OCFP SUMMARY OF ONTARIO HEALTH GUIDANCE FOR PRIMARY CARE PROVIDERS – ACCESS TO SOTROVIMAB AND PAXLOVID FOR OUTPATIENT THERAPIES FOR COVID-19

On January 31, 2022, Ontario Health issued guidance to primary care providers on accessing two outpatient COVID-19 therapies – the **monoclonal antibody 'sotrovimab'** and the **oral antiviral 'Paxlovid'** – for patients at higher risk of severe outcomes from COVID-19 infection. Below are key steps for family physicians as outlined in the guidance. [Note from OCFP: Information on other outpatient therapeutics is available in the COVID-19 Science Advisory Table's *Therapeutic Management of Adult Patients with COVID-19*.]

◆ **1. IDENTIFY AND ENGAGE PROACTIVELY WITH YOUR HIGHER-RISK PATIENTS**

After symptom onset, there is a window of seven days for administering sotrovimab and five days for Paxlovid. Counsel your patients who are at higher risk to reach out to you or another healthcare provider about possible therapies and monitoring if they develop symptoms. You could do so during appointments, by phone or email, or by a message on your practice's website [Note from OCFP: A template script here]. Individuals at higher risk are in these groups:

- immunocompromised individuals 18 and older regardless of vaccine status
- unvaccinated individuals aged 60 and older
- unvaccinated First Nation, Inuit and Métis individuals aged 50 and older
- unvaccinated individuals aged 50 and older with one or more risk factors

◆ **2. PRIORITIZE APPOINTMENTS FOR PATIENTS WHO MAY BE ELIGIBLE FOR THERAPEUTICS; DIRECT TO A COVID-19 CLINICAL ASSESSMENT CENTRE AS NEEDED**

Make every effort to connect with your higher-risk patient within 24 hours of the patient seeking support; if not possible, direct the patient to book an appointment at a COVID-19 clinical assessment centre (CAC), preferably one of the 15 CACs distributing Paxlovid.

◆ **3. ASSESS AND DETERMINE APPROPRIATE TREATMENT COURSE WITH PATIENT, CONSIDER LOCAL AVAILABILITY OF THERAPIES**

Check local availability of therapeutics: As of late January 2022, the supply of sotrovimab is more limited than that of Paxlovid. While the guidance focuses on sotrovimab and Paxlovid, fluvoxamine and budesonide may also be considered if sotrovimab and Paxlovid are not appropriate or not available. If you are considering sotrovimab, contact the monoclonal therapy clinic to confirm availability. See locations and contact information on this referral form. Note that sotrovimab may be administered in local hospitals in the **Ontario Health North** region – contact the CAC to arrange testing and reach out to the hospital to access treatment if appropriate and available.

Understand patient eligibility and contraindications: For Paxlovid especially, there are many drug-drug interactions that may lead to potentially serious and/or life-threatening reactions due to the effects of ritonavir on the hepatic mentalism of certain drugs. For full details on interactions and contraindications: product monographs for [sotrovimab](#) and [Paxlovid.](#) [Note from OCFP: See also information [from CEP on recommended drugs](#) and from the Science Advisory Table: [Nirmatrelvir/Ritonavir (Paxlovid): What Prescribers and Pharmacists Need to Know](#)]

◆ 4. UNDERSTAND THE REQUIRED TESTING AND REFERRAL PROCESSES

Patients must have a positive COVID-19 test result (PCR or ID NOW or **rapid antigen test administered by a healthcare professional**) to receive sotrovimab or Paxlovid. The process for referral may differ locally by CAC, so contact your local CAC to understand its referral process. General recommendations for testing and referral:

Sotrovimab

o Available at seven monoclonal therapy clinics across the province – see [referral form](#). Contact your local clinic to confirm supply before referring a patient; refer by faxing or emailing the referral form.

o Ensure patient is tested and has test results as quickly as possible**.** If you cannot administer in office, direct the patient to book at a CAC (or local hospital if no CAC). The CAC can assess, test and refer the patient to a monoclonal therapy clinic if appropriate and as available.

o Therapy usually provided on an outpatient basis (Ontario Health North region, see information above). For patient who cannot travel to receive sotrovimab, consider Paxlovid.

Paxlovid

o Distributed at 15 sites in Ontario, most associated with CACs. [Contact the site](#) to understand its referral process.

o If patient is unable to travel to a site that distributes Paxlovid, direct them to a more local CAC which will work with other CACs to provide Paxlovid on an individual basis for eligible patients.

o Ensure patient is tested and has test results as quickly as possible**.** If you cannot administer test in office, refer the patient to a CAC, preferably one that associated with one of the 15 sites distributing Paxlovid.

o Given serious drug-drug interactions, consultation with a pharmacist is recommended to get a complete medical and natural health product list from the patient prior to prescribing Paxlovid. Medication reconciliation will be completed at CAC (or hospital or other supporting location).

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* Preferred order of testing options to ensure results are available as quickly as possible:

- ID NOW or other rapid molecular test administered by a healthcare professional
- A rapid antigen test administered by a healthcare professional, with concurrent lab-based PCR if the rapid antigen test is negative
- A lab-based PCR test

◆ 5. FOLLOW UP

Local arrangements will determine follow-up after treatment with sotrovimab or Paxlovid. Patients must be monitored, including for drug interactions and side effects from Paxlovid – contact the site that distributed Paxlovid to your patient for details. Tool from Hamilton Family Medicine: [Assessment, monitoring and management of COVID-19: Monitoring and follow-up](), (Tab 6) for primary care providers monitoring their patients at home.

Follow up may include:

- Back to primary care for ongoing monitoring through [COVID@Home]()
- Remote COVID-19 monitoring programs or virtual care