

## COVID-19 Outpatient Management: Test to Treat and Beyond

### Session Resources:

- Post session resources (podcast of webinar, presentation slides, responses to unanswered questions) can be found on our website next week:
  - <https://med.emory.edu/departments/medicine/divisions/infectious-diseases/serious-communicable-diseases-program/covid-19-resources/access-past-echo-recordings.html>
- Register for upcoming sessions on our website:
  - <https://med.emory.edu/departments/medicine/divisions/infectious-diseases/serious-communicable-diseases-program/covid-19-resources/echo-upcoming-session.html>
- HHS Region IV Emory University SCDP:
  - <https://med.emory.edu/departments/medicine/divisions/infectious-diseases/serious-communicable-diseases-program/covid-19-resources/index.html>
- NETEC:
  - <https://netec.org/>
- CDC – Long COVID or Post-COVID Conditions:
  - <https://www.cdc.gov/coronavirus/2019-ncov/long-term-effects/index.html>
- Survivor Corps:
  - <https://www.survivorcorps.com/>
- Researching COVID to Enhance RECOVERY (RECOVER) - Research Opportunities:
  - Have questions about the long-term effects of COVID-19? You are not alone.
  - Join us as we seek answers to understand, prevent, and treat the long-term effects after initial infection.
  - This new resource is now available in the Atlanta area and is currently enrolling patients
  - For more information on enrollment, please contact us at the link below:
    - <https://med.emory.edu/departments/medicine/divisions/infectious-diseases/recover-atlanta/index.html>
- National Institute of Health (NIH) COVID-19 Treatment Guidelines:
  - <https://www.covid19treatmentguidelines.nih.gov/therapies/antiviral-therapy/ritonavir-boosted-nirmatrelvir--paxlovid/>
- Management of Drug Interactions with Nirmatrelvir/Ritonavir (Paxlovid®): Resource for Clinicians
  - <https://www.idsociety.org/practice-guideline/covid-19-guideline-treatment-and-management/management-of-drug-interactions-with-nirmatrelvirritonavir-paxlovid/>
- FDA PAXLOVID Fact Sheet
  - <https://www.fda.gov/media/155050/download>
- CDC - COVID-19 Rebound After Paxlovid Treatment
  - <https://emergency.cdc.gov/han/2022/han00467.asp>

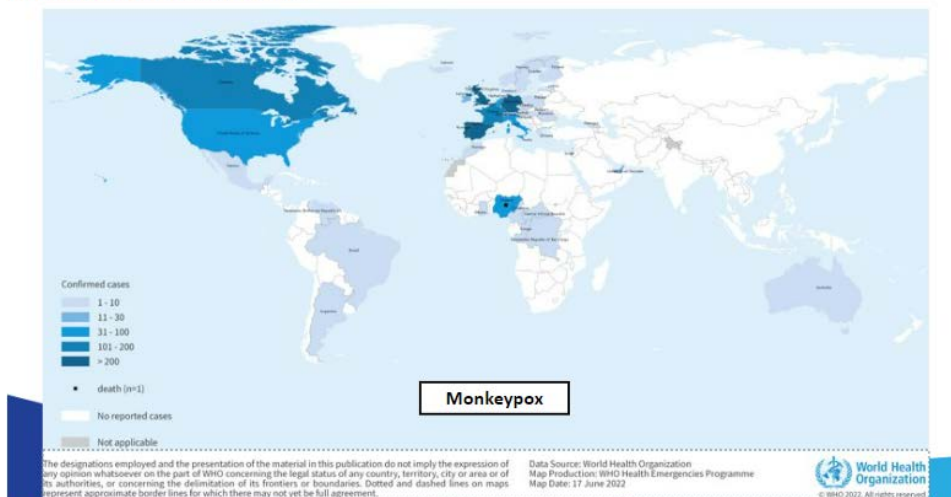
### Situation Report:

**Situation Report 22 June 2022**



- This past week the Nigeria Center for Disease Control reported 782 confirmed cases of Lassa fever in country for the year with at least 155 fatalities. This marks a case fatality rate of 19.8% and poses significant concern as the rise is amidst some of the most stringent public health measures adopted.

