Five-day course of remdesivir beneficial in severe COVID-19

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(HealthDay)—There seems to be no significant difference between a

five- and 10-day course of remdesivir for patients with severe COVID-19 not requiring mechanical ventilation, according to a study published online May 27 in the *New England Journal of Medicine*.

Jason D. Goldman, M.D., M.P.H., from the University of Washington in Seattle, and colleagues conducted a randomized phase 3 trial involving hospitalized patients with confirmed severe acute respiratory coronavirus 2 infection, oxygen saturation of 94 percent or less, and radiologic evidence of pneumonia. A total of 397 patients were randomly assigned to receive remdesivir for either five or 10 days (200 and 197, respectively).

Patients randomly assigned to the 10-day group had significantly worse clinical status at baseline compared with those randomly assigned to the five-day group. The researchers found that by day 14, a clinical improvement of 2 points or more on the ordinal scale occurred in 64 and 54 percent of patients in the five- and 10-day groups, respectively. Patients in the 10-day group had a distribution in clinical status at day 14 that was similar to that among patients in the five-day group after adjustment for baseline clinical status.

"In our current era of limited remdesivir supplies, priority should be given to a five-day remdesivir regimen for patients at the early stages of severe disease (i.e., when they are receiving supplemental oxygen but have not yet been intubated), since the evidence for benefit is clearest in this population," write the authors of an accompanying editorial.

The study was funded by Gilead Sciences, the manufacturer of remdesivir.

More information: Abstract/Full Text
Editorial