

NIRMATRELVIR plus RITONAVIR tablets (Paxlovid® ▼), SOTROVIMAB solution for infusion (Xevudy® ▼) and TOCILIZUMAB solution for infusion (RoActemra® ▼) for treating COVID-19

The Cheshire and Merseyside Area Prescribing Group recommends the prescribing of NIRMATRELVIR plus RITONAVIR tablets (Paxlovid® ▼), SOTROVIMAB solution for infusion (Xevudy® ▼) and TOCILIZUMAB solution for infusion (RoActemra® ▼) by specialists only, for treating COVID-19 in accordance with NICE TA878.

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[NICE technology appraisal \(TA\) 878^{\[1\]}](#) (published 29 March 2023, updated 05 April 2023) recommends:

Nirmatrelvir plus ritonavir (Paxlovid®) an option for treating COVID-19 in adults, only if:

- > they do not need supplemental oxygen for COVID-19 **and**
- > they have an increased risk for progression to severe COVID-19, as defined in the independent advisory group report commissioned by the Department of Health and Social Care.^[1]

Sotrovimab (Xevudy®) as an option for treating COVID-19 in adults and young people aged 12 years and over and weighing at least 40 kg, only if:

- > they do not need supplemental oxygen for COVID-19 **and**
- > they have an increased risk for progression to severe COVID-19, as defined in the independent advisory group report commissioned by the Department of Health and Social Care **and**
- > nirmatrelvir plus ritonavir (Paxlovid®) is contraindicated or unsuitable **and**
- > the company provides sotrovimab (Xevudy®) according to the commercial arrangement.^[1]

Tocilizumab (RoActemra®) is recommended, within its marketing authorisation, as an option for treating COVID-19 in adults, only if:

- > they are having systemic corticosteroids **and**
- > they need supplemental oxygen or mechanical ventilation **and**
- > the company provides tocilizumab (RoActemra®) according to the commercial arrangement.^[1]

Implementation

- > Prescribing should be initiated and retained by a specialist clinician who is competent and experienced in the assessment and treatment of COVID-19.
- > Nirmatrelvir plus ritonavir (Paxlovid®) and sotrovimab (Xevudy®) may be provided within hospital or community settings:
 - > For patients in community settings, these treatments must be supplied through the COVID Medicines Delivery Unit (CMDU).
 - > For patients in hospital settings (including A&E attendance), these treatments must be supplied in accordance with the relevant Trust COVID Medicines Protocol.

Note: Patients who are not eligible for treatment under this statement may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy. In this situation, follow locally defined processes.

- > Tocilizumab (RoActemra®) must only be provided within hospital settings in accordance with the relevant Trust COVID Medicines Protocol.
- > Where treatment is provided through the CMDU, the CMDU protocol must be adhered to.

See separate [black statement](#) for the Cheshire and Merseyside APG recommendation for prescribing of casirivimab plus imdevimab (Ronapreve®) for treating COVID-19 in accordance with NICE TA878.

Data collection requirement

Submission of Blueteq forms for COVID-19 treatments is required by the prescribing organisation.

Costing information

Nirmatrelvir plus ritonavir (Paxlovid®) and tocilizumab (RoActemra®) are recommended because the likely cost-effectiveness estimates are within what NICE considers an acceptable use of NHS resources. The cost-effectiveness estimates for sotrovimab (Xevudy®) are also within what NICE considers an acceptable use of NHS resources, but only for people for whom nirmatrelvir plus ritonavir (Paxlovid®) is contraindicated or unsuitable. So, sotrovimab (Xevudy®) is recommended in this group.^[1]

References

1. National Institute for Health and Care Excellence. Technology Appraisal TA878; [Casirivimab plus imdevimab, nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19](#), updated 05 April 2023. Accessed 20 April 2023.