COVID-19 Therapeutics Update Summary of Key Messages

- No proven benefits with any drug therapy at this time.
- COVID-19 clinical management focuses on supportive care.

March 25, 2020 – Joint Statement from College of Physicians and Surgeons of BC, College of Pharmacists of BC and BC College of Nursing Professionals

https://www.bcpharmacists.org/readlinks/joint-statement-unproven-therapies-covid-19

- Health professionals all have a responsibility to their patients and to their profession to focus only on evidence-based care and not yield to patient pressure around unproven and potentially dangerous uses of existing medications.
- Physicians and nurse practitioners should not prescribe these therapies for COVID-19 outside the context of a clinical trial, and pharmacists should not dispense them if they do.

March 24, 2020 – BC Provincial COVID Guidelines Committee & March 27, 2020 – VCH-PHC COVID-19 Therapeutics Committee

http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/clinical-care/treatments
Note: recommendations updated weekly by committees as needed

- Investigational anti-COVID-19 therapeutics should be used only in approved randomized controlled trials.
- CATCO A clinical trial on lopinavir/ritonavir (Kaletra) led by Dr. Murthy from BC Children's and funded through the Canadian Institutes of Health Research. Multiple Health Authorities committed to trial enrollment, including VCH.
 - Final approval is pending from Health Canada
- Consult ID for investigational therapy/trial inquiries

Question? Call 604-417-8921

https://my.vch.ca/dept-project/Antimicrobial-Stewardship-Programme-ASPIRES

Important risk considerations when initiating antibiotics:

- C difficile infections
- Adverse drug reactions
- Antimicrobial resistance
- Additional cost associated with medication
- Additional risk associated with staff administration



Antibiotics Use in **Suspected** COVID-19 Patients

- Only prescribe empiric antibiotics if:
 - Sepsis
 - Suspected bacterial co-infection
- Ensure blood cultures and sputum cultures collected as indicated
- Management and treatment duration as per usual sepsis and pneumonia guidelines

Antibiotics Use in **Confirmed** COVID-19 Patients

- De-escalating antimicrobials is usually possible in confirmed COVID-19 infection. Antibiotics may be discontinued in 48 hours if lymphopenia, normal neutrophil counts and lack of laboratory evidence suggestive of bacterial infection (e.g. culture results).
- We do not recommend procalcitonin testing at this time as results are unlikely to arrive in time for management decisions.
- Consult ASPIRES/ID for assistance with de-escalation

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