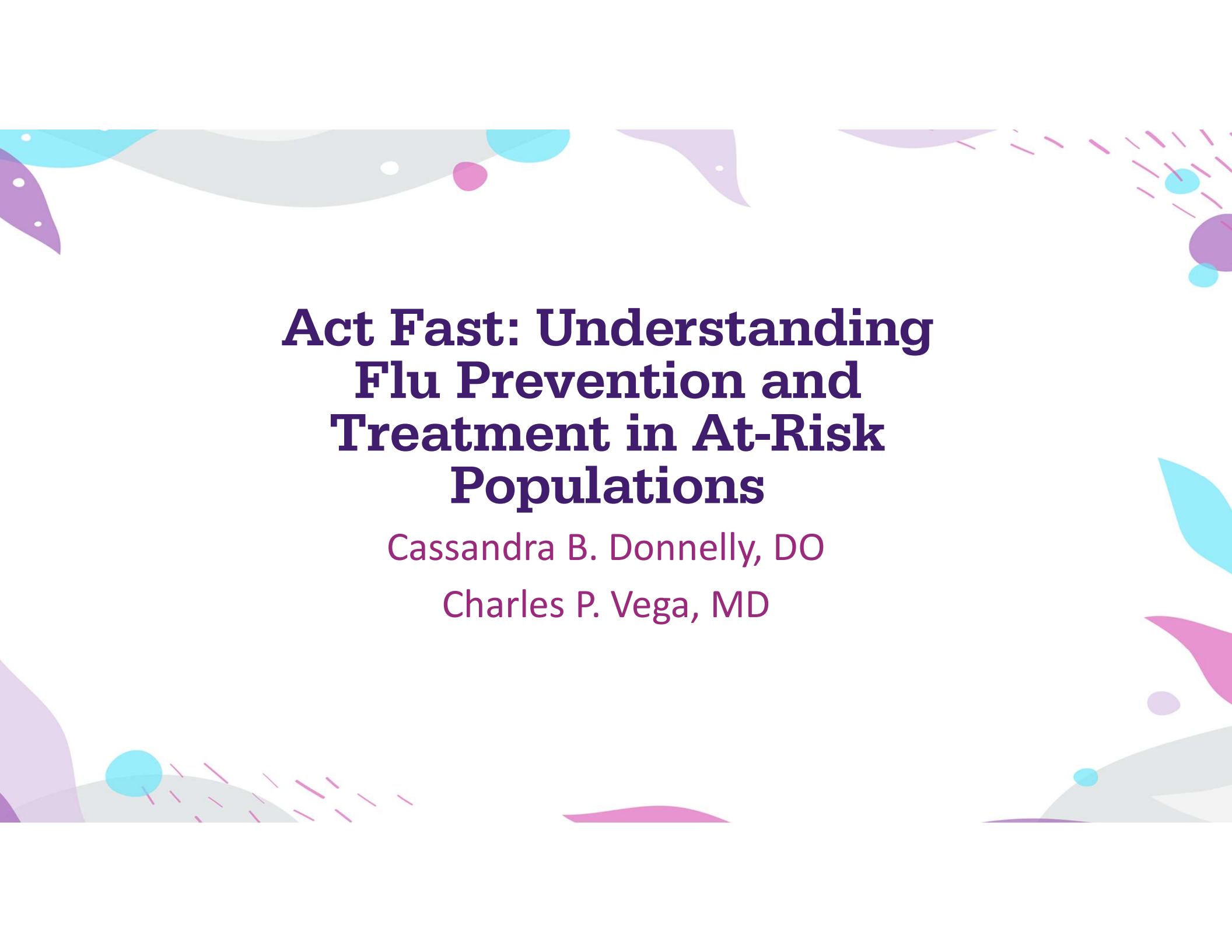


WOMEN'S HEALTH
Beyond the Annual Visit



Act Fast: Understanding Flu Prevention and Treatment in At-Risk Populations

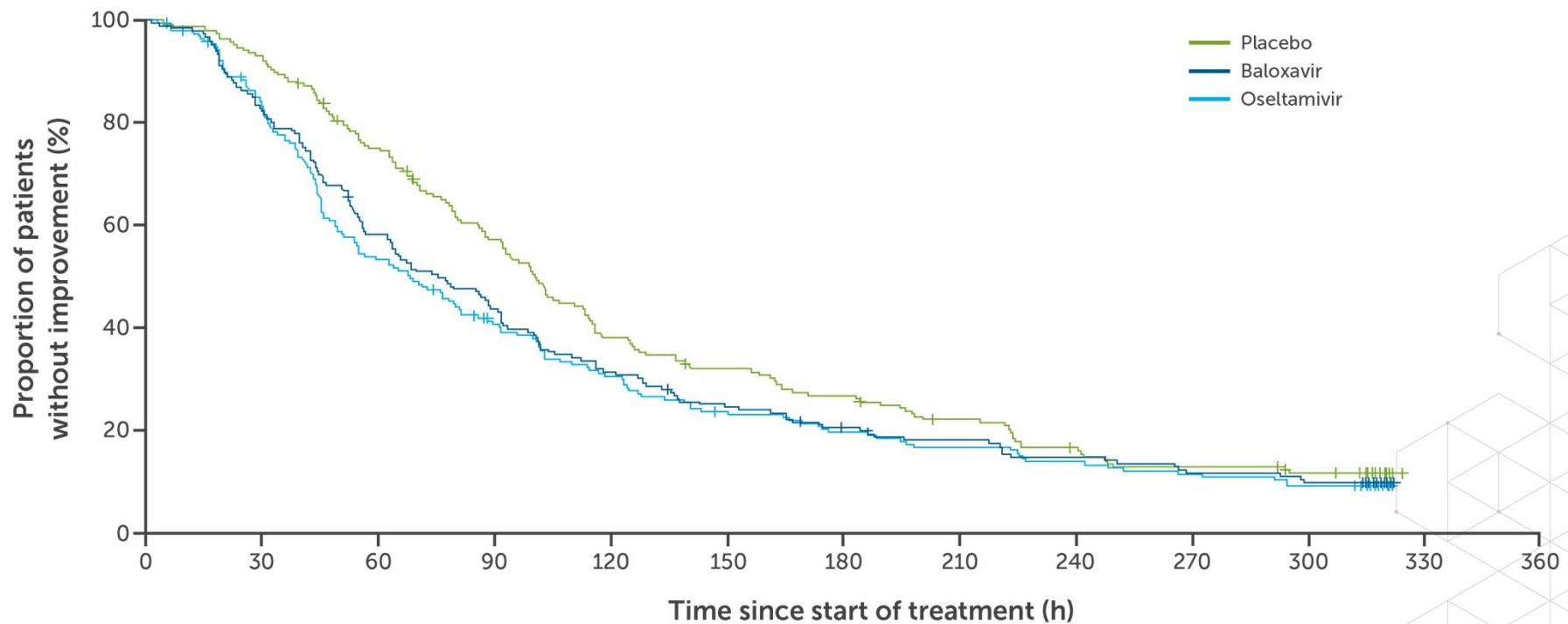
Cassandra B. Donnelly, DO

Charles P. Vega, MD

Learning Objectives

- After participating in this educational activity, participants should be better able to:
 - Discuss the pathophysiology of influenza A and B viruses
 - Compare antiviral agent indications and selection based on data from completed clinical trials, ongoing studies, and real-world reports
 - Formulate post-exposure prophylaxis strategies based on an antiviral agent's mechanism of action