**Situation Report 22 June 2022**



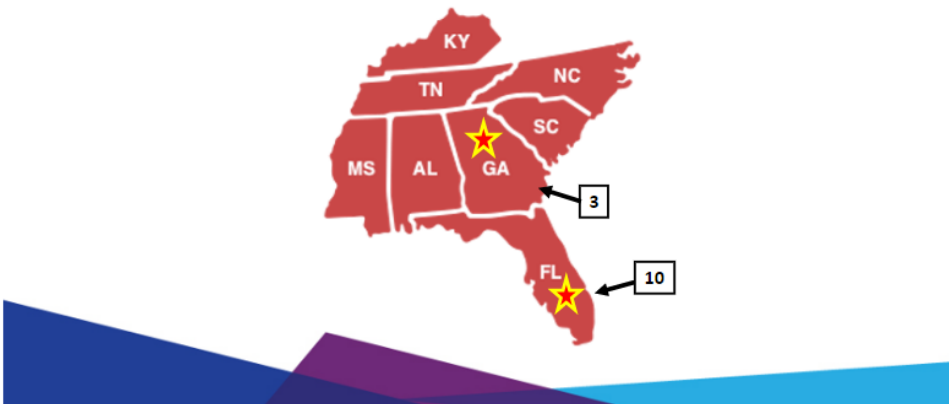
- Now, to Monkeypox. As of June 19, there are now over 2500 confirmed cases in 42 countries. Again, close interpersonal contact including sexual relations appear to be the most likely means of transmission outside of endemic regions. Case counts are expected to dramatically climb as undetected transmission is occurring, and importantly, to reflect the unified response that is required the WHO no longer makes a distinction between endemic and non-endemic regions.

*Situation Report 22 June 2022*



- In the US, there are now at least 115 confirmed cases in every region, except 7.

*Situation Report 22 June 2022*



- In region 4 there have been 6 new confirmed case this past week - 1 in Georgia and 5 more in Florida, bringing the regions total to 13. General risk to the public remains low.
- This concludes the Region 4 special pathogens of concern sitrep for this week of June.

**Additional Discussion:**

- Misuse of Nirmatrelvir/Ritonavir (PAXLOVID) -
  - What is PAXLOVID?
    - The National Institute of Health (NIH) defines this drug as an orally bioavailable protease inhibitor that is active against M<sup>PRO</sup>, a viral protease that plays an essential role in viral replication by cleaving the 2 viral polyproteins (2022).
    - This drug demonstrates antiviral activity against all coronaviruses that are known to infect humans.

- What does the Emergency Use Authorization (EUA) declare about this drug? (Link to full fact sheet can be found under “session resources” above.)
  - The U.S. Food and Drug Administration has issued an EUA for the emergency use of the unapproved PAXLOVID for the treatment of mild-to-moderate coronavirus disease 2019 (COVID-19) in adults and pediatric patients (12 years of age and older weighing at least 40 kg) with positive results of direct severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) viral testing, and who are at high risk for progression to severe COVID-19, including hospitalization or death.
  - What are the limitations of authorized use?
    - PAXLOVID is not authorized for initiation of treatment in patients requiring hospitalization due to severe or critical COVID-19
    - PAXLOVID is not authorized for pre-exposure or post-exposure prophylaxis for prevention of COVID-19
    - PAXLOVID is not authorized for use longer than 5 consecutive days
- PAXLOVID Rebound (CDC, 2022)
  - COVID-19 rebound has been reported to occur between 2 and 8 days after initial recovery and is characterized by a recurrence of COVID-19 symptoms or a new positive viral test after having tested negative
  - A brief return of symptoms may be part of the natural history of SARS-CoV-2 (the virus that causes COVID-19) infection in some persons, independent of treatment with Paxlovid and regardless of vaccination status
  - Limited information currently available from case reports suggests that persons treated with Paxlovid who experience COVID-19 rebound have had mild illness; there are no reports of severe disease
  - There is currently no evidence that additional treatment is needed with Paxlovid or other anti-SARS-CoV-2 therapies in cases where COVID-19 rebound is suspected
  - Paxlovid continues to be recommended for early-stage treatment of mild to moderate COVID-19 among persons at high risk for progression to severe disease

