

Evusheld™ prescribing in primary care

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Department
of Health

OFFICIAL

Tixagevimab and cilgavimab (Evusheld™) overview

- Provisional approval from TGA for **pre-exposure prophylaxis**
- Monoclonal antibodies designed to block viral attachment and entry into cells
- Available through the NMS since April, community prescribing pathway since July
- [PBAC review](#) in September did not recommend for PBS – for future submission
- Treatment goal is to prevent COVID-19 infection in people who:
 - are moderately-severely immunocompromise or,
 - can not be vaccinated due to severe allergy
- **Supply available until 31 December 2022**

Evusheld™ eligibility - Victoria

- heart/lung transplant recipients
- STEM Cell Transplant recipients within **24 months** or STEM Cell recipients with GVHD or still requiring significant ongoing immunosuppression for other reasons
- CAR T-cell therapy recipients within 12 months
- kidney, pancreas/islet cell, or liver transplant recipients within 12 months, or requiring therapy for acute rejection, or still requiring significant ongoing suppression for other reasons
- individuals with primary immunodeficiency syndromes
- haematologic disorders that may affect B cell function for example, CLL, CMML, myelodysplastic syndrome, myeloma
- individuals unable to be immunised with **COVID-19 vaccines due to genuine, severe allergy** and not recently infected with COVID-19 within 3 months
- individuals who have haematological malignancies and are receiving active therapy
- individuals with HIV who have a **CD4 cell count < 250 cells/mm³**

Evusheld™ eligibility - Victoria

- individuals who within the last 12 months received:
 - anti-CD20 antibodies (rituximab, obinutuzumab, ocrelizumab, ofatumumab)
 - BTK inhibitors (ibrutinib, acalabrutinib, zanubrutinib)
 - BLC2 inhibitor (venetoclax)
 - anti-CD38 (daratumumab)
 - anti-BCMA bi-specific antibody
 - sphingosine 1- phosphate receptor modulators (fingolimod, siponimod)
 - anti-CD52 antibodies (alemtuzumab)
 - anti-complement antibodies (eculizumab)
 - anti-thymocyte globulin
 - high dose ($> 1 \text{ g/m}^2$) cyclophosphamide
 - **JAK inhibitors (ruxolitinib, baricitinib, tofacitinib, upadacitinib)**
 - **abatacept**

Evusheld™ eligibility - Victoria

ALL NEW:

- individuals who within the last 3 months received:
 - Selected csDMARDs including mycophenolate, methotrexate, leflunomide, azathioprine, 6-mercaptopurine (at least 1.5mg/kg/day), alkylating agents (for example, cyclophosphamide, chlorambucil), and systemic calcineurin inhibitors (for example, cyclosporin, tacrolimus)
 - high-dose corticosteroids (at least 20 mg of prednisone per day, or equivalent) for at least 14 days in a month, or pulse corticosteroid therapy,
 - chemotherapy or whole body radiotherapy.
- Repeat doses at approximately 6 months, or earlier at clinician discretion

Evusheld™ prescribing considerations

Administration

- 2x IM sequential injections (1.5mL tixagevimab and 1.5mL cilgavimab)
- Observe for 15 minutes post

Contraindications

- COVID-19 infection within the last 30 days
- COVID-19 vaccination within the last 2 weeks
- Weighs < 40 kg
- Age < 12 years old
- Hypersensitivity to active ingredients or other components of the product

Evusheld™ prescribing considerations

Precautions

- Breastfeeding or pregnancy (category B2)
- Clinically significant bleeding disorders, such as thrombocytopenia and other coagulation disorders
- Aged 12-17 years old
- Cardiovascular history

Evusheld™ primary care pathway

- The department stocks doses of Evusheld™ in **selected** community (Supercare) and regional and rural hospital pharmacies
- GPs can prescribe Evusheld™ for eligible patients
- Patients are dispensed Evusheld™ for free at participating pharmacies
- Option for administration at Supercare pharmacies by onsite nurses (6-10pm) or patients return to prescriber's clinic for administration
- Requires **prescription** and completed **Request to Access form**

TIXAGEVIMAB PLUS CILGAVIMAB (EVUSHELD) FOR COVID-19 PRE-EXPOSURE PROPHYLAXIS

This form is required to be completed and supplied alongside a prescription to enable dispensing of Evusheld™ from participating hospital and community pharmacies. **Evusheld™ is available until 31st December 2022.**

