

Disparities identified in dispensing of oral antivirals for COVID-19

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Disparities are seen in the dispensing of oral antiviral drugs for treatment

of COVID-19 based on social vulnerability zip codes, according to research published in the Oct. 28 issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Noting that the U.S. Department of Health and Human Services (HHS) has been distributing nirmatrelvir/ritonavir and molnupiravir at no cost since their authorization in December 2021 to reduce the risk for COVID-19-associated hospitalization and [death](#) in those at risk, Meg Sullivan, M.D., from the U.S. Department of Health and Human Services in Washington, D.C., and colleagues examined disparities in dispensing rates. Data were obtained from provider sites during Dec. 23, 2021, to May 21, 2022.

The researchers found that the data indicated substantial [disparities](#) in the population-adjusted dispensing rates in high versus medium and low social vulnerability zip codes. Dispensing rates for the four-week period of April 24 to May 21, 2022, were 122, 247, and 274 per 100,000 residents in high-, medium, and low-vulnerability zip codes, respectively (19, 42, and 39 percent of the overall population-adjusted dispensing rates).

"The COVID-19 therapeutics program represents the largest scale HHS distribution of antivirals, with approximately 16 million COVID-19 treatment courses delivered through August 2022," the authors write. "Ensuring equitable access to antivirals is essential to improving patient outcomes."

More information: [Abstract/Full Text](#)

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