

# STUDY A5401: SYMPTOM AND VIRAL REBOUND IN UNTREATED COVID-19 INFECTION

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# STUDY OBJECTIVE & BACKGROUND

## Background:

- ▶ There are reports of people experiencing worsening symptoms and/or virologic rebound after completing nirmatrelvir-ritonavir (Paxlovid) treatment
  - ▶ This has been described in patients who did not receive nirmatrelvir-ritonavir
- ▶ There are few published studies on this issue

## Objective:

Determine how common symptom or viral rebound of COVID-19 is in untreated outpatients. This is a secondary analysis from the ACTIV-2 participants in the placebo group.

- ▶ Primary analysis: Rebound after study day 0
- ▶ Secondary analysis: Rebound on or after study day 5

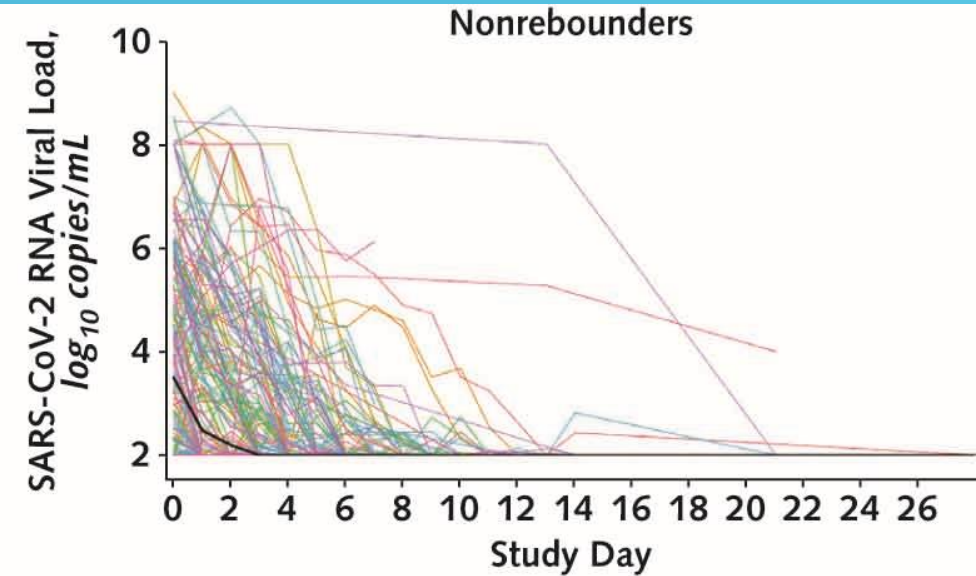
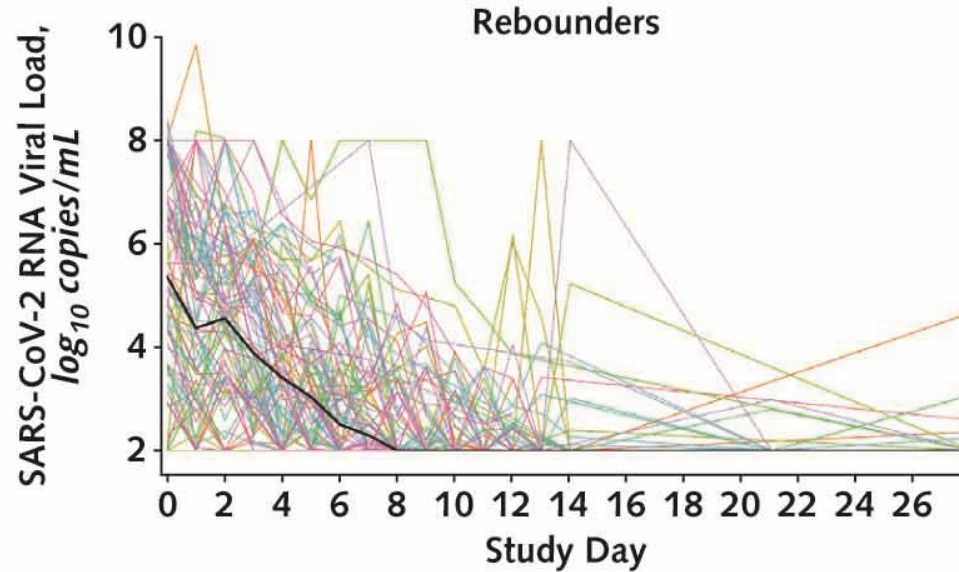
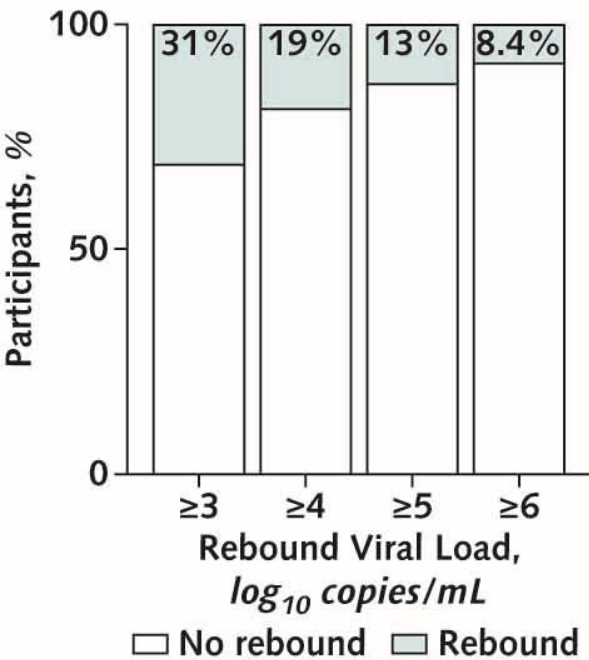
# POPULATION OF THE STUDY

