

FDA-Authorized Monoclonal Antibody Therapies

for Treatment or Prevention of COVID-19 Infection

COVID-19 vaccines and booster shots are the best preventive measure available against severe disease, hospitalization and death due to COVID-19. However, some blood cancer patients will not get optimal protection from vaccines. Monoclonal antibodies can provide another layer of protection for blood cancer patients and others who are at high-risk of serious illness if they become infected with COVID-19. However, monoclonal antibodies treatments are currently in short supply.

This table is for informational purposes only. Treatments require a prescription and should be guided by a patient's healthcare team.

Evusheld¹ (tixagevimab and cilgavimab)	
Authorized for	Prevention of infection <i>before</i> known exposure to COVID-19
For use in adults, and children 12 and older who weigh at least 88 pounds	Who are not currently infected with COVID-19 and have not had known recent exposure to an infected person and <ul style="list-style-type: none"> • Are moderately to severely immunocompromised due to a medical condition (such as blood cancer patients and some survivors) or immune-suppressing treatment (e.g., BTK inhibitors, CD20 antibodies, CD-19 CAR T-therapy) and may not mount an adequate immune response to COVID-19 vaccination or • Cannot be vaccinated with any COVID-19 vaccine according to the approved schedule or has had a severe allergic reaction to any vaccine component
Activity against Omicron	In the laboratory, Evusheld is active against the Omicron variant, but its potency is reduced compared to earlier COVID-19 strains. ²⁻⁶ Activity is retained against the Delta variant. As with vaccines, breakthrough infection is possible after antibody treatment
Dosing/Timing	Two consecutive injections into the muscle, one for tixagevimab and one for cilgavimab Treatment can be repeated every six months
Manufacturer	AstraZeneca Click here to read the manufacturer's Fact Sheet for Patients, Parents and Caregivers.

Xevudy⁷ (sotrovimab)	
Authorized for	Treatment of mild-to-moderate COVID-19
For use in adults, and children 12 and older who weigh at least 88 pounds	Who have mild-to-moderate COVID-19 symptoms and have tested positive for the infection, and <ul style="list-style-type: none"> • Are not hospitalized or requiring supplemental oxygen, and • Are at increased risk of progressing to severe COVID-19 (such as blood cancer patients and some survivors)
Activity against Omicron	Expected to protect against serious outcomes of infection with Omicron and Delta variants. ²⁻⁶
Dosing/Timing	Given as a single IV infusion over 30 minutes Should be given as soon as possible after positive results of a COVID-19 test and within 10 days of symptom onset
Manufacturer	GSK Click here to read the manufacturer's Fact Sheet for Patients, Parents and Caregivers.

Regen-COV (casirivimab and imdevimab)

As of January 24, 2022, the FDA advised that “this treatment is not authorized for use in any U.S. states, territories or jurisdictions because it is highly unlikely to be active against the omicron variant, which is circulating at a very high frequency throughout the United States.”

[Click here](#) to read more.

Bamlanivimab and etesevimab

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1. Fact Sheet for Healthcare Providers: Emergency Use Authorization for Evusheld™; 2. VanBlargen LA et al. An infectious SARS-CoV-2 B.1.1.529 Omicron virus escapes neutralization by several therapeutic monoclonal antibodies; 3. Dejnirattissai W et al. Omicron-B.1.1.529 leads to widespread escape from neutralizing antibody responses; 4. Aggarwal A et al. SARS-CoV-2 Omicron: evasion of potent humoral responses and resistance to clinical immunotherapeutics relative to viral variants of concern; 5. Xie et al. B.1.1.529 escapes the majority of SARS-CoV-2 neutralizing antibodies of diverse epitopes; 6. Coronavirus antiviral & resistance database. 7. Fact Sheet for Healthcare Providers Emergency Use Authorization (EUA) of Sotrovimab

As of 1/25/2022