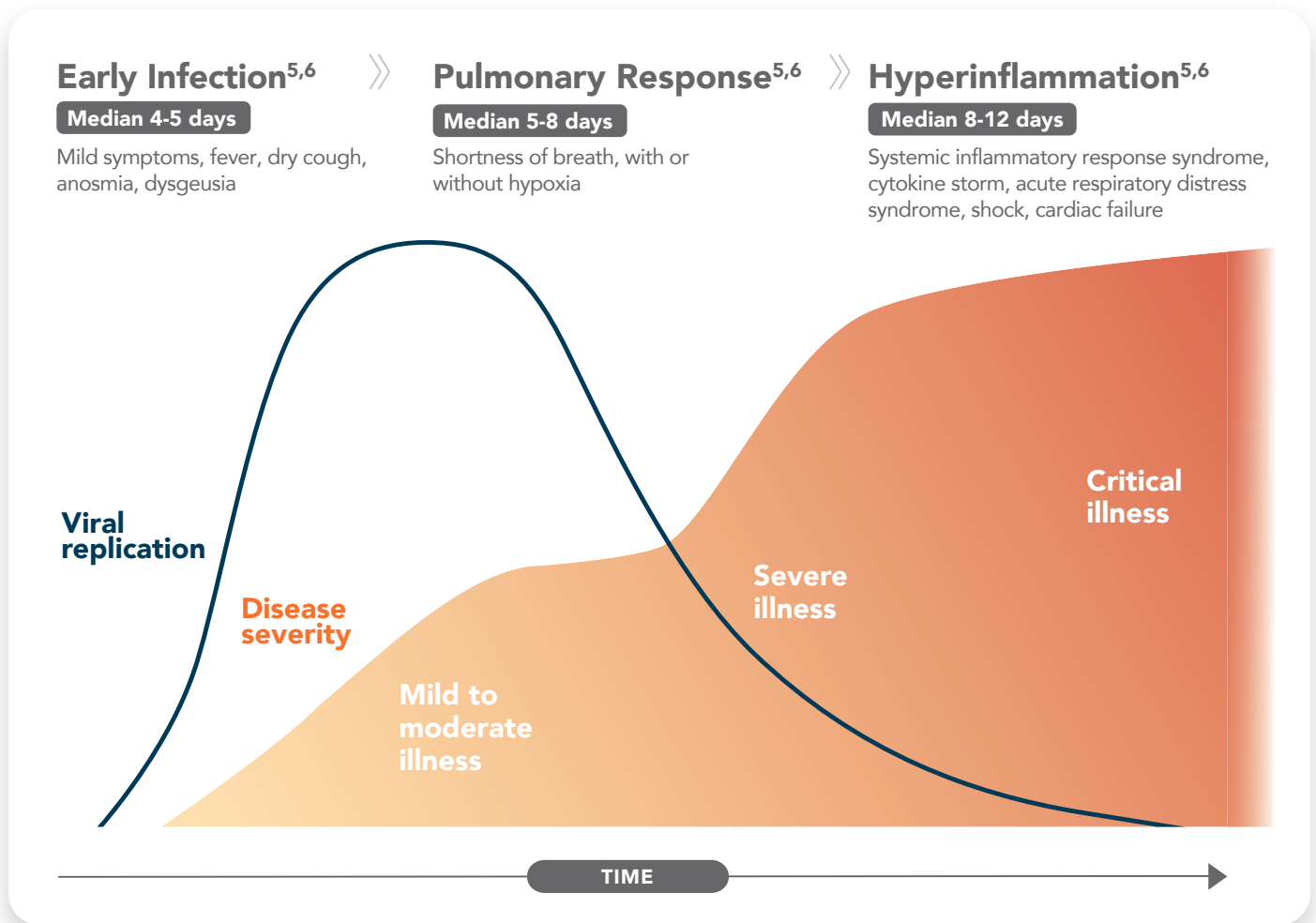


FOR APPROPRIATE COVID-19 PATIENTS AT HIGH RISK FOR PROGRESSION TO SEVERE DISEASE,
INITIATE ORAL Rx TREATMENT AS EARLY AS POSSIBLE
WHILE SYMPTOMS ARE MILD TO MODERATE¹⁻³



The progression of COVID-19^{4,5}

Early in the course of disease, patients may experience mild symptoms as SARS-CoV-2 replicates. In many patients, the immune system responds and prevents the virus from spreading. But in patients who develop severe disease, an abnormal immune response occurs, leading to respiratory and even systemic inflammation.



Educate your high-risk patients before they get COVID-19 so they understand their^{1,2,7-9}

- R**isk for severe disease, the
- I**mportance of testing quickly if they experience symptoms, their
- S**ource of testing and care, and that they
- K**now if they are appropriate for authorized or approved treatment options

HELP PATIENTS RECOGNIZE IF THEY'RE AT HIGH RISK FOR PROGRESSION TO SEVERE COVID-19³

Two important factors to consider are Age and Racial, Ethnic & Socioeconomic Disparities

Studies have shown that COVID-19 does not affect all populations equally, and age remains the strongest risk factor for severe COVID-19 outcomes. Risk of severe COVID-19 is increased in people who are 50 years and older, with risk increasing substantially over 65.

