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New WHO COVID-19 treatment guidelines now strongly recommend Lilly's baricitinib for patients with severe or critical COVID-19

New guidelines released by the World Health Organization (WHO) on treatments for COVID-19 strongly recommend the use of baricitinib in combination with corticosteroids for severely or critically ill patients. This recommendation, published in the British Medicine Journal (BMJ) on January 13, 2022, forms the eighth update of WHO's living guidelines on therapeutics and COVID-19 and is based on evidence from seven trials involving more than 4,000 patients with non-severe, severe and critical COVID-19.

"The WHO's recommendation to use baricitinib for patients with severe or critical COVID-19 reinforces the important role of baricitinib," said Lotus Mallbris, M.D., Ph.D., vice president of global immunology development and medical affairs at Lilly. "We are confident in our ability to manufacture and meet increased demand for baricitinib around the globe due to the unprecedented surges in COVID-19 cases. We are deeply committed to ensuring baricitinib is available and accessible to all patients with COVID-19 for whom this treatment is appropriate, including in low- and lower-middle-income countries, and continue to partner closely with regulatory bodies, international organizations and governments."

Baricitinib is approved or authorized for emergency use for treatment of certain hospitalized patients with COVID-19 in 15 countries. To date, more than 740,000 patients globally are estimated to have been treated with baricitinib for COVID-19. In the U.S., baricitinib is authorized by the U.S. Food and Drug Administration (FDA) for emergency use in hospitalized adults and pediatric patients two years of age or older requiring supplemental oxygen, noninvasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO). The FDA has granted priority review for the supplemental new drug application for baricitinib for the treatment of certain hospitalized patients with COVID-19, with an anticipated regulatory action in Q2 2022. The company continues to explore the medicine's potential use in COVID-19 with other regulatory agencies around the world.

Authorized Use Under the EUA and Important Safety Information for baricitinib (in the United States) for COVID-19

Baricitinib is authorized for use under an Emergency Use Authorization (EUA) for treatment of COVID-19 in hospitalized adults and pediatric patients 2 years of age or older requiring supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO).

Baricitinib has not been approved for the treatment of COVID-19, but has been authorized for emergency use by the FDA. Baricitinib is authorized under an EUA only for the duration of the declaration that circumstances exist justifying the authorization of the EUA of baricitinib under Section 564(b)(1) of the Act, 21 U.S.C. § 360bbb-3(b)(1), unless the declaration is terminated or authorization revoked sooner.

For more information about the authorized use of baricitinib in COVID-19 and mandatory requirements of the EUA, please see the FDA Letter of Authorization, Fact Sheet for Healthcare Providers and Fact Sheet for Patients, Parents and Caregivers (English) (Spanish).

Important Safety Information about baricitinib for COVID-19
The following provides essential safety information on the unapproved use of baricitinib under the Emergency Use Authorization.

Warnings

Serious Infections: There is limited information regarding use of baricitinib in patients with COVID-19 and concomitant active serious infections.

Serious infections have occurred in patients receiving baricitinib. Avoid the use of baricitinib with known active tuberculosis. Consider if the potential benefits outweigh the potential risks of baricitinib treatment in patients with active serious infections other than COVID-19 or chronic/recurrent infections.

Thrombosis: In hospitalized patients with COVID-19, prophylaxis for venous thromboembolism is recommended unless contraindicated. If clinical features of deep vein thrombosis or pulmonary embolism occur, patients should be evaluated promptly and treated appropriately.

Abnormal Laboratory Values: There is limited information regarding use of baricitinib in patients with COVID-19 and any of the following clinical findings: absolute neutrophil count (ANC) <1000 cells/mm^3, absolute lymphocyte count (ALC) <200 cells/mm^3, and hemoglobin <8 g/dL.

Evaluate estimated glomerular filtration rate (eGFR), liver enzymes, and complete blood count at baseline and thereafter according to local patient management practice. Monitor closely when treating patients with abnormal baseline and post-baseline laboratory values. Follow dose adjustments as recommended in the Fact Sheet for Healthcare Providers for patients with abnormal renal, hematological and hepatic laboratory values. Manage patients according to routine clinical guidelines.

Vaccinations: Avoid use of live vaccines with baricitinib.

Hypersensitivity: If a serious hypersensitivity occurs, discontinue baricitinib while evaluating the potential causes of the reaction.

See **Warnings and Precautions** in the FDA-approved full Prescribing Information and Medication Guide for additional information on risks associated with longer-term treatment with baricitinib.

Serious Side Effects

Serious venous thrombosis, including pulmonary embolism, and serious infections have been observed in COVID-19 patients treated with baricitinib and are known adverse drug reactions of baricitinib.

Adverse Reactions

In the COVID-19 clinical trials, adverse drug reactions in the safety population occurring in ≥ 1% of patients treated with baricitinib were alanine aminotransferase (ALT) ≥3 x upper limit of normal (ULN) (18.0%), aspartate aminotransferase (AST) ≥3 x ULN (11.5%), thrombocytosis >600,000 cells/mm^3 (8.2%), creatine phosphokinase (CPK) >5 x ULN (3.7%), neutropenia <1000

cells/mm^3 (2.2%), deep vein thrombosis (1.5%), pulmonary embolism (1.4%), and urinary tract infection (1.3%).

Use in Specific Populations

Pregnancy: Baricitinib should be used during pregnancy only if the potential benefit justifies the potential risk for the mother and the fetus.

Renal Impairment: There are limited data for baricitinib in patients with severe renal impairment. Baricitinib is not recommended for patients who are on dialysis, have end-stage renal disease, or have acute kidney injury.

Hepatic Impairment: Baricitinib has not been studied in patients with severe hepatic impairment. Baricitinib should only be used in patients with severe hepatic impairment if the potential benefit outweighs the potential risk.

Please see Fact Sheet for Healthcare Providers and Fact Sheet for Patients, Parents and Caregivers (English) or Fact Sheet for Patients, Parents and Caregivers (Spanish).

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