TO: All Physicians, Advanced Practitioners & Staff

FROM: William Borden, MD, Chief Quality & Population Health Officer
       Michael G. Knight, MD, MSHP, Patient Safety Officer
       Ryan Mouton, PharmD, Pharmacy Operations Manager

RE: COVID-19 Related Drug Shortages

DATE: March 31, 2020

The COVID-19 pandemic continues to affect our nation. While researchers are working to find a treatment for the infection, no medication is currently FDA-approved to treat COVID-19. Novel drugs like remdesivir are currently being studied, and some drugs that are already FDA-approved for other indications are being tried as off-label treatments of COVID-19. These especially include azithromycin, chloroquine, and hydroxychloroquine, but also include baloxavir, lopinavir and ritonavir, oseltamivir, remdesivir, sarilumab, tocilizumab, and sirolimus.

During this crisis, there is understandable concern over the health and safety of loved ones. However, inappropriate prescribing of these experimental treatments to have “just in case” or for patients who are not at high risk of severe illness may lead to an inadequate supply of medications for those who need them most. Stocking up and hoarding can also create shortages or exacerbate existing shortages.

Consequently, hydroxychloroquine is out of stock at the MFA Pharmacy at this time. It is expected to return by mid-April. It remains in limited supply at local retail pharmacies such as CVS and Walgreens as of the time of this communication.

The MFA is assisting our patients as follows:

Providers:

Recommendation 1: Any prescription or medication order for a drug that is also being investigated for the off-label treatment of COVID-19 should be reviewed for appropriateness.

- Patients who are already prescribed these medications for non-COVID-19 indications should continue to have access through new prescriptions or refills of existing prescriptions.
- Outpatient prescriptions for these medications should include a documented diagnosis consistent with the FDA-approved indication or other literature-supported, off-label use.
- Hydroxychloroquine prescriptions may need to be resent to outside pharmacies due to the MFA pharmacy shortage.
Recommendation 2: Prescriptions or medication orders for the off-label treatment of confirmed COVID-19 patients should be prioritized for inpatient use and limited in duration of treatment.

- Decisions to use off-label medications to treat confirmed COVID-19 patients should be made by the inter-professional team after weighing supporting evidence, risks, and potential benefits.
- Informed consent describing the existing evidence, risks, and potential benefits should be established between providers and patients, caregivers, or medical power of attorneys.
- Outpatient prescriptions should be limited to no more than a fourteen-day supply.
- Refills should not be permitted.

Pharmacists:

Recommendation: Inventory of drugs being studied for the treatment of COVID-19 should be maintained responsibly.

- Pharmacists should verify new prescriptions for these medications are appropriate, recognizing that patients newly diagnosed with conditions like rheumatoid arthritis or lupus may be initiating treatment during the coming weeks or months.
- These medications should be stored with limited and documented access similar to controlled substances.

More information on this can be found on the FDA and CDC Websites:

FDA Drug Shortages Index
Centers for Disease Control and Prevention

Please note that the information contained in this document is based on data that are emerging and rapidly evolving because of ongoing research and, as such, is subject to the professional judgment and interpretation of the practitioner due to the uniqueness of each practitioner’s approach to the care of patients with COVID-19 and the needs of individual patients.

If you have any questions, please contact Dr. Michael G. Knight (mknight@mfa.gwu.edu), Dr. Ryan Mouton (rmouton@mfa.gwu.edu).