

Paxlovid (nirmatrelvir and ritonavir) Provider Guidance

Eligibility

- Mild-moderate COVID-19 within 5 days of symptom onset
- Risk of progression to severe COVID-19, a list of qualifying conditions can be found in [Appendix F of SARS CoV-2 guidance](#)
- Age ≥ 12 years old and weight ≥ 40 kg

Dosing

- eGFR ≥ 60 : nirmatrelvir 300 mg and ritonavir 100 mg by mouth twice daily x 5 days
- eGFR ≥ 30 - < 60 : nirmatrelvir 150 mg and ritonavir 100 mg by mouth twice daily x 5 days
- eGFR < 30 : not recommended

Lab monitoring

- Serum creatinine (within the last 6 months) is encouraged for patients age > 70 years or those with a past medical history of hypertension, diabetes, cardiac disease, or renal disease

Contraindications for use

- History of clinically significant hypersensitivity reactions to nirmatrelvir or ritonavir
- Co-administration with drugs highly dependent on CYP3A4 metabolism
- Co-administration with other potent CYP3A4 inducers

Common adverse reactions (incidence $\geq 1\%$ and ≥ 5 subject difference)

- Dysgeusia, diarrhea, hypertension, and myalgia

Drug interactions

- Ritonavir is a potent CYP3A4 inhibitor and has major interactions with commonly prescribed drugs
- Providers should consider holding or modifying the patient's other drug therapies based on the use of Paxlovid
- Resources for significant drug interactions
 - [Paxlovid's EUA fact sheet for health care providers](#)
 - [University of Liverpool COVID-19 Drug Interactions website](#)

More information

- University of Iowa Health Care Guidance on Treatment Options for Patients with SARS-CoV-2 [Appendix F](#)