Kaplan-Meier Curves of TTIS in the Modified Intention-to-Treat Population



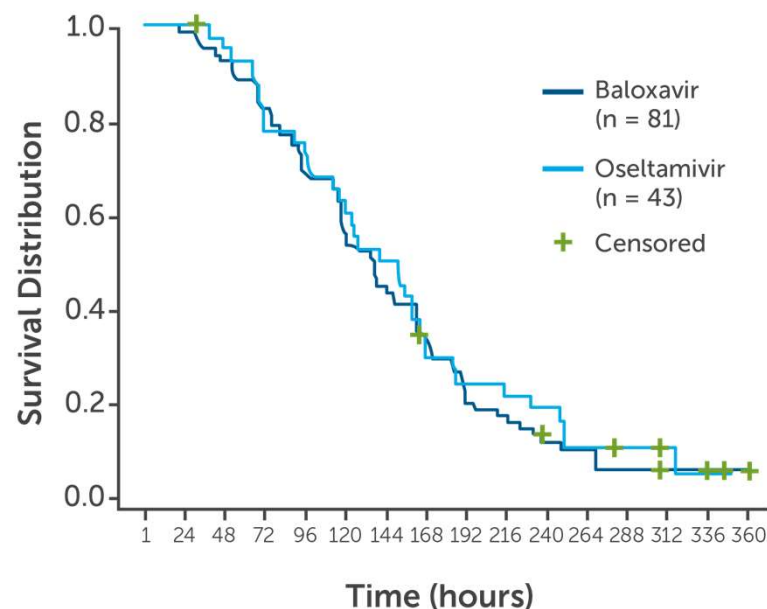
TTIS, time to improvement of influenza symptoms. Ison MG, et al. *Lancet Infect Dis.* 2020;20(10):1204-1214.

MiniSTONE-2: Time to Alleviation of Influenza Symptoms in Children – Baloxavir vs Oseltamivir

- Phase 3, randomized, controlled trial among healthy children ill <48 hours; aged 1 to 12 years
- Baloxavir single dose: 2 mg/kg if <20 kg, 40 mg if ≥20 kg vs oseltamivir twice daily x 5 days; weight-based dosing
- Randomized 2:1, N = 112/57; 81/54 with confirmed influenza
- Primary endpoint was met: similar safety between baloxavir and oseltamivir

	Baloxavir (hours, 95% CI)	Oseltamivir (hours, 95% CI)
Time to alleviation of symptoms	138 (117-163)	150 (115-165)
Time to culture negativity	24.2 (23.5-24.6)	75.8 (68.9-97.8)

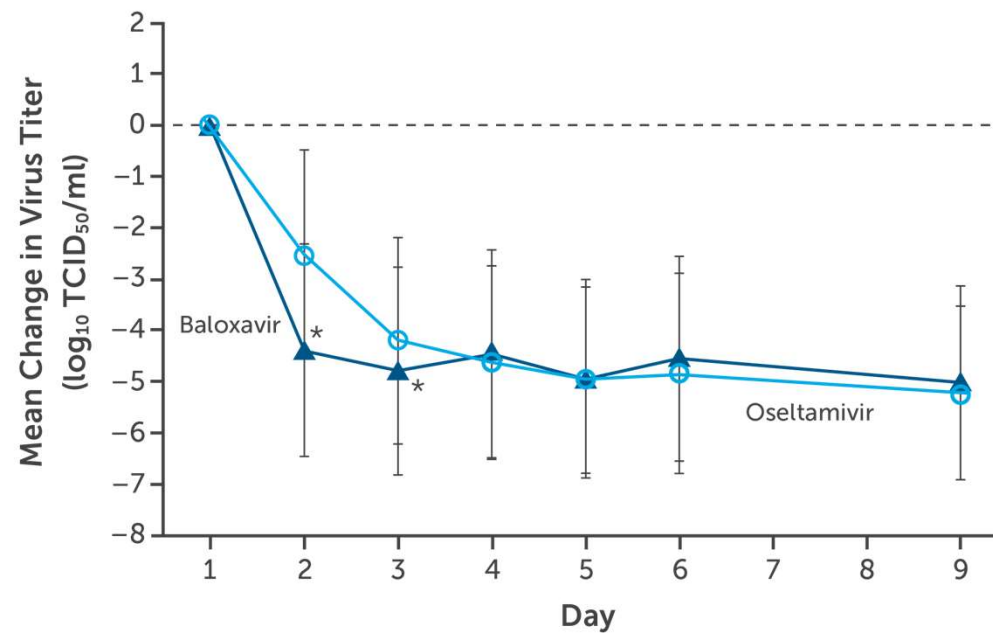
Time to Alleviation of Signs and Symptoms:
Similar Between Study Arms



Baker J, et al. *Pediatr Infect Dis J.* 2020;39(8):700-705.

