COVID-19 Antivirals — PBS Eligibility & Drug Choice

Paxlovid first-line; molnupiravir when unsuitable

PBS AUTHORITY

Start within 5 days of symptom onset. Paxlovid is preferred; molnupiravir is reserved for when Paxlovid is contraindicated or unsuitable. The PBS age and risk-factor thresholds have been revised several times since 2022 and may change again — **always verify the current criteria at pbs.gov.au** before assuming a patient is eligible.

ELIGIBILITY — STRUCTURE (verify exact thresholds)

✓ **Age-based tiers**	Older groups generally need fewer (or no) extra risk factors; younger groups need one or more. Exact age cut-offs and risk-factor counts change — confirm at pbs.gov.au.
✓ **Expanded-access groups**	ATSI people have historically qualified at a lower age threshold; some chronic conditions have also had broadened access at various times — confirm the current list.
✓ **Immunocompromised / reinfection**	Moderately-to-severely immunocompromised, or reinfected after a prior COVID-19 hospitalisation — typically regardless of age.
✓ **Treatment window**	Within 5 days of symptom onset, confirmed/probable COVID-19 — this part of the criteria has been stable.

PAXLOVID vs MOLNUPIRAVIR

Feature	Paxlovid	Molnupiravir
Line / efficacy	First-line; generally more effective	Second-line if Paxlovid unsuitable; lower efficacy
Renal handling	Reduce dose if eGFR 30–60; contraindicated below 30	No dose adjustment — an option in renal impairment
Interactions	Major — ritonavir is a strong CYP3A4 inhibitor	Minimal — no significant interactions
Pregnancy	Caution; seek advice	Contraindicated — embryofetal toxicity

VERIFY AT PBS

Eligibility age and risk-factor thresholds have been revised more than once since 2022 — do not rely on a specific cut-off without checking pbs.gov.au on the day of prescribing. Rebound symptoms after finishing treatment are usually mild and self-limiting, not treatment failure.

■ SAFETY

- Paxlovid: eGFR 30–60 needs dose reduction; below 30 is contraindicated — use molnupiravir instead
- Paxlovid contraindicated in severe hepatic impairment (Child-Pugh C)
- Molnupiravir contraindicated in pregnancy; contraception during and for 4 days after

◆ CHECK / EXCLUDE

- Always run an interaction check before Paxlovid — ritonavir is a strong CYP3A4 inhibitor
- Hold simvastatin/atorvastatin during Paxlovid & for 2–3 days after; caution with DOACs
- Confirm current PBS eligibility criteria before prescribing — thresholds change

For health-professional use. COVID antiviral eligibility has changed repeatedly since 2022 — confirm current thresholds at pbs.gov.au.
Covers Paxlovid (nirmatrelvir/ritonavir) and molnupiravir — not a complete dose-and-interaction reference.