/Documents/side-by-side-overview.pdf *update coming soon*

- [COVID-19 Outpatient Therapeutics Locator tool](#) https://covid-19-therapeutics-locator-dhhs.hub.arcgis.com/

- [NIH COVID-19 Treatment Guidelines](#) https://www.covid19treatmentguidelines.nih.gov/

- [CDC Underlying Medical Conditions Eligibility website](#) https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/underlyingconditions.html

- [COVID-19 Personal Action Plan](#) https://www.cdc.gov/coronavirus/2019-ncov/downloads/332440-a_fs_covid_plan_final.pdf

- [Lagevrio FDA Fact Sheet for Healthcare Providers](#) https://www.fda.gov/media/155054/download

- [Paxlovid FDA Fact Sheet for Healthcare Providers](#) https://www.fda.gov/media/155050/download

- [Veklury U.S. Prescribing Information](#) https://www.gilead.com/-/media/files/pdfs/medicines/covid-19/veklury/veklury_pi.pdf