Additionally, the COVID-19 pandemic has highlighted racial, ethnic, and socioeconomic disparities in COVID-19 illnesses, hospitalizations, and deaths. Data have shown that people from racial and ethnic minority groups are more likely to be infected with SARS-CoV-2. Once infected, people from racial and ethnic minority groups are more likely to be hospitalized, be admitted to the ICU, and die from COVID-19 at younger ages.*

Underlying medical conditions associated with risk for progression to severe COVID-19[†]

Higher risk (conclusive)

- Asthma
- Cancer
- Cerebrovascular disease
- Chronic kidney disease
- Chronic lung diseases limited to:
 - Bronchiectasis
 - COPD
 - Interstitial lung disease
 - Pulmonary embolism
 - Pulmonary hypertension
- Chronic liver diseases limited to:
 - Cirrhosis
 - Non-alcoholic fatty liver disease
 - Alcoholic liver disease
 - Autoimmune hepatitis
- Cystic fibrosis
- Diabetes mellitus, type 1 and type 2
- Disabilities[‡], including Down syndrome
- Heart conditions (such as heart failure, coronary artery disease, or cardiomyopathies)
- HIV
- Mental health conditions limited to:
 - Mood disorders, including depression
 - Schizophrenia spectrum disorders
- Neurologic conditions limited to dementia
- Obesity (BMI ≥ 30 kg/m² or ≥ 95 th percentile in children)
- Physical inactivity
- Pregnancy and recent pregnancy
- Primary immunodeficiencies
- Smoking, current and former
- Solid organ or blood stem cell transplantation
- Tuberculosis
- Use of corticosteroids or other immunosuppressive medications

Suggestive higher risk

- Children with certain underlying conditions
- Overweight (BMI ≥ 25 kg/m², but < 30 kg/m²)
- Sickle cell disease
- Substance use disorders

Mixed evidence (inconclusive: no conclusions can be drawn from the evidence)

- Alpha-1 antitrypsin deficiency
- Bronchopulmonary dysplasia
- Hepatitis B and C
- Hypertension
- Thalassemia



Consult the CDC for the latest information on risk factors.

This QR code will take you to a website that is owned and operated by the Centers for Disease Control and Prevention (CDC). Pfizer is not responsible for the content or services of this site.

* Compared with non-Hispanic White people.

[†] Summary of conditions with evidence based on what has been reported in the literature at the time of CDC review. Definitions for each group of medical conditions with evidence can be found at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/underlyingconditions.html>

[‡] Complete list of disabilities from CDC's systematic review process can be found at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/underlyingconditions.html>

BMI = body mass index; COPD = chronic obstructive pulmonary disease; HIV = human immunodeficiency virus; ICU = intensive care unit

References: 1. Office of the Commissioner. Coronavirus (COVID-19) update: FDA authorizes first oral antiviral for treatment of COVID-19. U.S. Food and Drug Administration. Published December 22, 2021. Accessed April 21, 2022. <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-first-oral-antiviral-treatment-covid-19> 2. Office of the Commissioner. Coronavirus (COVID-19) update: FDA authorizes additional oral antiviral for treatment of COVID-19 in certain adults. U.S. Food and Drug Administration. Published December 23, 2021. Accessed April 21, 2022. <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-additional-oral-antiviral-treatment-covid-19-certain> 3. CDC. Underlying medical conditions associated with higher risk for severe COVID-19: information for healthcare professionals, Centers for Disease Control and Prevention. Published December 5, 2022. Accessed December 9, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/underlyingconditions.html> 4. Cevik M, Kuppalli K, Kindrachuk J, Peiris M. Virology, transmission, and pathogenesis of SARS-CoV-2. *BMJ*. 2020;371:m3862. 5. Siddiqi HK, Mehra MR. COVID-19 illness in native and immunosuppressed states: A clinical-therapeutic staging proposal. *J Heart Lung Transplant*. 2020;39(5):405-407. 6. CDC. Management of patients. Centers for Disease Control and Prevention. Published June 30, 2020. Accessed April 18, 2022. <https://stacks.cdc.gov/view/cdc/89980> 7. Ajufu E, Rao S, Navar AM, Pandey A, Ayers CR, Khara A. U.S. population at increased risk of severe illness from COVID-19. *Am J Prev Cardiol*. 2021;6(100156):100156. 8. CDC. COVID-19 information for specific groups of people. Centers for Disease Control and Prevention. Published June 3, 2022. Accessed June 8, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html#:~:text=If%20you%20or%20your%20family,high%20COVID%2D19%20Community%20Level> 9. CDC. Test for current infection. Centers for Disease Control and Prevention. Published June 1, 2022. Accessed June 8, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/testing/diagnostic-testing.html>