- ▶ Study population included 568 participants enrolled in ACTIV-2/A5401 trial who received placebo
- ▶ Viral rebound =  $\geq 0.5 \log_{10}$  viral RNA copies/mL
  - ▶ Anterior nasal swabs were collected days 0-14, 21, and 28
  - ▶ Symptom severity was recorded from day 0 – day 28
- ▶ Symptom rebound = 4-point total symptom score increase from baseline
  - ▶ Symptom score was calculated each day as the sum of scores for 13 targeted symptoms
    - ▶ Feverishness, cough, shortness of breath, sore throat, muscle pain, fatigue, headache, chills, nasal congestion, nasal discharge, nausea, vomiting, and diarrhea

**Table 1.** Demographic Characteristics of Participants Categorized as Rebounders and Nonrebounders After Study Enrollment (Primary Analysis Definition)\*

Characteristic	Symptom Rebound Analysis (n = 563)				Nasal Viral Rebound Analysis (n = 261)			
	All (n = 563)	Rebounders (n = 148)	Nonrebounders (n = 415)	Odds Ratio (95% CI) Comparing Rebounders vs. Nonrebounders	All (n = 261)	Rebounders (n = 82)	Nonrebounders (n = 179)	Odds Ratio (95% CI) Comparing Rebounders vs. Nonrebounders
Median age (Q1, Q3), y	49 (38, 57)	50 (39, 59)	48 (37, 57)	1.07 (0.94-1.23) <sup>†</sup>	48 (36, 56)	51 (38, 60)	47 (36, 55)	1.14 (0.95-1.38) <sup>†</sup>
Female sex, %	51	59	48	<b>1.53 (1.05-2.25)</b>	49	46	50	0.85 (0.50-1.44)
Race/ethnicity, %								
White	77	74	78	0.82 (0.53-1.27)	81	84	80	1.45 (0.73-3.06)
Non-White	23	26	22	1.23 (0.79-1.89)	19	16	20	0.69 (0.33-1.38)
Higher risk, %	81	88	78	<b>2.00 (1.18-3.55)</b>	65	56	69	<b>0.57 (0.33-0.97)</b>
Median days from symptom onset to enrollment (Q1, Q3)	6 (4, 7)	5 (3, 7)	6 (4, 7)	<b>0.92 (0.84-0.99)</b>	6 (4, 8)	6 (4, 7)	6 (4, 8)	0.91 (0.81-1.02)
Symptom score at enrollment (study day 0) (Q1, Q3)	10 (6, 14)	13 (8, 18)	9 (5, 13)	<b>1.08 (1.05-1.12)</b>	9 (6, 13)	9 (6, 13)	9 (6, 13)	0.98 (0.93-1.03)
Median AN SARS-CoV-2 viral load at enroll- ment (Q1, Q3), log <sub>10</sub> copies/mL	4.06 (2.0, 6.02)	5.05 (2.00, 6.82)	3.85 (2.00, 5.74)	<b>1.17 (1.06-1.28)</b>	4.31 (2.13, 6.14)	5.36 (3.82, 6.90)	3.50 (2.00, 5.76)	<b>1.40 (1.22-1.60)</b>

# KEY RESULTS



# SUMMARY OF KEY FINDINGS

In ACTIV-2 participants who received no COVID-19 treatment:

- ▶ Symptom rebound was common (26%)
  - ▶ In most non-hospitalized participants, this was short and lasted 1 day
  - ▶ 1 in 4 ACTIV-2 participants showed symptom rebound
- ▶ Viral rebound was common (31%)
  - ▶ 1 in 8 ACTIV-2 participants showed high level viral rebound
- ▶ Combination of both viral load and symptom rebound was uncommon (<3%)

# WHY IS THIS STUDY IMPORTANT? WHAT ARE THE NEXT RESEARCH STEPS?

- ▶ Without antiviral therapy, symptom or viral rebound in COVID-19 is common
- ▶ Rebound of symptoms after taking nirmatrelvir and ritonavir does not necessarily mean treatment failure
- ▶ Follow up studies may consider:
  - ▶ Evaluate persons that have been previously vaccinated, infected with Omicron and later variants to confirm findings in this study.
  - ▶ Assess symptom and viral rebound after antiviral treatment