**Session Recap** (view our website for full presentation slides – link can be found above):

- Didactic Presentation: COVID-19 Outpatient Management: Test to Treat Approach & Moving Beyond
  - *Test to treat initiative*
    - Per the Office of the Assistant Secretary for Preparedness & Response (ASPR), a newly launched nationwide Test to Treat initiative gives individuals access to COVID-19 oral antivirals.
    - In this program, individuals can receive COVID-19 testing, receive a prescription from a health care provider (if deemed appropriate), and have their prescription filled all in one location.
    - These “One-Stop Test to Treat” sites are available in many locations in Georgia, specifically around urban areas of the state.

- Due to the strict treatment timeframe for COVID-19 oral antivirals, a “test to treat” model works best to accomplish improved access.
    - Federal pharmacy retailers partners, such as Walmart and Walgreens, have specifically enrolled pharmacies with attached clinics for this very reason.
    - However, many rural counties do not have these types of pharmacies located in the area, and there are fewer doctor’s offices and clinics able to provide the evaluation and prescription component needed.
  - *Rural Telemedicine Access*
    - Potential benefits regarding telemedicine access for prescribing of COVID-19 oral antivirals include but is not limited to the following:
      - easy self-administration of medication
      - lower medical expenses
      - reduced shortages of resources (e.g., monoclonal antibody treatment, ventilators, personal protective equipment)
      - lower hospitalization rates
      - shorter disease duration, and
      - reduction of missed worked days due to illness
- Didactic Presentation: Long COVID: What Do We Know & How Can We Manage It?
  - *Definition*
    - Post-acute sequelae of (SARS-CoV-2 Infection (COVID-19): PASC
    - “[a] condition that occurs in individuals with a history of probable or confirmed SARS CoV-2 infection, usually 3 months from the onset of COVID-19 symptoms and that last for at least 2 months and cannot be explained by an alternative diagnosis.
    - Commons symptoms: fatigue, shortness of breath, cognitive dysfunction but also others and generally have an impact on everyday functioning. Symptoms may be new onset following initial recovery from an acute COVI-19 episode or persist from the initial illness. Symptoms may also fluctuate or relapse over time.
  - *Epidemiology*
    - Approximately 10-30% of all patients have prolonged symptoms lasting at least 12 mo. (BMU, 2020)
    - Approximately 6/10 (60%) of all patients have at least one symptom a year later. (ESCMID, 2022)
    - Approximately 25-40% of people hospitalized with COVID-19 develop persistent symptoms. (ESCMID, 2022)
    - *10-93% of hospitalized COVID-19 survivors have prolonged symptoms lasting at least 3 months post-discharge*
  - *Causes/Patterns*
    - SARS-CoV-2 directly damages cells
      - some people with COVID-19 never recover completely
    - Some people have symptoms related to long-term hospitalization
      - symptoms are very similar to post-critical illness syndrome/post-intensive care unit syndrome
    - Symptoms appear after recovery
  - *Important Points*
    - Severity requires attention sooner
    - No organ system is spared

- PASC affects children too
- Women are affected more than men
- *Symptom Specific Treatments*
  - Fatigue: Pacing, Planning, Prioritizing, Positioning; physical exercise program
  - Respiratory symptoms: breathing exercises, ICS, SABA for bronchospasm; steroids if needed
  - Cardiac symptoms: cardiac rehab, specific medications
  - Neurologic symptoms: memory exercises, referrals