The Medical Letter®

on Drugs and Therapeutics

Volume 65

Published online January 9, 2023



IN THIS ISSUE

COVID-19 Update: Tocilizumab (Actemra) FDA-Approved for Treatment of COVID-19

Important Copyright Message

FORWARDING OR COPYING IS A VIOLATION OF U.S. AND INTERNATIONAL COPYRIGHT LAWS

The Medical Letter, Inc. publications are protected by U.S. and international copyright laws. Forwarding, copying or any distribution of this material is prohibited.

Sharing a password with a non-subscriber or otherwise making the contents of this site available to third parties is strictly prohibited.

By accessing and reading the attached content I agree to comply with U.S. and international copyright laws and these terms and conditions of The Medical Letter, Inc.

For further information click: Subscriptions, Site Licenses, Reprints or call customer service at: 800-211-2769

The Medical Letter®

on Drugs and Therapeutics

Volume 65

Published online January 9, 2023

Online Article IN THIS ISSUE

COVID-19 Update: Tocilizumab (Actemra) FDA-Approved for Treatment of COVID-19

COVID-19 Update

Tocilizumab (Actemra) FDA-Approved for Treatment of COVID-19

The interleukin-6 (IL-6) receptor antagonist tocilizumab (*Actemra* – Genentech) has been approved by the FDA for IV treatment of COVID-19 in hospitalized adults who are receiving a systemic corticosteroid and require supplemental oxygen, mechanical ventilation, or extracorporeal membrane oxygenation (ECMO).¹ Tocilizumab was previously available for this indication under an Emergency Use Authorization (EUA); it remains available under an EUA for treatment of children 2-17 years old who are hospitalized with COVID-19 and require oxygen support.²

CLINICAL STUDIES – Issuance of the EUA for tocilizumab was based on the results of four randomized trials (three published; one summarized in the package insert) in a total of 5606 patients who were hospitalized with COVID-19 pneumonia.³⁻⁶ Patients received either tocilizumab or placebo in addition to usual care. In a meta-analysis of these trials examining the subgroup of patients who were receiving corticosteroids at baseline (n=4295), the mortality rate at day 28 was significantly lower with tocilizumab than with placebo (absolute risk reduction 4.6% [95% CI 1.9%-7.3%]); NNT 21.7).⁶

DOSAGE AND ADMINISTRATION – *Actemra* is available in single-dose vials containing 80, 200, or 400 mg of tocilizumab. The recommended dose of tocilizumab for treatment of COVID-19 is 12 mg/kg in patients weighing <30 kg and 8 mg/kg in those weighing >30 kg (max dose 800 mg). Tocilizumab

should be administered as a single IV infusion over 60 minutes. If clinical status does not improve, a second dose can be administered ≥ 8 hours after the first.⁶ The wholesale acquisition cost of one dose of *Actemra* for a 70-kg patient is \$3683.50.⁷

NIH GUIDELINES – The NIH recommends use of either tocilizumab or the oral Janus kinase inhibitor baricitinib (Olumiant) in adults hospitalized with COVID-19 who are receiving dexamethasone and have rapidly increasing conventional oxygen needs and systemic inflammation. Dexamethasone plus either tocilizumab or baricitinib is also recommended for those who require high-flow nasal cannula oxygen, ventilation, or ECMO.⁸ ■

- FDA News Release. FDA roundup: December 23, 2022. Available at: https://bit.ly/3CAn6X1. Accessed January 9, 2023
- An EUA for tocilizumab (Actemra) for COVID-19. Med Lett Drugs Ther 2021; 63:113.
- RECOVERY Collaborative Group. Tocilizumab in patients admitted to hospital with COVID-19 (RECOVERY): a randomised, controlled, open-label, platform trial. Lancet 2021; 397:1637.
- C Salama et al. Tocilizumab in patients hospitalized with Covid-19 pneumonia. N Engl J Med 2021; 384:20.
- IO Rosas et al. Tocilizumab in hospitalized patients with severe Covid-19 pneumonia. N Engl J Med 2021; 384:1503.
- FDA. Fact sheet for health care providers: Emergency Use Authorization for Actemra (tocilizumab). December 21, 2022.
 Available at: https://bit.lv/360BR4Q. Accessed January 9, 2023.
- Approximate WAC. WAC = wholesaler acquisition cost or manufacturer's published price to wholesalers; WAC represents a published catalogue or list price and may not represent an actual transactional price. Source: AnalySource® Monthly. January 5, 2023. Reprinted with permission by First Databank, Inc. All rights reserved. @2023. www.fdbhealth. com/drug-pricing-policy.
- NIH. COVID-19 treatment guidelines. Therapeutic management of hospitalized adults with COVID-19. August 8, 2022. Available at: https://bit.ly/3DfsFsJ. Accessed January 9, 2023.

