

Survival benefit seen with triple therapy for severe COVID-19

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For patients with severe COVID-19 requiring high flow nasal cannula

(HFNC), triple therapy of dexamethasone, remdesivir, and baricitinib is associated with significant survival benefit compared with dual therapy, according to a study published online July 6 in the *Canadian Journal of Infectious Diseases and Medical Microbiology*.

Dallis Q. Ngo, D.O., from Saint Peter's University Hospital in New Brunswick, New Jersey, and colleagues examined the benefits of triple therapy of dexamethasone, remdesivir, and baricitinib compared to dual therapy of dexamethasone with remdesivir in [patients](#) with severe COVID-19 on HFNC. Data were included for 191 patients with severe COVID-19, of whom 81 received triple therapy.

The researchers identified a significant survival benefit for patients receiving triple therapy. There was a trend toward less requirement of mechanical ventilation for patients receiving triple versus dual therapy. No significant change was seen in length of stay (mean, 13.74 versus 13.31 days) or in days on HFNC (mean, 8.95 versus 7.28 days) between the groups.

"Patients with severe COVID-19 requiring high-flow oxygen derive a significant survival benefit when treated with a triple therapy combination of dexamethasone, remdesivir, and baricitinib, in comparison to a combination of dexamethasone and remdesivir," the authors write. "This is the first study focused on COVID-19 patients requiring high-flow oxygen to successfully demonstrate this finding."

More information: [Abstract/Full Text](#)

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