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Paxlovid Awareness, Reporting Bias

Gillian K. SteelFisher and colleagues (October 2024) recently published a survey that found that 39 percent of respondents did not think that Paxlovid was somewhat or very effective for most adults in preventing serious illness or hospitalization associated with COVID-19. The authors label this view as “erroneous,” but it aligns with the results of the only trial that is generalizable to most adults, the Evaluation of Protease Inhibition for COVID-19 in Standard-Risk Patients (EPIC-SR) trial.¹ This trial, which included unvaccinated low-risk and vaccinated higher-risk patients, found no reduction in hospitalizations or alleviation of COVID-19-related signs or symptoms in patients who received Paxlovid versus placebo.

The lack of reference to EPIC-SR by SteelFisher and colleagues might be viewed as an oversight, but such omissions are common in both the lay press and academic journals. This reflects a known systemic selective publication and delayed reporting bias seen in industry-sponsored studies.² Studies with negative outcomes are less likely to be published and take longer to appear on ClinicalTrials.gov or in peer-

reviewed journals than studies with positive results.² This is certainly true of Paxlovid. EPIC-HR, a positive study performed in high-risk unvaccinated adults, was published within five months of completion. Compare this with EPIC-SR, which was first reported in a company press release in December 2021, posted on ClinicalTrials.gov in August 2023, and finally published in April 2024.³

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NOTES

- 1 Hammond J, Fountaine RJ, Yunis C, Fleishaker D, Almas M, Bao W, et al. Nirmatrelvir for vaccinated or unvaccinated adult outpatients with Covid-19. *N Engl J Med*. 2024;390(13):1186–95.
- 2 Qunaj L, Jain RH, Atoria CL, Gennarelli RL, Miller JE, Bach PB. Delays in the publication of important clinical trial findings in oncology. *JAMA Oncol*. 2018;4(7):e180264.
- 3 To access the authors' disclosures, click on the Details tab of the article online.