TO BE COMPLETED BY PRESCRIBER:**PATIENT DETAILS**

Patient's Name Patient DOB (dd/mm/yyyy)

Sex

☐ Male ☐ Non-binary ☐ Other
☐ Female ☐ Not disclosed

DOSE AND ROUTE

300mg (150mg of both tixagevimab plus cilgavimab) IM (2 X 1.5ml inj) ☐

First Dose ☐ Second dose ☐

ACCESS CRITERIA (tick each criterion that applies to confirm the access criteria have been met)

- ☐ Stem Cell Transplant recipient within 24 months
- ☐ Stem Cell recipient with GVHD, OR still requiring significant ongoing immunosuppression for other reasons
- ☐ CAR T-cell therapy recipient within 12 months
- ☐ Heart/lung transplant recipient
- ☐ Kidney, pancreas/islet cells or liver transplant recipient within 12 months
- ☐ Kidney, pancreas/islet cells or liver transplant recipient requiring therapy for acute rejection, OR still requiring significant ongoing suppression for other reasons
- ☐ Individual with primary immunodeficiency syndromes. Please specify
- ☐ B or T cell depleting therapy within the previous 12 months. Please specify
- ☐ Individual unable to be immunised with COVID-19 vaccines due to genuine, severe allergy and not recently infected with COVID-19 within 3 months
- ☐ Haematological malignancy on active therapy
- ☐ Haematologic disorders that may affect B cell function e.g. CLL, CMML, myelodysplastic syndrome, myeloma
- ☐ Individual with HIV who have a CD4 cell count < 250 cells/mm³
- ☐ Selected csDMARDs, high dose corticosteroids, chemotherapy or whole body radiotherapy in the last 3 months. Please specify

TIXAGEVIMAB PLUS CILGAVIMAB (EVUSHELD) FOR COVID-19 PRE-EXPOSURE PROPHYLAXIS

If Administration is to be completed by Supercare Pharmacy Nurses (6pm-10pm), complete the following:

Nursing services are only available at Supercare Pharmacies. Regional and rural hospital pharmacies do not have nursing services available.

DATE OF ADMINISTRATION (Must be no later than 31st December 2022)

Within the Next month ☐ Other (dd/mm/yyyy)

PRESCRIBER DETAILS

Prescriber Full Name Prescriber Email
 Prescriber Job Title Phone Number

- ☐ I declare that the above information is accurate at the time of completion and agree to provide patient outcome information when requested by the Victorian Department of Health.
- ☐ I declare that patient consent for treatment with Evusheld™ has been obtained.

DATE OF FORM COMPLETION

TO BE COMPLETED BY PHARMACIST:

Please email the completed request form to: PharmDist@alfred.org.au

Evusheld™ resources to support prescribing

- Evusheld™ community prescriber guide
- Evusheld™ FAQ for clinicians
- Evusheld™ patient fact sheet
- Dedicated [community prescriber website](#) with all of the above resources and locations of selected pharmacies
- Pharmacy helpline 7 days a week 8am-5pm (03) 8290 3801
- Consumer web [content](#) to support awareness

Evusheld™ evidence

- **PROVENT trial** 300mg IM dose as PrEP reduced the risk of developing symptomatic COVID-19 compared to placebo by 83% over 6 months
- Some studies looking at Evusheld™ as treatment – **TACKLE** and **ACTIV-3-TICO**. Treatment under review by TGA.
- Invitro data of reduced effectiveness in BA.4/5
- Invitro data of lack of neutralisation in BA.4.6, BA.2.75.2, XBB and BQ1.1

Summary

- Expanded eligibility, similar to PBS antiviral immunocompromised criteria
- 2nd doses at approximately 6 months, earlier at clinician discretion
- Available for use until 31 December 2022. Supply thereafter uncertain.
- Adjunct to vaccination for immunocompromised, or substitute for those who can not be vaccinated, as PrEP
- Use as treatment only in exceptional circumstances with specialist recommendation
- Updated advice as will be shared by DH

Further information

Department:

[COVID-19 medications resources](#)

[Evusheld™ community prescribing pathway](#)

[Consumer information](#)

covid+pathways@health.vic.gov.au

Other:

[Australian guidelines for the clinical care of people with COVID-19](#)

[TGA product information](#)