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DHHS.Health.Alert@dhhs.nh.gov
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COVID-19 Pandemic, Update # 45 ***SARS-CoV-2 Monoclonal Antibody Therapy Updates*** ***Resumption of Healthcare Provider & Public Health Partner Webinars***

Key Points and Recommendations:

- Management of patients with COVID-19 vary by setting and severity of illness; providers should familiarize themselves with COVID-19 treatment guidelines from both the [National Institutes of Health](#) (NIH) and the [Infectious Disease Society of America](#) (IDSA)
 - Note the NIH has updated their guidance on [use of bamlanivimab plus etesevimab](#) but this not yet been incorporated into their guidance summary
 - Review the recent [CDC HAN](#) advising against the use of ivermectin, which has not been shown to be effective at treating or preventing COVID-19
- Three SARS-CoV-2 monoclonal antibody products are available for use under a U.S. Food and Drug Administration (FDA) Emergency Use Authorization (EUA), including [bamlanivimab plus etesevimab](#), [casirivimab plus imdevimab](#), and [sotrovimab](#)
 - Use these therapies for patients with mild to moderate confirmed COVID-19 infection and who are not hospitalized (unless hospitalized for a reason other than COVID-19) but are at high risk for progressing to severe disease and/or hospitalization
 - Criteria for identifying patients that are at high risk for progressing to severe disease and/or hospitalization are listed on each product's FDA Fact Sheet for Healthcare Providers (linked above). Note that use of these products under the EUA is not limited to only patients with the conditions listed, and providers may take patients' unique risk profiles into account when deciding whether to use these therapies
 - Casirivimab plus imdevimab has also received [EUA](#) as post-exposure prophylaxis (PEP) for patients who are at high risk of becoming infected and progressing to severe COVID-19; casirivimab plus imdevimab may also be given in subcutaneous injections if intravenous administration is not an option
 - When supplies of monoclonal antibodies are limited, the NIH [recommends](#) that providers prioritize treatment over PEP
- Providers who want to refer an ambulatory patient for treatment with monoclonal antibodies should review the following [map](#) which identifies facilities that administer monoclonal antibodies, then contact that facility directly to refer a patient
 - For patients in long-term care facilities (LTCF), the pharmacies that already support LTCFs are receiving monoclonal antibody treatments to use
- The U.S. Department of Health and Human Services (HHS) now distributes monoclonal antibody therapies through a state-coordinated allocation system; healthcare facilities can no longer order these products directly from the distributor (AmerisourceBergen)

- HHS will determine weekly distribution amounts for NH based on the weekly statewide incidence of new infections and hospitalizations, and product utilization
- The NH Division of Public Health Services (NH DPHS) will then allocate treatments to NH administration facilities based on their requests and utilization, and the products will ship directly to the facility from AmerisourceBergen
- For more information on this new process, see the [HHS announcement](#)
- To request supplies of monoclonal antibodies for administration, please e-mail COVID19mAbDistribution@dhhs.nh.gov, or call 603-271-4463
- NH DPHS will host webinars for **School and Childcare Partners** the **1st and 3rd Wednesday** of each month from 3:30 – 4:30 pm (next meeting Wednesday 10/6):
 - Zoom link: <https://nh-dhhs.zoom.us/j/98062195081>
 - Webinar ID: 980 6219 5081
 - Telephone: 646-558-8656
 - Passcode: 197445
- NH DPHS will resume webinars for **Healthcare Providers and Public Health Partners** the **2nd and 4th Thursday** of each month from 12:00 – 1:00 pm (next meeting Thursday 9/23):
 - Zoom link: <https://nh-dhhs.zoom.us/j/94059287404>
 - Webinar ID: 940 5928 7404
 - Telephone: 646-558-8656
 - Passcode: 353809

For any questions regarding this notification, please call the NH DHHS, DPHS, Bureau of Infectious Disease Control at (603) 271-4496 during business hours (8:00 a.m. – 4:30 p.m.).

- If you are calling after hours or on the weekend, please call the New Hampshire Hospital switchboard at (603) 271-5300 and request the Public Health Professional on-call.
- To change your contact information in the NH Health Alert Network, contact Adnela Alic at (603) 271-7499 or email Adnela.Alic@dhhs.nh.gov.

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