

**Alabama Department of Public Health (ADPH)
Alabama Emergency Response Technology (ALERT)
Health Alert Network (HAN)
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Monoclonal Antibody Update: Effectiveness Against COVID-19 Omicron Variant

Over half of the SARS-CoV-2 viral variants currently circulating in the U.S., including Omicron, are likely to be associated with resistance to the widely available monoclonal antibody treatments, including bamlanivimab and etesevimab administered together or REGEN-COV, based on in vitro data. However, sotrovimab appears to retain activity against the Omicron variant based on the same data¹, although supplies are currently limited.

Therefore, the federal Department of Health and Human Services (HHS) announced last week that further allocations of bamlanivimab and etesevimab together, etesevimab alone, and REGEN-COV would be paused nationally pending updated data from the CDC. Nationwide shipments of sotrovimab have resumed, and delivery of 55,000 doses of product has begun. An additional 300,000 doses of sotrovimab will be available for distribution in January, including shipments to Alabama. Unfortunately, current demand exceeds supply and many treating facilities have discontinued administration as a result of having run out of sotrovimab.

Health care providers should review the updated Antiviral Resistance information in the Healthcare Provider Fact Sheet for each authorized therapeutic for details regarding specific variants and resistance^{2,3,4}. The CDC publishes information about circulating variants in the United States by region. The frequency of the Omicron variant is increasing throughout the U.S. and health care providers should refer to these frequency data as they choose a therapeutic option for their patients.

The situation varies in different geographic regions and different health care facilities, and there may be circumstances, such as lower frequency of Omicron in a region and limited supply of alternative treatment options, in which the use of existing site supply of these therapeutics is clinically appropriate. Clinical judgement, as always, is recommended.

Given that the Omicron variant has been recently found to comprise a lower proportion of new infections nationally than was initially suspected, discussions are ongoing at the federal level about how long this pause will continue.

As additional data become available, updates and further recommendations will be provided.

1. NIH. OpenData Portal: SARS-CoV-2 variants & therapeutics. Therapeutic activity explorer. Accessed December 19, 2021. <https://opendata.ncats.nih.gov/variant/activity>
2. <https://www.fda.gov/media/145802/download>
3. <https://www.fda.gov/media/145611/download>
4. <https://www.fda.gov/media/149534/download>