

Who can administer

May be administered by registered competent doctor or nurse/midwife

Important information

- **May only be prescribed as per HSE national guidelines**
- Supply MUST be ordered on a named patient basis by pharmacy following initiation by completion of the [form attached to this monograph](#) by ward pharmacist.
- See 'Monitoring requirements' below
- **Co-administration of remdesivir and chloroquine or hydroxychloroquine is not recommended** (possible decreased effect of remdesivir)

Available preparations

Veklury 100mg vial

Reconstitution

Water for injection 19ml per 100mg vial (final concentration upon addition is 5mg/ml i.e. **100mg in 20ml**)

- Discard the vial if a vacuum doses not pull the sterile water for injection into the vial
- Immediately shake the vial for 30 seconds
- Allow the contents to settle for 2 to 3 minutes. A clear solution should result
- If the contents of the vial are not completely dissolved, shake the vial again for 30 seconds, and allow the contents to settle for 2 to 3 minutes more
- **Dilute further prior to administration**

Infusion fluids

Sodium chloride 0.9%

Methods of intravenous administration

Intermittent intravenous infusion

- Withdraw and discard a volume of infusion fluid from the bag equal to the volume of drug solution being added
- Add the required volume of drug solution to the infusion bag
- Gently invert the bag 20 times to mix the solution in the bag
- **Do not shake**
- Infuse over **30 to 120 minutes** as per table below. Slower infusion rates, with a maximum infusion time up to 120 minutes can be considered to potentially prevent hypersensitivity reactions
- After the infusion is complete, flush line with at least 30ml Sodium chloride (at the same rate of infusion as the drug was being given at)
- **Extravasation** is likely to cause tissue damage due to low pH of remdesivir infusion (**particularly when diluted in 100ml**) -monitor the infusion site (ref 1)

| Infusion bag volume | Infusion time (minutes) |
|-------------------------------------|--|
| 250ml (safer, preferred) | 30 to 120 minutes (slower infusion rate to potentially prevent hypersensitivity reactions) |
| 100ml (if severe fluid restriction) | |

Dose in adults

Usual dose in patients >40kg

- **Day 1:** Give a loading dose of 200mg
- **Subsequent days:** Give 100mg once daily
- **Duration of treatment:** Usually 3 days (can be used for up to 5 days as per hse guideline e.g. if requiring oxygen). The duration of treatment recommended in national guidelines can be checked in the linked [HSE national guideline](#).

Renal impairment

- No dose adjustment is required in patients with renal impairment, including those on dialysis.

Hepatic impairment

- No dose adjustment is required in patients with mild, moderate or severe hepatic impairment.

Monitoring

Hypersensitivity reactions

- Infusion-related and anaphylactic reactions have been observed
- Slower infusion rates, with a maximum infusion time up to 120 minutes can be considered to potentially prevent hypersensitivity reactions
- If signs and symptoms of a clinically significant hypersensitivity reaction occur, immediately discontinue administration of the drug and initiate appropriate treatment

Transaminase elevations

- Liver function should be determined prior to starting remdesivir and should be monitored throughout treatment.

Further information

- For further information regarding **drug interactions** see [this website](#)

Storage

- Store at room temperature or in the fridge
- It is recommended to reconstitute the drug and then prepare the infusion for immediate administration. However, the reconstituted solution is stable for 48 hours in the fridge if necessary

References

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1. Injectable Medicines guide- downloaded from Medusa 6th Oct 2020

Therapeutic classification

Antiviral