



DEPARTMENT OF
HEALTH AND HUMAN SERVICES

Promoting and protecting health, well-being, self-sufficiency, and safety of all in Marin County.

May 24, 2022



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COVID-19 Therapeutics | Paxlovid Rebound

Background

COVID-19 case rates in Marin County continue to increase. Paxlovid remains the preferred antiviral agent for early-stage treatment of mild to moderate COVID-19 among persons at high risk for progression to severe disease. Paxlovid treatment helps prevent hospitalization and death due to COVID-19.

Today, the Centers for Disease Control and Prevention (CDC) issued a [health alert](#) to update healthcare providers and the public on the potential for recurrence of COVID-19 or “COVID-19 rebound.” A brief return of symptoms may be part of the natural history of SARS-CoV-2 (the virus that causes COVID-19) infection in some persons, independent of treatment with Paxlovid and regardless of vaccination status.

COVID-19 rebound has been reported to occur between 2 and 8 days after initial recovery and is characterized by a recurrence of symptoms or a new positive viral test after having tested negative. Case reports suggest that persons treated with Paxlovid who experience COVID-19 rebound have had mild illness; there are no reports of severe disease. Persons experiencing rebound who test positive should be presumed to be infectious. There is currently no evidence that additional treatment is needed when COVID-19 rebound is suspected.

Actions Requested of Providers

1. Test patients (rapid antigen test) with symptoms consistent with COVID-19 rebound. Advise patients with rebound to isolate following California Department of Public Health (CDPH) [guidance](#).
2. Stay [up to date](#) on the evaluation and management of COVID-19, maintain therapeutics prescribing competence, and remain aware of the [test-to-treat resources](#) available to patients.
3. Review the [FACT SHEET FOR HEALTHCARE PROVIDERS: EMERGENCY USE AUTHORIZATION FOR PAXLOVID](#).
4. Concern for rebound should not prevent providers from prescribing Paxlovid to patients who are at higher risk for progression to severe disease (see list below).
5. Confirm that patient has an active COVID-19 infection with a positive rapid antigen or molecular test prior to treatment.
6. Review eligibility criteria, adverse reactions, and drug interactions with patients. Consultation with a clinical pharmacist and the [Liverpool COVID-19 Drug Interactions website](#) should be considered.
7. Refer patients who require emergency care due to severity of symptoms to the emergency room for evaluation.

Immunocompromising Conditions

- Active treatment for solid tumor and hematologic malignancies
- Receipt of solid-organ transplant and taking immunosuppressive therapy
- Receipt of CAR-T-cell therapy or hematopoietic cell transplant (HCT) Within 2 years of transplantation OR on immunosuppressive therapy
- Moderate or severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection:
- HIV and CD4 cell counts <200/mm³
- History of an AIDS-defining illness without immune reconstitution
- Clinical manifestations of symptomatic HIV
- Active treatment with high-dose corticosteroids (i.e., ≥20 mg prednisone or equivalent per day for ≥ 2 weeks); alkylating agents; antimetabolites; transplant-related immunosuppressive drugs; cancer chemotherapeutic agents classified as severely immunosuppressive; tumor necrosis factor (TNF) blockers; or other biologic agents that are immunosuppressive or immunomodulatory

CDC-defined Underlying Medical Conditions Associated with Higher Risk for Severe COVID-19

- Cancer
- Cerebrovascular disease
- Chronic kidney disease
- Interstitial lung disease
- Current pulmonary embolism
- Pulmonary hypertension
- Bronchopulmonary dysplasia
- Bronchiectasis
- COPD
- Cirrhosis
- Non-alcoholic fatty liver disease
- Alcoholic liver disease
- Autoimmune hepatitis
- Diabetes mellitus, type 1 and type 2
- Congestive heart failure
- Coronary artery disease
- Cardiomyopathy
- Mood disorders - including depression, Schizophrenia spectrum disorders
- Obesity (BMI ≥ 30 kg/m²)
- Pregnancy
- Smoking
- Active Tuberculosis
- Social determinants of health, which may include but are not limited to: unstable housing, poverty or food insecurity, single head of household in minimum wage employment, non-English speaking immigrant, active substance use disorder.