

# March 2024 Update – Paxlovid™

Please see below for important updates regarding:

- Paxlovid<sup>™</sup> expiry dates and adjusting packages for dispensing (pp.1-2)
- Reminder: drug-drug interaction with Paxlovid<sup>™</sup> and tacrolimus (pp. 2-3)

## Paxlovid<sup>™</sup> expiry dates

Most existing supplies of publicly funded Paxlovid<sup>™</sup> will expire on or before March 31, 2024, and remaining lots (including renal impairment dose packs) expire on May 31, 2024. To extend the available publicly funded supply, pharmacists are encouraged to dispense Paxlovid<sup>™</sup> with the earliest expiry dates first, regardless of full dose or renal impairment dosing, adjusting tablets, instructions and counselling as needed.

Lot numbers with an extended expiry date of May 31, 2024 (<u>link</u>) include GR2928 (standard dose packs), GP9562 and GP9563 (renal dose packs). For supply that expires on or before March 31, 2024 (<u>link</u>), dispense Paxlovid<sup>™</sup> only until March 26, 2024 to ensure the product does not expire part way through the five-day treatment course. For the limited supply that expires at the end of May 2024, dispense only until May 26, 2024.

Participating pharmacies must take all efforts to obtain and ensure access to publicly funded Paxlovid<sup>TM</sup> (adjusting per the below instructions as required) for eligible patients (see eligibility criteria in <u>EO notice</u> dated December 2023).

Pharmacies are permitted to order extra renal packs from the publicly funded supply from their assigned distributor (McKesson or Shoppers Drug Mart) as needed for this purpose.

#### Adjusting Paxlovid<sup>™</sup> packages for dispensing

When using renal impairment dose packaging (DIN: 02527804) for patients requiring full (standard) dose:

- Use PIN 09858154 (standard dose) for billing (one claim per prescription of publicly funded Paxlovid<sup>™</sup> dispensed).
- Ensure you document any dose adjustments that are made.
- Pharmacists should use professional judgement in adjusting packages (suggested method adapted from British Columbia):
  - Combine 2 renal impairment dose packages. From 1 package, remove and discard 1 ritonavir 100 mg (white tablet) from both the morning and evening dose of each daily card.



When using full dose packaging (DIN: 02524031) for patients requiring renal impairment dose adjustment:

- Use PIN 09858162 (renal dose) for billing (one claim per prescription of publicly funded Paxlovid™ dispensed).
- Ensure you document any dose adjustments that are made.
- Pharmacists should use professional judgement in adjusting packages (suggested method adapted from British Columbia):
  - Remove and discard 1 nirmatrelvir 150 mg (pink tablet) from both the morning and evening dose of each daily card of the full dose package.

Pharmacy professionals should use clinical judgement when dispensing to reduce dosing errors and patient confusion. **Note:** The content in this communication is intended to clarify how pharmacies may submit claims for publicly-funded Paxlovid<sup>™</sup> when packages are adjusted. Methods for adjusting packages are provided for information purposes only and are not provided as clinical or legal advice or direction. Pharmacists who have questions about their professional obligations or the practice of pharmacy may contact the Ontario College of Pharmacists.

#### Paxlovid<sup>™</sup> disposal

Pharmacies should dispose of expired publicly funded supply as they would normally dispose of expired or unusable inventory in their pharmacy. Do not return expired product to the distributor or manufacturer.

### Drug-drug interaction with Paxlovid<sup>™</sup> and tacrolimus

As noted in Health Canada's March 2023 <u>Health Product InfoWatch</u>, Canadian cases of serious adverse events following a drug-drug interaction between Paxlovid<sup>™</sup> and tacrolimus have been reported to Health Canada. In some cases, the tacrolimus levels were observed to go up rapidly and to very high levels. High tacrolimus levels can lead to adverse effects such as acute kidney injury and increased susceptibility to severe infections.

# Health Canada advises the following regarding Paxlovid<sup>™</sup> drug-drug interactions with immunosuppressants (including cyclosporine, everolimus, sirolimus and tacrolimus):

• Avoid use of Paxlovid in patients taking immunosuppressants when close monitoring of immunosuppressant concentrations is not feasible.



- If co-administered, dose adjustment of the immunosuppressant and monitoring for immunosuppressant concentrations and immunosuppressant-associated adverse reactions is recommended.
- Refer to the Paxlovid product label and individual immunosuppressant product label for further information and obtain expert consultation from the patient's immunosuppressive therapy specialist.
- Consider the potential for drug interactions prior to and during Paxlovid therapy; review concomitant medications during Paxlovid therapy and monitor for the adverse reactions associated with the concomitant medications.

Ontario continues to provide access to Remdesivir (Veklury<sup>TM</sup>) for COVID-19 for high-risk patients who are unable to take Paxlovid<sup>TM</sup>. Remdesivir is available through <u>Home and</u> <u>Community Care Support Services</u> and select pharmacies with a prescription from a physician or nurse practitioner.

#### **Additional Information:**

For pharmacy billing: Please call ODB Pharmacy Help Desk at: 1-800-668-6641

For COVID-19 related issues or questions in pharmacy: Please email the ministry at: OPDPInfoBox@ontario.ca