

April 9, 2020

## COM-2020-026

Dear provider of pharmaceutical services,

As the 2019 coronavirus disease (COVID-19) pandemic continues to evolve, providers of pharmaceutical services have an important role in the front lines of this global public health issue. We want to thank you for every effort taken by your team to continue to provide essential services to our communities. Know that we are committed to support you and keep you informed regarding rapidly changing measures taken in response to COVID-19.

In this time of uncertainty global health experts are constantly providing new information as it becomes available. Below are <u>some</u> frequently asked questions and answers (Q&A) related to treatment and management of COVID-19, and investigational therapies.

Question	Answer
How are COVID-19	Not all patients with COVID-19 will require medical supportive care. Clinical
patients treated?	management for hospitalized patients with COVID-19 is focused on supportive
	care for complications, including supplemental oxygen and advanced organ
	support for respiratory failure, septic shock, and multi-organ failure. Empiric
	testing and treatment for other viral or bacterial etiologies may be warranted.
Do patients with confirmed	Not all patients with COVID-19 require hospital admission. Patients whose
or suspected COVID-19	clinical presentation warrants in-patient clinical management for supportive
need to be admitted to the	medical care should be admitted to the hospital under appropriate isolation
hospital?	precautions.
	Some patients with initial mild clinical presentation may worsen in the second
	week of illness. The decision to monitor these patients in the inpatient or
	outpatient setting should be made on a case-by-case basis. This decision will
	depend not only on the clinical presentation, but also on the patient's ability to
	engage in self-monitoring, the feasibility of safe isolation at home, and the risk
	of transmission in the patient's home environment.
Are empiric antibiotics	Several patients with COVID-19 have been reported to present with concurrent
recommended for patients	community-acquired bacterial pneumonia. Decisions to administer antibiotics to
suspected of having	COVID-19 patients should be based on the likelihood of bacterial infection
COVID-19?	(community-acquired or hospital-acquired), illness severity, and antimicrobial
	stewardship issues.
What antiviral drugs are	There are currently no antiviral drugs approved by the FDA to treat COVID-19.
available to treat COVID-	
19?	[Note: An interim guidance for the management of patients with COVID-19 is available at: <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html</a>
Should angiotensin	The CDC is currently not aware of scientific evidence establishing a link
converting enzyme	between ACE-I or ARBs and risk of contracting or severity of COVID-19. The
inhibitors (ACE-I) or	American Heart Association, the Heart Failure Society of America, and the
Angiotensin Receptor	American College of Cardiology recommended the continuation of ACE-I or
Blockers (ARB) be stopped	ARB medications for all patients already prescribed those medications for
in patients with COVID-	indications such as heart failure, hypertension, or ischemic heart disease.
19?	Cardiovascular disease patients who are diagnosed with COVID-19 should be
17.	Carato rascarar assense pariones who are singhosed with COVID 17 should be



Answer
fully evaluated by a healthcare professional before adding or removing any treatments, and any changes to their treatment should be based on the latest scientific evidence. Patients who rely on ACE-I or ARBs to treat chronic conditions and have additional questions should speak to their healthcare provider for individualized management.
[Note: Additional information on this matter is available at:  https://newsroom.heart.org/news/patients-taking-ace-i-and-arbs-who-contract-covid-19-should- continue-treatment-unless-otherwise-advised-by-their-physician]
CDC is currently not aware of scientific evidence establishing a link between NSAIDs (e.g., ibuprofen, naproxen) and worsening of COVID-19. Global healthcare-related organizations are continuing to monitor the situation and will review new information on the effects of NSAIDs and COVID-19 disease as it becomes available. For those who wish to use treatment options other than NSAIDs, there are other over-the-counter (OTC) and prescription medications approved for pain relief and fever reduction. Patients who rely on NSAIDs to treat chronic conditions and have additional questions should speak to their healthcare provider for individualized management. Patients should use NSAIDs, and all medications, according to the product labels and advice of their
healthcare professional.
No. Hydroxychloroquine sulfate and some versions of chloroquine phosphate are FDA-approved to treat malaria. Hydroxychloroquine sulfate is also FDA-approved to treat lupus and rheumatoid arthritis.  [Note: Additional information regarding the emergency use authorization (EUA) for chloroquine phosphate or hydroxychloroquine sulfate for COVID-19 is available at:
In the lab, these drugs have been shown to prevent the growth of the virus that causes COVID-19. There are a few reports of patients with COVID-19 who received these drugs and improved. Some are reports of groups of patients, all of whom received the drug. It is not known whether it was the drug that led to the improvement or whether there were other factors involved. We do not know if the treated patients' condition would have improved without the drug. To know this, there would have to be a group of similar patients who did not receive the drug (control).
Because chloroquine phosphate and hydroxychloroquine may possibly help very sick patients, the FDA is allowing these drugs to be provided to certain hospitalized patients under an <a href="Emergency Use Authorization (EUA)">Emergency Use Authorization (EUA)</a> issued <a href="March 28">March 28</a> , 2020. Under the EUA, health care providers and patients are provided with information about the risks of these drugs. However, more data from clinical trials are necessary for us to determine whether chloroquine phosphate or hydroxychloroquine sulfate are safe and effective in treating or preventing <a href="COVID-19">COVID-19</a> .  The professionals: Frequently Asked Questions and Answers portal and the FDA's COVID-19

Of note, currently, there is no drug approved by the FDA for the treatment of patients with COVID-19. Clinical trials are ongoing and additional information is available at: <a href="https://clinicaltrials.gov/">https://clinicaltrials.gov/</a>. Information on investigational therapies is available at: <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/therapeutic-options.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/therapeutic-options.html</a>.



Additional information regarding frequently asked questions is available at the CDC's Healthcare Professionals: Frequently Asked Questions and Answers portal (<a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html</a>) and the FDA's COVID-19 Frequently Asked Questions portal (<a href="https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/coronavirus-disease-2019-covid-19-frequently-asked-questions?utm campaign=Consumer%20FAQs%20040220&utm medium=email&utm source=Eloqua#5e834d8 aa7ca3).

The situation with the COVID-19 pandemic is dynamic and constantly changing. We strongly encourage the frequent revision of updated information provided by the CDC, the FDA, and the World Health Organization (WHO), to assure that your practices are consistent with the most updated information.

PharmPix is committed to the health and wellness of our members. It is our priority to offer high-quality services and support practices for health promotion and diseases prevention. If you have any questions or wish to have more information regarding this document, you can call us at 787-522-5252, extension 137.

Regards,

Clinical Department

## References:

- Coronavirus Disease 2019 (COVID-19). (2020). Retrieved April 2020, from <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html#treatment">https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html#treatment</a>
- Coronavirus Disease 2019 (COVID-19) Frequently Asked Questions. (2020). Retrieved April 2020, from <a href="https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/coronavirus-disease-2019-covid-19-frequently-asked-questions?utm\_campaign=Consumer%20FAQs%20040220&utm\_medium=email&utm\_source=Eloqua#5e834d8aa7ca3</li>