

# Experiences of using Paxlovid to treat clinically extremely vulnerable non-hospitalised patients with COVID-19



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## Introduction

Nirmatrelvir/ritonavir (Paxlovid), is the first-line treatment in non-hospitalised patients with COVID-19 deemed clinically extremely vulnerable (CEV)

Drug-drug interactions (DDIs) restrict Paxlovid use, and there is limited real world tolerability data.

We describe experience with Paxlovid at our North Central London (NCL) COVID Medicines Delivery Unit (CMDU)

## Methods

SARS-CoV-2 positive CEV patients were triaged between 10/02/22 and 02/05/22. Those meeting national eligibility criteria were considered for Paxlovid.

We standardised management of some DDIs by modifying the Interim Clinical Commissioning Policy

Directed by HIV physicians and pharmacists, this recommended which medications could be safely **paused**, or **co-administered** (below) with Paxlovid. An HIV consultant was available to discuss complex DDIs.

Patients prescribed Paxlovid between 10/02/22 and 12/04/22 were contacted after at least seven days to assess **tolerability** and **adherence**.

Data were manually extracted from patient records and analysed in Microsoft Excel

Paused **Statins** **PDE5 Inhibitors**

Co-administered **Inhaled steroids** **Levothyroxine** **Methadone** **Theophylline** **Riluzole**

## Results

Considered for Paxlovid **872**

Paxlovid Contraindicated **36%** (317/872)

Prescribed Paxlovid **555**

Followed up **342**

Completed course **89%** (305/342)

Reported side effects **53%** (181/342)

Discontinued Paxlovid **5%** (18/342)

Table 1: Reasons Paxlovid was not prescribed if eligible

Category	n (%)
Drug-drug interaction	238/317 (75)
Anticoagulation	55/317 (17)
Tacrolimus	71/317 (22)
Antiplatelet	19/317 (6)
PDE5 Inhibitor	4/317 (1)
Other	79/317 (25)
CKD stage 4 or 5	38/317 (12)
Pregnant/trying to conceive	5/317 (2)
Patient choice	8/317 (3)
Liver Disease	6/317 (2)
Previous Paxlovid	5/317 (2)
Unable to swallow tablets	5/317 (2)
Other*	12/317 (4)

\*including: clinician error, poor gastric absorption, paediatric, hospital admission

Table 2: Side effects reported by those taking Paxlovid

Category	n (%)
Total	181/342 (53)
Nausea	32/342 (9)
Diarrhoea	37/342 (11)
Metallic taste	134/342 (39)
General malaise	3/342 (1)
Rash	3/342 (1)
Other*	17/342 (5)

\*including: itching, blistered lips, dry mouth, dizziness, headache

## Discussion

- Paxlovid is reasonably well tolerated
- Side effects were common, but mild and transient, resulting rarely in discontinuation.
- A pragmatic approach to managing DDIs improves access to Paxlovid
- Numerous DDIs still prevent access to oral antivirals and additional mitigation strategies should be considered.

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