Treatment Options for Covid-19 Patients

Monoclonal Antibody Treatment

What is monoclonal antibody treatment?

Monoclonal antibodies are antibodies that are made in a laboratory. These antibodies act like natural antibodies, which are proteins made by our bodies to fight off viruses.

Monoclonal antibodies are infused intravenously (through a vein) and are given at health care facilities. This treatment is allowed by the U.S. Food and Drug Administration (FDA) under an Emergency Use Authorization (EUA) while clinical studies continue to look at their usefulness and safety.

Why should I get monoclonal antibody treatment?

If you are diagnosed with COVID-19 and are having mild to moderate symptoms, getting a monoclonal antibody treatment as soon as possible will help **reduce** the following:

- Severity of symptoms
- Hospitalization rates
- The amount of virus carried by an infected person

When should I get monoclonal antibody treatment?

Monoclonal antibody treatments are most beneficial if they are given as soon as possible after an individual tests positive for COVID-19 (within 10 days of the start of their symptoms).

Who qualifies for this treatment?

Anyone who tests positive for COVID-19 AND has mild to moderate symptoms. See your health care provider to determine if you are eligible for the treatment. Your health care provider will need to verify and confirm your positive test result.

See the chart below for more information on eligibility.

If you have any additional questions, concerns and/or need further guidance with ordering therapies or referring patients contact the NDDoH Department of Operations Center (DOC) at 701-328-0707.

What are the potential side effects of this treatment?

Common side effects are nausea, dizziness, itching and rash.

Since this treatment is given intravenously, some people might experience brief pain, bleeding, bruising of the skin, soreness, swelling and possible infection at the infusion site.

How and where can I get this treatment?

See your health care provider for a treatment prescription and referral to a North Dakota health care facility that provides monoclonal antibody treatment.

See this [Map for health care facilities in North Dakota offering monoclonal antibody treatment.](#)

How much do I pay for this treatment/is it covered by my insurance?

The federal government distributes antibody supplies at no cost to patients. Most larger private insurances cover the cost of this treatment. However, if you do not have insurance coverage or if you are unsure, check with the treatment facility if there are any charges.

https://combatcovid.hhs.gov/available-covid-19-treatment-options

Can I receive the COVID-19 vaccine after receiving monoclonal antibody treatment?

We do not yet know how effective vaccines are in someone who has previously received an antibody treatment for a COVID-19 infection or whether the antibody treatment could interfere with your body's own immune response to a vaccine. However, once you have COVID-19, you are very unlikely to be reinfected for three months afterward. If you receive an antibody treatment, you should delay receiving a vaccine for 90 days as a precaution.

Sources:

COVID-19 Treatment: North Dakota Department of Health (https://www.health.nd.gov/covidtreatment)

COVID-19 Medication Options: Minnesota Department of Health (https://www.health.state.mn.us/diseases/coronavirus/meds.html#what)

MONOCLONAL ANTIBODY CLINICAL PATHWAY

COVID Positive Patient

Need Hospitalization?

YES – (Severe symptoms)

NO – (Mild to moderate symptoms)

Admit to hospital with consideration for Remdesivir

Candidate for monoclonal antibody (Bamlanivimab/Etesevimab, Casirivimab/Imdevimab or Sotrovimab)

Criteria for further consideration

BMI ≥ 25 or 85th percentile
Sickle Cell Disease
Cardiovascular Disease or Hypertension
Chronic Lung Disease (Asthma, COPD, others
Pregnancy
Chronic Kidney Disease

Diabetes
Immunosuppression
Neurodevelopment Disorders
Medical-related technologic dependence
≥65 years of age
Patient benefits outweigh the risks

YES   **NO**

Outpatient infusion of available and appropriate COVID antibody

Inform patient that COVID-19 vaccination should be deferred for at least 90 days to avoid interference of the treatment with vaccine-induced immune responses

Close monitoring of condition

Administration is not restricted to the list of conditions outlined above. Providers should consider benefits to risk ratio when considering this treatment for patients (i.e. race/ethnicity, social situations, etc.

If you have any additional questions, concerns and/or need further guidance with ordering therapies or referring patients contact the NDDoH Department of Operations Center (DOC) at 701-328-0707. Revised 12/27/2021