

Monoclonal antibody treatment safe for pregnant persons with mild to moderate COVID-19

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A cohort study of more than 900 pregnant persons has found that monoclonal antibody (mAb) treatment for mild to moderate COVID-19

is safe for clinical use. Reported adverse effects were also rare and mild. The study is published in *Annals of Internal Medicine*.

mAb treatment is associated with decreased hospitalization and death in outpatients with mild to moderate COVID-19. Pregnancy is currently considered a risk factor for [severe disease](#), and guidelines recommend the use of mAb for treatment of pregnant persons with COVID-19. However, data on effectiveness and safety are limited.

Researchers from the University of Pittsburgh School of Medicine conducted a cohort study of 944 pregnant persons between April 2021 and January 2022. Of all participants, 58% received mAb treatment and 69% of those persons were given sotrovimab. The authors found that among treated persons, drug-related adverse events occurred in 1.4% of participants and there were no differences in any obstetric-associated outcome among 778 persons who delivered. They also report no difference in 28-day COVID-19–associated outcomes and non-COVID-19–related hospital admissions for mAb treatment compared with no mAb treatment.

According to the authors, in the context of their study, pregnant persons with minimal comorbidities and low risk for severe disease in the omicron variant era may not benefit from treatment with the routine use of mAbs. However, they note that it is unknown whether mAbs would benefit (or harm) pregnant persons with additional [risk factors](#) for severe disease, and whether different mAbs are variably effective against different SARS-CoV-2 variants in pregnant persons.

More information: *Annals of Internal Medicine* (2022).
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