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Medicines supply disruption alert - Remdesivir for patients hospitalised with COVID-19

2 October 2020

An interim clinical commissioning policy has been in place across the UK since 3 July 2020, defining routine access to remdesivir in the treatment of COVID-19 in adults and children aged 12 years or older. However, due to increased demand against available supply, clinicians are now asked to apply the full eligibility criteria as set out below.

Acute Provider Trusts / Health Boards are asked to take the following immediate steps to support the maintenance of continued supply over the coming weeks:

- 1. Undertake a stocktake of vials of remdesivir and minimise stock held at ward level. Share the stock position with the trust / hospital and regional procurement pharmacy lead / chief pharmacist. A percentage of stock will be held centrally to support allocation to areas of greatest need, using the principles of mutual aid. This will cover the UK, Crown Dependencies and Overseas Territories.
- 2. Only order stock where the regional procurement pharmacy lead has advised that there is a confirmed allocation.
- 3. Ensure only patients with COVID infection are treated with remdesivir. Patients should normally have a confirmed positive polymerase chain reaction (PCR) test but may otherwise be treated where a COVID 19 PCR test is negative but there is a very strong index of suspicion of it being a false negative based on CT Chest showing typical COVID features, a positive antibody test with no previous history suggestive of COVID19 prior to

this admission (will only occur 7-14 days minimum after onset) or classical case definition symptoms for COVID19 and contacts making pre-test probability high.

- 4. Ensure that clinicians prescribe a maximum treatment course of 5 days. Further expert clinical advice is currently being taken to clarify the circumstances in which an extended course of up to a total of 10 days might be clinically indicated.
- 5. Ensure the full criteria as described in the COVID-19 Therapeutic Alert for access to remdesivir are being applied by treating clinicians (see below).

Clinicians are asked to prescribe within the following criteria (this includes the additional criteria to be applied given the limited supply scenario):

- Hospitalised with coronavirus disease 2019 (COVID-19)
- With pneumonia requiring supplemental oxygen
- Adults, and adolescents ≥ 12 years of age and ≥ 40 kg · eGFR ≥ 30ml/min
- Alanine Aminotransferase (ALT) below 5 times the upper limit of normal at baseline
- At the time of decision to treat with remdesivir patients should not be receiving ongoing mechanical ventilation or ECMO. Patients who present with an initial rapid deterioration can, however, be considered for treatment with remdesivir.
- Multi-disciplinary team assessment should determine if patients not suitable for escalation would benefit from initiation of treatment with remdesivir.
- If patients on remdesivir require escalation, continuation of the drug should be considered by multi-disciplinary team assessment.

Please see the published interim clinical commissioning policy for further details, including consideration in pregnancy and stopping criteria. The published clinical access criteria may be further refined on the basis of expert clinical advice, as required.

Please see the full supply disruption alert in the downloads below.

Downloads

Supply disruption alert - Remdesivir for patients hospitalised with COVID-19 (adults and children aged 12 years and older) (https://www.rcpch.ac.uk/sites/default/files/2020-10/sda_2020_013.pdf)

External links

Remdesivir - Supply disruption alert

(<u>https://www.cas.mhra.gov.uk/ViewAndAcknowledgment/viewAlert.aspx?</u> <u>AlertID=103100)</u>

MHRA Central Alerting System - Interim clinical commissioning policy: Remdesivir

(<u>https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?</u> <u>AlertID=103091)</u>

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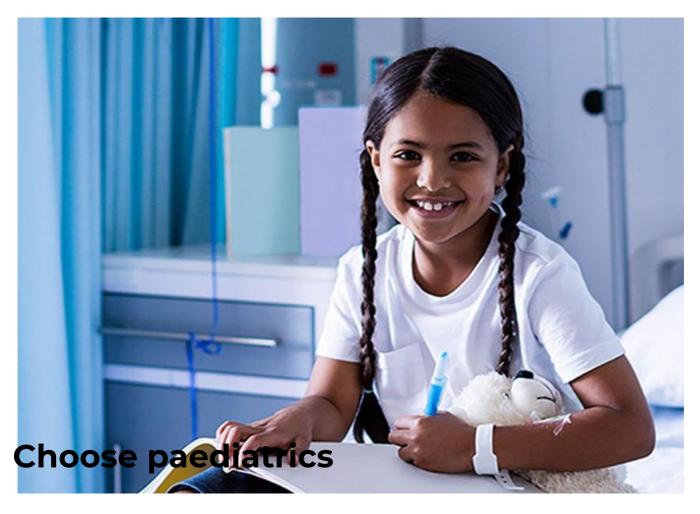
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