

There's no evidence chloroquine helps treat or prevent COVID-19

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In new Practice Points, the American College of Physicians (ACP) says that evidence does not support the use of chloroquine or hydroxychloroquine alone or in combination with azithromycin to prevent COVID-19 after infection with novel coronavirus (SARS-CoV-2), or for treatment of patients with COVID-19. The ACP Practice

Points also state that physicians, in light of known harms and very uncertain evidence of benefit, may choose to treat the hospitalized COVID-19 positive patients with chloroquine or hydroxychloroquine alone or in combination with azithromycin in the context of a clinical trial using shared and informed decision-making with patients and their families. "[Should Clinicians Use Chloroquine or Hydroxychloroquine Alone or In Combination with Azithromycin for the Prophylaxis or Treatment of COVID-19? Living Practice Points from the American College of Physicians \(Version 1\)](#)" was published today in *Annals of Internal Medicine*.

The ACP Practice Points provide rapid clinical advice based on a concise summary of the best available evidence on the benefits and harms of the use of chloroquine or [hydroxychloroquine](#) alone or in combination with azithromycin for the prophylaxis or treatment of COVID-19. The Practice Points are based on a rapid systematic review conducted by the University of Connecticut Health Outcomes, Policy, and Evidence Synthesis Group.

ACP Practice Points are developed by ACP's Scientific Medical Policy Committee and provide advice to improve the health of individuals and populations and promote high value care based on the best available evidence derived from assessment of scientific work (e.g. clinical guidelines, systematic reviews, individual studies). ACP Practice Points aim to address the value of screening and diagnostic tests and therapeutic interventions for various diseases, and consider known determinants of health, including but not limited to genetic variability, environment, and lifestyle.

"With the rapid emergence of COVID-19, physicians and clinicians have found themselves managing the frontlines of the pandemic with a paucity of evidence available to inform treatment decisions," said Jacqueline W. Fincher, MD, MACP, president, ACP. "ACP rapidly

developed its Practice Points as concise, synthesized summaries of the current state of evidence in order to address urgent questions related to the transmission, diagnosis, and treatment of COVID-19. As such, these Practice Points give frontline physicians guidance to provide patients with the care based on the best available evidence."

Chloroquine and hydroxychloroquine are used to manage other major ailments with a known benefit and are in short supply in the United States. These medications also have known harms in non-COVID patients such as cardiovascular effects; diarrhea; abnormal liver function; rash; headache; ocular issues; and anemia.

Using chloroquine or hydroxychloroquine, with or without azithromycin, to prevent or treat COVID-19 infection began to receive attention following preliminary reports from in vitro and human studies. While several studies are planned or underway, the Practice Points provide details about the lack of and/or insufficient current research about the benefits and harms for prevention and treatment of COVID-19.

At this time, the authors of the Practice Points have identified that chloroquine or hydroxychloroquine alone or in combination with azithromycin to prevent COVID-19 after infection with novel [coronavirus](#) (SARS-CoV-2), or for treatment of patients with COVID-19 should not be used. The Practice Points also state that the drugs may only be used to treat hospitalized COVID-19 positive patients in the context of a clinical trial following shared and informed decision-making between clinicians and patients (and their families) that includes a discussion of known harms of [chloroquine](#) and hydroxychloroquine and very uncertain evidence of benefit for COVID-19 patients.

The ACP Practice Points will be maintained as a "living" document and ACP's Scientific Medical Policy Committee will monitor emerging evidence to determine its impact on the main findings and conclusions,

and issue updates as needed.

More information: Amir Qaseem, et al. Should Clinicians Use Chloroquine or Hydroxychloroquine Alone or in Combination With Azithromycin for the Prophylaxis or Treatment of COVID-19? *Annals of Internal Medicine*. [DOI: 10.7326/M20-1998](https://doi.org/10.7326/M20-1998)

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