

# Clarify Remdesivir and Convalescent Plasma Use for COVID-19

You'll hear buzz about **emergency use authorizations (EUAs) for remdesivir and convalescent plasma to treat COVID-19**.

**Remdesivir (Veklury)**. FDA is expanding the EUA to include ALL hospitalized patients with suspected or confirmed COVID-19.

But there currently isn't enough evidence to be certain of a benefit in nonsevere patients...and a 5-day course costs over \$3,000.

For now, continue to consider remdesivir in COVID-19 patients requiring supplemental oxygen...to shorten recovery by a few days.

Think about prioritizing oxygen-requiring patients who may benefit most...those NOT yet on high-flow oxygen, mechanical ventilation, or extracorporeal membrane oxygenation (ECMO).

Keep in mind, there's no good evidence, so far, that remdesivir decreases mortality.

**Convalescent plasma**. A new EUA allows use in any hospitalized COVID-19 patient...and should provide hospitals easier access.

You may hear reports in the media that convalescent plasma decreases mortality by 35%. But this is misleading.

Explain that this is based on a comparison of convalescent plasma with high antibody titers to low titers...not to other COVID-19 treatments or placebo.

And point out that this is a RELATIVE reduction...ABSOLUTE risk reduction is about 5%. Also clarify that this is based on observational data that aren't peer reviewed yet.

Educate that it's too soon to say if high-titer convalescent plasma improves outcomes over your current treatment protocols.

Generally save convalescent plasma use for clinical trials. Be aware, enrollment varies. For example, some include any hospitalized COVID-19 patient...others limit to those on supplemental oxygen.

If used outside a trial, give patients the EUA fact sheet. Explain that risks seem similar to other plasma infusions...based on use in over 70,000 patients so far.

See our chart, *Treatments of Interest for COVID-19*, for more on limitations of remdesivir data in nonsevere patients...EUA specifics...and for updated evidence to further support steroid use.

## Key References:

-JAMA 2020;324(11):1048-57

-medRxiv Published online Aug 12, 2020; doi:10.1101/2020.08.12.20169359

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-[www.covid19treatmentguidelines.nih.gov](http://www.covid19treatmentguidelines.nih.gov) (9-25-20)

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Hospital Pharmacist's Letter. October 2020, No. 361022

Cite this document as follows: Article, Clarify Remdesivir and Convalescent Plasma Use for COVID-19, Hospital Pharmacist's Letter, October 2020

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