EFFECTIVENESS AND SAFETY OF CILGAVIMAB/TIXAGEVIMAB IN PRE-EXPOSURE PROPHYLAXIS OF COVID-19

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BACKGROUND AND IMPORTANCE

Cilgavimab/tixagevimab are two recombinant human IgG1κ monoclonal antibodies indicated for the pre-exposure prophylaxis of COVID-19 in adults and adolescents≥12 years old weighing≥40 kg. In Spain, potential candidates are people with high degree of immunosuppression (due to pathology or treatment), who do not respond adequately to vaccination (anti-anati-S antibodies<260 BAU/ml).

AIM AND OBJETIVES

To analyze the effectiveness and safety of cilgavimab/tixagevimab in a tertiary care hospital

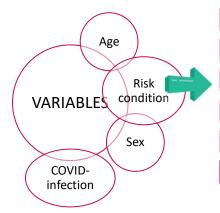
MATERIALS AND METHODS

Descriptive, observational, retrospective study.



COVID-infection after cilgavimab/tixagevimab

Incidence of adverse reactions



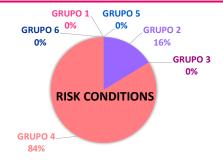
- 1. Hematopoietic progenitor transplant recipient or CART-T, in immunosuppressive treatment or with graft-versus-host disease
- 2. Solid organ transplant recipients
- 3. Primary combined and B-cell immunodeficiencies with absence of response to vaccination-COVID-19
- 4. Immunosuppressive treatment with biologic immunomodulators (anti-CD20, abatacept, belimumab or mycophenolate, mainly)
- 5. Solid organ cancer under treatment with cytotoxic chemotherapy or treatments that carry a high risk of severe COVID-19 progression
- 6. People at very-high-risk of severe COVID-19 who are contraindicated for COVID-19-vaccination



23 PATIENTS
Age = 64 years old (27-77)

23
(53,5%)

20
(46,5%)





4 patients (9.3%) had COVID-19 infection after treatment

3 patients in group 4 1 patient in group 2

Median of days to COVID-19-infection = 25 days



1 patient with adverse reaction (tachycardia, general malaise, hematoma, headache, nausea and diffuse abdominal pain)



CONCLUSION AND RELEVANCE

The treatment was effective in the majority of patients in our hospital

This supports the use of the drug as prophylaxis to prevent COVID-19 in people who do not respond sufficiently to vaccination

The treatment was well tolerated, presenting low incidence of adverse reactions. Longer term studies should be performed

