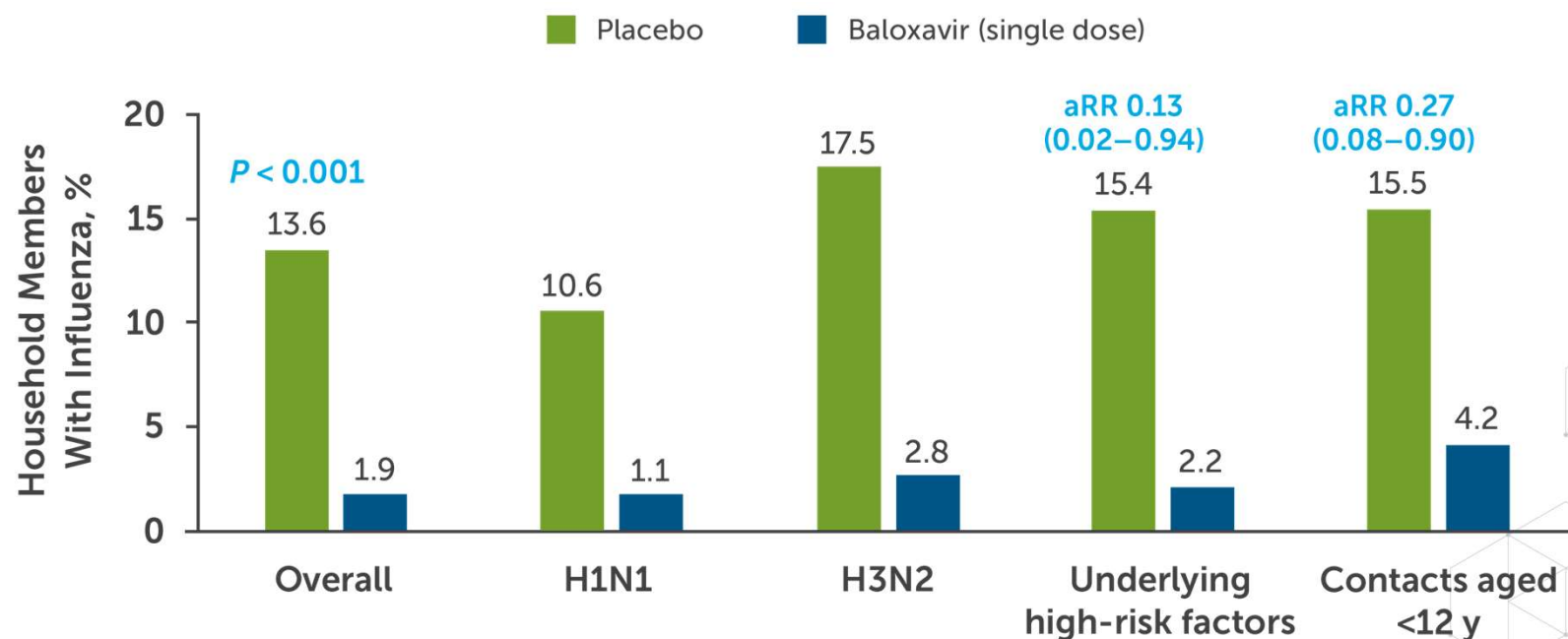
Change from Baseline in Influenza Infectious Viral Load over Time in the Phase 3 Trial

Baloxavir vs. Oseltamivir



Hayden FG, et al. *N Engl J Med*. 2018;379(10):913-923 *P value <0.05 for comparison with oseltamivir

BLOCKSTONE: Preventative Treatment with Baloxavir After Exposure to an Infected Household Member – 86% Effective



Baloxavir had a comparable safety profile to placebo (AEs: 22.2% with baloxavir, 20.5% with placebo)

AE, adverse event; aRR, adjusted risk ratio. Ikematsu H, et al. *N Engl J Med*. 2020;383(4):309-320.