

The Effectiveness of Tixagevimab/Cilgavimab (Evusheld) in Preventing Severe SARS-CoV-2 (COVID) Infection After Kidney Transplantation

BACKGROUND

Vaccine use is of particular interest in transplant patients given the prolonged immunosuppression they require to reduce graft rejection

Evusheld was developed and granted emergency use authorization in 2021 due to the lack of Covid vaccine response found in immunocompromised populations

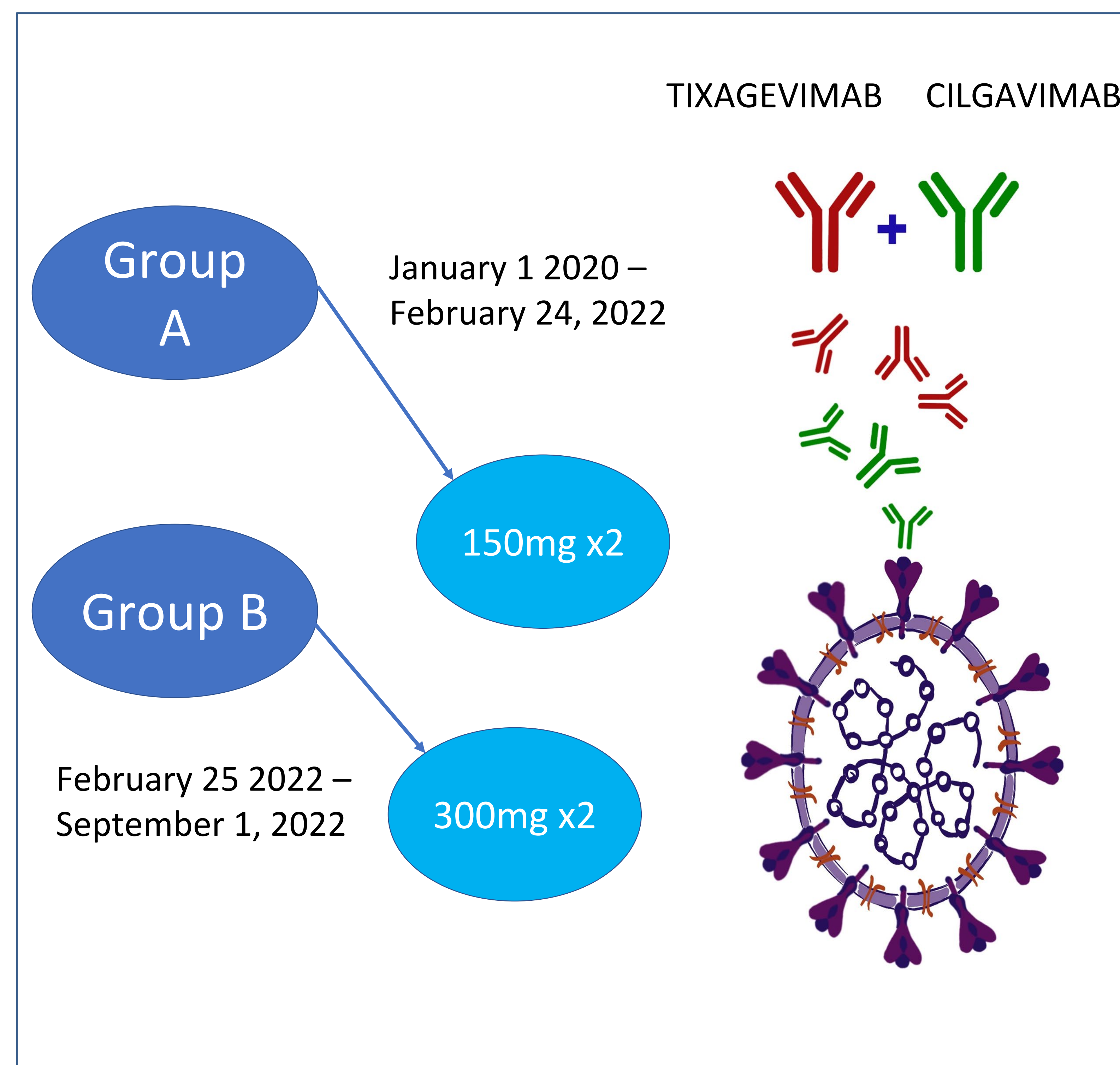
Our transplant center developed a protocol to screen newly transplanted patients for Evusheld. Newly transplant patients were screened prior to discharge home and patients in our clinic were prioritized by most recent induction with lymphocyte depleting agents (thymoglobulin)

Screening: immunocompromised patients who underwent recent kidney transplantation, who hadn't received a monoclonal Ab to treat Covid in the last 3 months, weren't vaccinated within the last 2 weeks, not had Covid in the last 2 weeks.

The purpose of this study is to examine the efficacy of Evusheld on patients undergoing renal transplant

METHODS

This was a retrospective study of all kidney transplants at a single institution from January 1, 2022 to December 1, 2022.



	Group A (150 mg)	Group B (300mg)
Recipients (n)	89	154
Positive COVID test	10 (11.2%)	7 (4.5%)
Hospital admission	5 (5.6%)	7 (4.5%)
Severe COVID	0	0
1-year graft survival	89 (100%)	154 (100%)
1-year patient survival	89 (100%)	154 (100%)

EVUSHELD

Recombinant human IgG (dual monoclonal)

PreP therapy: prophylaxis against COVID-19

Mechanism of action: binds to spike protein on COVID virus

Route: IM into bilateral buttocks

Side effects: HA, dizziness, cardiac events

Effective: 14 days after administration

Duration of effectiveness: 6 months

RESULTS

89 patients received an initial dose (Group A) while 154 patients received an adjusted dose (Group B)

Of patients in group A, only 50% of those who tested positive for COVID required hospital admission. In Group B, all patients who tested positive for COVID required hospital admission.

There was no impact in graft or patient survival at 1 year for either group

CONCLUSIONS

Evusheld is effective at preventing severe COVID infections and death after renal transplant regardless of dose

REFERENCES

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