

REMDESIVIR REVIEW AND ADVISORY WORKING GROUP EXECUTIVE SUMMARY

November 10, 2020

Remdesivir is an antiviral agent approved by Health Canada for the treatment of COVID-19. A Federal supply of remdesivir has been distributed to the provinces since October 2020. This supply has been purchased and funded by the Federal government, and is expected to continue until at least March 2021.

The Remdesivir Review and Advisory Working Group, comprised of representatives from multiple provincial committees, was formed to evaluate the use of remdesivir in BC health authority facilities. This working group continuously evaluates the evidence and utility of remdesivir, provides recommendations on its use, and determines its allocation within the province.

At a previous meeting on October 21, 2020, the working group agreed that remdesivir should only be used in BC hospitals within international clinical trials. Since that time, not all B.C. health authorities have been able to access trial recruitment. Significant volumes of remdesivir remain unutilized. Furthermore, there has been a sudden increase in COVID-19 case counts in early November with rising hospitalizations.

On November 10, 2020 the working group met and made the following recommendation:

1. Remdesivir can be considered for use in all adults and adolescents (aged 12 years or older with a body weight of at least 40 kg) with confirmed COVID-19 who meet the following criteria:
 - a. Requiring supplemental oxygen at the time of remdesivir initiation.
 - b. Not requiring non-invasive mechanical ventilation, invasive mechanical ventilation, or ECMO at the time of remdesivir initiation.
 - c. Have an eGFR greater than 30 mL/min and ALT less than 5 times the upper limit of normal.
2. If remdesivir is prescribed, the recommended dosing is 200 mg IV on day one, followed by 100 mg IV daily for 4 more days or until hospital discharge, whichever comes first. If patients still require supplemental oxygen at day 5 of therapy, consider continuing remdesivir for up to 10 days.
3. Remdesivir will be allocated to each Health Authority.
4. Only Federal government supplied remdesivir is available for use in B.C. at this time.
5. A formulary review and economic evaluation will be necessary to determine whether remdesivir will be added to the B.C. Health Authority Drug formulary.

Remdesivir has received conditional approval by Health Canada for the treatment of COVID-19. Preliminary data from the SOLIDARITY trial (n=5451) showed remdesivir did not reduce in-hospital mortality or initiation of ventilation. Preliminary length of stay data were reported, but have been difficult to interpret given the study methodology and open-label design. In the ACTT-1 trial (n=1062), remdesivir shortened time to clinical recovery, particularly in patients requiring supplemental oxygen who were not mechanically ventilated. There was no clearly demonstrated benefit to mortality or initiation of mechanical ventilation.

While remdesivir has yet to show a mortality benefit, or reduction in mechanical ventilation, it does reduce the time to clinical recovery and potentially reduce hospital length of stay. It is reasonable to

assume that most patients would likely favour receiving remdesivir as it may result in more rapid clinical recovery and hospital discharge, even if mortality or mechanical ventilation benefit is absent. Moreover, there may be benefit to the acute care system in B.C. as remdesivir potentially reduces hospital length of stay, thereby diminishing bed and staff pressures. This is particularly important given the recent surge in COVID-19 cases and rising hospitalizations.

Remdesivir Review and Advisory Working Group Membership

1. B.C Pharmacy Emergency Operation Center (EOC)
2. B.C. COVID-19 Therapeutics Committee (CTC)
3. Critical Care Services Executive Committee (CCSEC)
4. Provincial Antimicrobial Clinical Expert Group (PACE)
5. Provincial Healthcare Ethics Advisory Team (PHEAT)

Richard Jones- Chair

British Columbia Remdesivir Review and Advisory Working Group (RRAWG)

British Columbia Pharmacy Emergency Operation Center (EOC)

Dr David Sweet-Chair

British Columbia COVID-19 Therapeutics Committee (CTC)

Dr Ryan Foster

Critical Care Services Executive Committee (CSCEC)

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Provincial Antimicrobial Clinical Expert Group (PACE)

Dr Alice Virani- Co-chair

Provincial Healthcare Ethics Advisory Team (PHEAT)