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Resistance to Bebtelovimab

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COVID-19 Update

Resistance to Bebtelovimab

The FDA has warned that the investigational anti-SARS-CoV-2 monoclonal antibody bebtelovimab is not expected to retain activity against the Omicron variants BQ.1 and BQ.1.1.¹ Bebtelovimab (LY-CoV1404 – Lilly) is available under an FDA Emergency Use Authorization (EUA) for IV treatment of mild to moderate COVID-19 in high-risk patients ≥ 12 years old who weigh ≥ 40 kg for whom alternative treatment options are unavailable or inappropriate.^{2,3} The drug remains authorized for use in all regions of the US.¹

The relative prevalence of SARS-CoV-2 variants BQ.1 and BQ.1.1 has increased in recent weeks. In the week ending November 12, 2022, they were estimated to have caused ~44% of COVID-19 cases in the US, up from ~9% of cases 4 weeks earlier.⁴

The NIH recommends that high-risk nonhospitalized adults with COVID-19 be treated with either oral ritonavir-boosted nirmatrelvir (*Paxlovid*) or IV remdesivir (*Veklury*); ritonavir-boosted nirmatrelvir is preferred.⁵ Both of these therapies decreased the risk of hospitalization or death significantly more than placebo in large, randomized, double-blind trials.^{6,7} If these drugs are inappropriate or unavailable, use

of molnupiravir (*Lagevrio*; available under an EUA) or bebtelovimab (only if the majority of circulating SARS-CoV-2 strains in the region are susceptible to bebtelovimab) is recommended.^{5,8} Ritonavir-boosted nirmatrelvir, remdesivir, and molnupiravir are expected to retain activity against SARS-CoV-2 variants BQ.1 and BQ.1.1.¹ ■

1. FDA. FDA updates on bebtelovimab. November 4, 2022. Available at: <https://bit.ly/3FZq2za>. Accessed November 15, 2022.
2. An EUA for bebtelovimab for treatment of COVID-19. *Med Lett Drugs Ther* 2022; 64:41.
3. FDA. Fact sheet for health care providers: Emergency Use Authorization for bebtelovimab. November 12, 2022. Available at: <https://bit.ly/3H06goe>. Accessed November 15, 2022.
4. CDC. COVID data tracker. Variant proportions. November 11, 2022. Available at: <https://bit.ly/3Ka3HhH>. Accessed November 15, 2022.
5. NIH. COVID-19 treatment guidelines. Therapeutic management of nonhospitalized adults with COVID-19. September 26, 2022. Available at: <https://bit.ly/3w5TdLB>. Accessed November 15, 2022.
6. J Hammond et al. Oral nirmatrelvir for high-risk, non-hospitalized adults with Covid-19. *N Engl J Med* 2022; 386:1397.
7. RL Gottlieb et al. Early remdesivir to prevent progression to severe Covid-19 in outpatients. *N Engl J Med* 2022; 386:305.
8. NIH. COVID-19 treatment guidelines. The COVID-19 Treatment Guidelines Panel's statement on Omicron subvariants, pre-exposure prophylaxis, and therapeutic management of nonhospitalized patients with COVID-19. November 10, 2022. Available at: <http://bit.ly/3hGyZTT>. Accessed November 15, 2022.

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