

## The Thoracic Society of Australia and New Zealand response to the PHARMAC Consultation on COVID-19 Treatments

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*The Society operates in compliance the Medicines Code of Australia. Please see the TSANZ Sponsorship Policy for more information.*

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### About the TSANZ

The Thoracic Society of Australia and New Zealand (TSANZ) is a health promotion charity whose mission is to lead, support and enable all health workers and researchers who aim to prevent, cure, and relieve disability caused by lung disease. TSANZ is the only Peak Body in both Australia and New Zealand that represents all health professionals working in all fields of respiratory health.

The TSANZ has a membership base of over 1800 individual members from a wide range of health and research disciplines. The TSANZ is a leading provider of evidence-based guidelines for the treatment of respiratory disease in Australia and New Zealand and undertakes a large amount of professional education and training. The TSANZ is also responsible for significant research administration and coordinates an accredited respiratory laboratory program.

As the leaders in lung health, we promote the:

- highest quality and standards of patient care
- development and application of knowledge about respiratory health and disease
- highest quality air standards including a tobacco smoke free society and effective regulation of novel nicotine delivery systems
- collaboration between all national organisations whose objects are to improve the wellbeing of individuals with lung disease and to promote better lung health for the community
- professional and collegiate needs of the Membership

The TSANZ are grateful for the invitation to provide feedback to the proposal on access criteria for the COVID-19 treatments Molnupiravir and Nirmatrelvir plus Ritonavir. These treatments have been shown to be effective in reducing the severity of COVID-19 and would help improve outcomes for many patients and potentially relieve the burden on the health system. The TSANZ is part of the Australian National COVID-19 Clinical Evidence Taskforce<sup>1</sup> and have helped to shape these guidelines for clinical care of COVID-19. We will continue to advocate to improve respiratory health for all through evidence-based practice and policy.

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<sup>1</sup> National COVID-19 Clinical Evidence Taskforce <https://covid19evidence.net.au/>

## Consultation Topic

Pharmaceutical Management Agency of New Zealand (PHARMAC) is seeking stakeholder views on a proposal on access criteria for two COVID-19 treatments, Molnupiravir and Nirmatrelvir plus Ritonavir.

## TSANZ Feedback

The Thoracic Society are supportive of the proposal made by PHARMAC. Evidence for our response reflects the work of the Australian National COVID-19 Clinical Evidence Taskforce (the Taskforce), a collaboration in which the Thoracic Society has had an active role since its inception. The Taskforce recommendations are attached to this submission as an appendix. The proposed eligibility criteria align with those of the Taskforce and will improve accessibility to treatment for those who need it.

### Nirmatrelvir plus Ritonavir (Paxlovid)

The Thoracic Society supports the suggested access criteria and welcomes the fact they are the same for both Nirmatrelvir plus Ritonavir (Paxlovid) and Molnupiravir as this will allow primary care clinicians to perform a single screening exercise.

With regard to the following comorbidity statement:

\*\* Comorbidities associated with a higher risk of severe outcomes are: severely immunocompromised, significant cardiac disease, uncontrolled hypertension, diabetes, chronic lung disease, chronic kidney disease, chronic liver disease, cancer, history of smoking, BMI 40 or higher.

The Thoracic Society suggest this list of comorbidities align with the list on the Ministry of Health website below as a few conditions are missing e.g. severe mental illness. There were insufficient numbers of trial participants with some of these risk factors to determine the extent to which Nirmatrelvir plus Ritonavir impacts hospitalisation or death, however as these conditions frequently result in poorer outcomes for patients following SARS-CoV-2 infection they will likely benefit from treatment.

<https://www.health.govt.nz/covid-19-novel-coronavirus/covid-19-information-specific-audiences/covid-19-higher-risk-people>

### Molnupiravir

The Thoracic Society welcomes the same criteria as above except to add that, in the event that both Paxlovid and Molnupiravir are available and suitable for the patient, Paxlovid is the preferred medication. Molnupiravir is recommended where Paxlovid is not suitable or not available.

The Thoracic Society note that the NZ criteria aligns with the [Taskforce recommendation](#) but takes local equity issues and high-risk populations into consideration.

## Prescriber Factsheet

The Thoracic Society recommend PHARMAC produces prescriber factsheets to highlight to clinicians important points about each of these antivirals.

### *1. Drug-drug interactions with Nirmatrelvir plus ritonavir*

There are significant drug–drug interactions between ritonavir and many commonly used medications. A drug interaction factsheet has been developed by the FDA which will be adapted for local prescribers.

### *2. Molnupiravir*

- Contraindicated with pregnancy
- Contraception is required for both male and female of childbearing age due to the embryonic mutagenesis potential

## Concluding Remarks

Both Molnupiravir and Nirmatrelvir plus Ritonavir are proven to be effective at reducing the risk of severe COVID-19 illness in their respective patient groups. We note that management of COVID-19 is a rapidly evolving space of evidence and knowledge and we applaud PHARMAC for the quick development of this proposal. We hope to continue to work together to tackle respiratory health issues and to improve respiratory health for all New Zealanders.

Yours Sincerely,



Dr James Fingleton PhD, MRCP  
President NZ Branch  
Thoracic Society of Australia and New Zealand