Monoclonal Antibody Therapeutics in US Veterans against Delta and Omicron SARS-CoV-2 Variants



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Background

- Anti-SARS-CoV-2 Monoclonal Antibodies has been used with mild to moderate COVIDinfection who are at high risk of progressing severe disease.
- ✤ The FDA use had given emergency products: authorization mAB to (BAM), bamlanivimab+etesevinab casirivimab+imdevimab (CAS), sotrovimab (SOT).
- Bebtelovimab has activity against a broad range of SARS-CoV-2 variants, including the Omicron variant and its subvariants.
- We reviewed the utilization of mABS in our institution during the pandemic as delta variant was replaced by omicron.

Methods and Materials

- Retrospective chart review of US Veterans with confirmed SARS-CoV-2 infection who received mABs from 9/1/2021 to 2/28/22.
- Demographic data, comorbidities, choice of mAB, history of COVID-19 vaccination, SARS-CoV-2 sequencing, and IgG levels to the receptor-biding domain (RBD) of the spike protein in vaccinated USV were reviewed
- Total of 66 patients received mABs, 30 got CAS, 29 Bam, 7 SOT.
- ✤ 22 Veterans were unvaccinated, among vaccinated group 16 received booster dose.
- The median days of COVID diagnosis from last dose of vaccine: Janssen 211 days, Moderna 291 days and Pfizer 222 days

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- ✤ 20 vaccine recipients had anti-SARS-CoV-2 RBD titers at presentation, median 2.60 (0.06-48.08).
- ✤ 10 USV with omicron who received CAS (5) and BAM (5) survived.
- Total 11 patients with Sars-CoV-2 who received mAB were hospitalized, among 11 patients 4 were admitted COVID-19 Pneumonia requiring remdesivir and steroids.
- 2 USV died but not related COVID-19 complications.



Laboratory Data												
UNITED STATES VETERNAS with COVID-19 who received Monoclonal Antibody Therapy	Patient	Age	Date of	Reason for hospitalization	Vaccine	SARS Co2	mAB	Remdesivir/steroids	sequence	Outcome		
64 Men 2 Women			COVID+			lgG		, ,				
Median Age 72.5 (range 32-97 years)	1	86	Sept-21	Weakness. cvstitis	PFZ-2	Not done	CAS/IMD	NO	Not done	Recovered		
56 Caucasian, 8 Black, 2 Hispanic	2	32	Dec 23	Dyspnea, hypoxia, fever	Janssen	0.17	CAS/IMD	YES	Delta	Recovered		
22 Veterans were not vaccinated	2	77		hypotension	PF7-2	Not done		NO	Omicron	Died a month		
3 got JANSSEN, MODERNA 2 shots (MOD -2): 6; MOD-3 (booster) :6 ; Pfizer 2 shots (PFZ-2): 22;	J									later in Rehah		
PFZ-3 10										Contor		
Median Days of COVID diagnosis from last dose of vaccine:	Λ	0	Doc 20	hunatancian		17.0			Omicron	Decovered		
JANSSEN 211 (104 to 257 days)	4	00				12.0				Recovered		
MOD-2 291 (205- 322 days)	5	9/	UCT 5	Altered sensorium	252-2	Not done	BAIVI/EIE	NO	Not done	Died, found to		
MOD-3 56 (16- 61 days)										have		
PFZ-2 222 (96-302 days)										pancreatic		
PFZ-3 78 (8-112 days)										mas		
Symptoms at presentation:	6	69	Oct 19	COPD exacerbation	PFZ-2	0.23	BAM/ETE	NO	Not done	Recovered		
Cough 62%, Dyspnea 24%, Malaise 50%, Diarrhea 11%, Anosmia 11%, Sore Throat 17%, Nasal	7	90	Dec 28	hypoxia	PFZ-3	19.48	BAM/ETE	YES	Omicron	Recovered		
congestion 41%, Fever 32%	8	45	Dec 29	Pulmonary embolism	No vac	Not done	BAM/ETE	NO	Delta	Recovered		
BMI median 30.88 (16.61 to 47.35)	9*	91	Dec 29	weakness	Mod-2	23.3	BAM/ETE	NO	Not done	Recovered		
anti-SARS-CoV-2 receptor biding domain antibody fiters at presentation, median 2.60 (0.06-4808).	10**	62	Dec 29	Weakness, opacities on CXR	Janssen	32	SOT	YES	Not done	Recovered		
Viral Confection: Rhinovirus 2, Respiratory Syncytial Virus 1	11***	73	lan 6	Weakness dysnnea	PF7-2	Not done	SOT	YFS	Delta	Recovered		
COIVIORBITTIES:		10										
Diabetes: 24 Veterans (36%)												
Hypertension 44 (67%)												
** liver transplant recipient. Virus could not be sequenced.												
$^{\prime}$ ZL (52%)												
SIF 1 RA 2 Lung CA 1 Stomach CA 1 Repair Transplant 1 Liver transplant 1 Crohn's 1												
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✤ As the pandemic transitioned from Delta to Omicron variants, mAB treatments in USV remained successful even in those USV who received therapies not active for omicron.

and boosted

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Conclusion

Delta and omicron infections were seen in vaccinated

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