Anti-SARS-CoV-2 Monoclonal Antibodies (mAb)

Our bodies naturally make antibodies to fight infection. mAbs are made in a lab and given to people directly through an intravenous (IV) infusion. Monoclonal antibodies may help patients recover faster and keep patients from getting severely ill with COVID-19.

WHEN THEY ARE USED
1. Used to treat patients with mild to moderate COVID-19 infections. Patients must be:
   • Positive for COVID-19
   • 12 years old or older
   • NOT requiring hospitalization
   • NOT requiring supplemental oxygen

2. Following exposure to COVID-19 in patients who are nonvaccinated, incompletely vaccinated, or immuno compromised

TYPES
There are three types approved in the United States:
• Bamlanivimab plus etesevimab*
• Casirivimab plus imdevimab (REGEN-COV)*
• Sotrovimab**

*Active against Delta variant; not active against Omicron variant
**Active against Omicron variant

HOW IT WORKS
• Blocks the virus that causes COVID-19 from attaching to cells in your body
• This makes it difficult for the virus to reproduce inside your body
• Also activates your immune system by helping target and kill the virus and infected cells

HOW IS IT GIVEN
• Given intravenously (through an IV)
• Time to deliver infusion is typically less than 1-2 hours

INVESTIGATIONAL MEDICATIONS
• Available under an emergency access mechanism called an EUA
• Not undergone the same type of review as an FDA-approved medicine
• But based on the totality of scientific evidence available, the benefits outweigh the known and potential risks and that there are no adequate, approved, and available alternatives

FAQ ABOUT mAb
HOW SOON SHOULD mAb BE GIVEN?
• Must be given within 10 days of exposure or first symptoms of COVID-19
• But the sooner the better

WHERE ARE mABs OFFERED?
• At infusion centers, urgent care clinics, and emergency rooms
• Contact your doctor for sites in your area

CAN I STILL GET VACCINATED?
• YES! But according to the CDC, you should wait 90 days after mAb treatment before getting vaccinated