

In Infections

Omicron illness: Choosing appropriate option

1. It is now obvious that majority of Omicron cases do not need any specific medications except Paracetamol and Anti-allergic.
2. Only in cases with specified high-risk situations with tendency to progression to moderate and severe disease need consideration of Remdesivir, Monoclonal antibody cocktail or Molnupiravir.
3. Multiple therapeutic agents are now available for non-hospitalized patients with mild to moderate COVID-19 who are at high risk of disease progression. Only in such cases following options to be considered:

Option 1: As per available data the use of ritonavir-boosted nirmatrelvir (Paxlovid) in most high-risk, non-hospitalized patients with mild to moderate COVID-19 is favored but it is at present not available in India.

Option 2: As Casirivimab, plus Imdevimab as it is not effective against Omicron, it must be avoided. But casirivimab + imdevimab (antibody cocktail) is still relevant for Delta variant, so if you suspect Delta, go for it within 5 to 10 days of illness. Sotrovimab is effective against Omicron, but not available in India.

Option 3: New trial known as PINETREE trial has opened a new vista to use Remdesivir in mild cases. With risk of high progression.

Option 4: Molnupiravir

- It is widely available now and evidence currently available, molnupiravir appears to be reasonably useful agent in reducing death and composite of hospitalization or death in adult patients with COVID-19 having high risk, with a relatively lower cost.
- The role of molnupiravir cannot be useful especially when it can be used in out-patient settings through oral route with a lower cost. It is likely that it works well against Omicron.
- We do not know about its effectiveness in vaccinated people having breakthrough infections, and outcomes in people having past history of SARS-CoV-2 infection (positive nucleocapsid antibody) It might act in such cases too.
- Remember, short-term use of 5- days is unlikely to have any long-term major concern on individual patient level.

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