PRESIDENT: Mark Abramowicz, M.D.; VICE PRESIDENT, EDITOR IN CHIEF. Jean-Marie Pflomm, Pharm.D.; ASSOCIATE EDITORS: Susan M. Daron, Pharm.D., Amy Faucard, MLS, Michael P. Viscusi, Pharm.D. CONSULTING EDITORS: Joanna Esterow, PA-C, Mordechai Sacks, DMSc, PA-C, Brinda M. Shah, Pharm.D., F. Peter Swanson, M.D.

CONTRIBUTING EDITORS: Carl W. Bazil, M.D., Ph.D., Columbia University College of Physicians and Surgeons; Ericka L. Crouse, Pharm.D., B.C.P.P., C.G.P., F.A.S.H.P., F.A.S.C.P., Virginia Commonwealth University, Vanessa K. Dalton, M.D., M.P.H., University of Michigan Medical School; Eric J. Epstein, M.D., Albert Einstein College of Medicine; David N. Juurlink, BPhm, M.D., Ph.D., Sunnybrook Health Sciences Centre; Richard B. Kim, M.D., University of Western Ontario; Sandip K. Mukherjee, M.D., F.A.C.C., Yale School of Medicine; Dan M. Roden, M.D., Vanderbilt University School of Medicine; Esperance A.K. Schaefer, M.D., M.P.H., Harvard Medical School; Neal H. Steigbigel, M.D., New York University School of Medicine; Arthur M. F. Yee, M.D., Ph.D., F.A.C.R., Weill Medical College of Cornell University

MANAGING EDITOR AND DIRECTOR OF CONTENT OPERATIONS: Susie Wong; EDITORIAL ASSISTANT: Karrie Ferrara

FULFILLMENT AND SYSTEMS MANAGER: Cristine Romatowski; EXECUTIVE DIRECTOR OF SALES: Elaine Reaney-Tomaselli EXECUTIVE DIRECTOR OF MARKETING AND COMMUNICATIONS: Joanne F. Valentino; INTERIM PUBLISHER: Jean-Marie Pflomm, Pharm.D.

Founded in 1959 by Arthur Kallet and Harold Aaron, M.D.

Copyright and Disclaimer. The Medical Letter, Inc. is an independent nonprofit organization that provides healthcare professionals with unbiased drug prescribing recommendations. The orial process used for its publications relies on a review of published and unpublished literature, with an emphasis on controlled clinical trials, and on the opinions of its consultants. The Medical Letter, Inc. does not sell advertising or receive any commercial support. No part of the material may be reproduced or transmitted by any process in whole or in part without prior permission in writing. The Medical Letter, Inc. does not warrant that all the material in this publication is accurate and complete in every respect. The Medical Letter, Inc. and its editors shall not be held responsible for any damage resulting from any error, inaccuracy, or omission.

Subscription Services

Address: Customer Service:
The Medical Letter, Inc. Call: 800-211-2769 or 914-235-050
145 Huguenot St. Ste. 312
New Rochelle, NY 10801-759
www.medicalletter.org

Customer Service:

Permissions: Call: 800-211-2769 or 914-235-0500

Fax: 914-632-1733

To reproduce any portion of this issue, please e-mail your request to: permissions@medicalletter.org

Subscriptions (US): 1 year - \$159; 2 years - \$298; 3 years - \$398, \$65 per year for students, interns, residents, and fellows in the US and Canada. Reprints - \$45 per issue or article

Site License Inquiries: E-mail: SubQuote@medicalletter.org Call: 800-211-2769 Special rates available for bulk subscriptions.



Copyright 2023. ISSN 1523-2859

