



Memo

Date:

December 12, 2022

To: Health care providers

From: Dr. Chris Simpson, Executive Vice President, Medical

CC: Brian Ktytor, Chief Regional Officer, North East and North West
Anna Greenberg, Chief Regional Officer, Toronto and East
Susan deRyk, Chief Regional Officer, Central and West
Mark Walton, Senior Vice President, COVID-19 Pandemic Response

Re: Updated recommendation on the use of Evusheld

Evusheld is a monoclonal antibody therapy against COVID-19. In Ontario, Evusheld has been used for the prevention of COVID-19 in select immunocompromised patients since April 2022. This memo is intended to inform health care providers about Ontario Health's updated recommendation on the use of Evusheld in Ontario.

Background and recommendation

Recent evidence indicates that Evusheld is likely ineffective against multiple variants that are currently circulating in Ontario (including BA.4.6, BF.7, BQ.1, and BQ.1.1). These variants are expected to comprise >55% of circulating variants as of December 7, 2022, according to [Public Health Ontario surveillance data](#). The prevalence of variants that are resistant to Evusheld is expected to continue to rise given weekly relative growth rates.

Based on this information:

- Ontario Health no longer recommends routine use of Evusheld for pre-exposure prophylaxis for any patient group, including immunocompromised patients.
- Ontario Health does not recommend use of Evusheld for the treatment of COVID-19.

This recommendation was developed based on best available evidence and input from Ontario Health's Evusheld Clinical Working Group. Other jurisdictions have proposed similar recommendations for Evusheld (for example, [British Columbia](#)).

Evusheld will remain available to be dispensed through pharmacies for use as pre-exposure prophylaxis in exceptional circumstances where the health care provider and patient have determined that the potential benefit outweighs the risks (e.g., with consideration to regional prevalence of resistant subvariants and individual patient risk factors).

Review Ontario Health’s full [recommendation on the use of Evusheld](#) for additional detail.

Actions for health care providers

Health care providers who already have appointments scheduled to administer Evusheld may use clinical judgment and discussion with the patient to determine whether Evusheld should be administered.

Health care providers should communicate with patients who have received Evusheld to:

- Inform patients about Evusheld’s lack of effectiveness against certain circulating variants and that if they have received Evusheld in the past, they cannot rely on it for protection.
- Advise patients of the importance of immunization as the best method to remain protected against COVID-19.
- Advise patients to continue to limit potential exposure to COVID-19 through public health measures such as masking and limiting contacts.
- Advise patients to immediately seek medical advice if signs or symptoms of COVID-19 occur.

Ontario Health’s [Evusheld patient handout](#) has been revised to support communications with patients as outlined above.

Resources

- [Ontario Health Recommendation on the Use of Evusheld](#)
- [Evusheld patient handout](#)
- [Evusheld product monograph](#)
- [Health Canada Health Professional Risk Communication on Evusheld](#)

Note: The following document has been archived and will not be updated:

- Information about Evusheld (tixagevimab and cilgavimab): Reference for health care providers who may be prescribing or administering Evusheld

Questions may be directed to the Ontario Health regional contacts listed below. Thank you for your attention to this information and for your ongoing dedication to providing the best possible care for your patients.

Ontario Health regional contacts

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