Fluvoxamine does not improve time to sustained recovery in mild COVID-19

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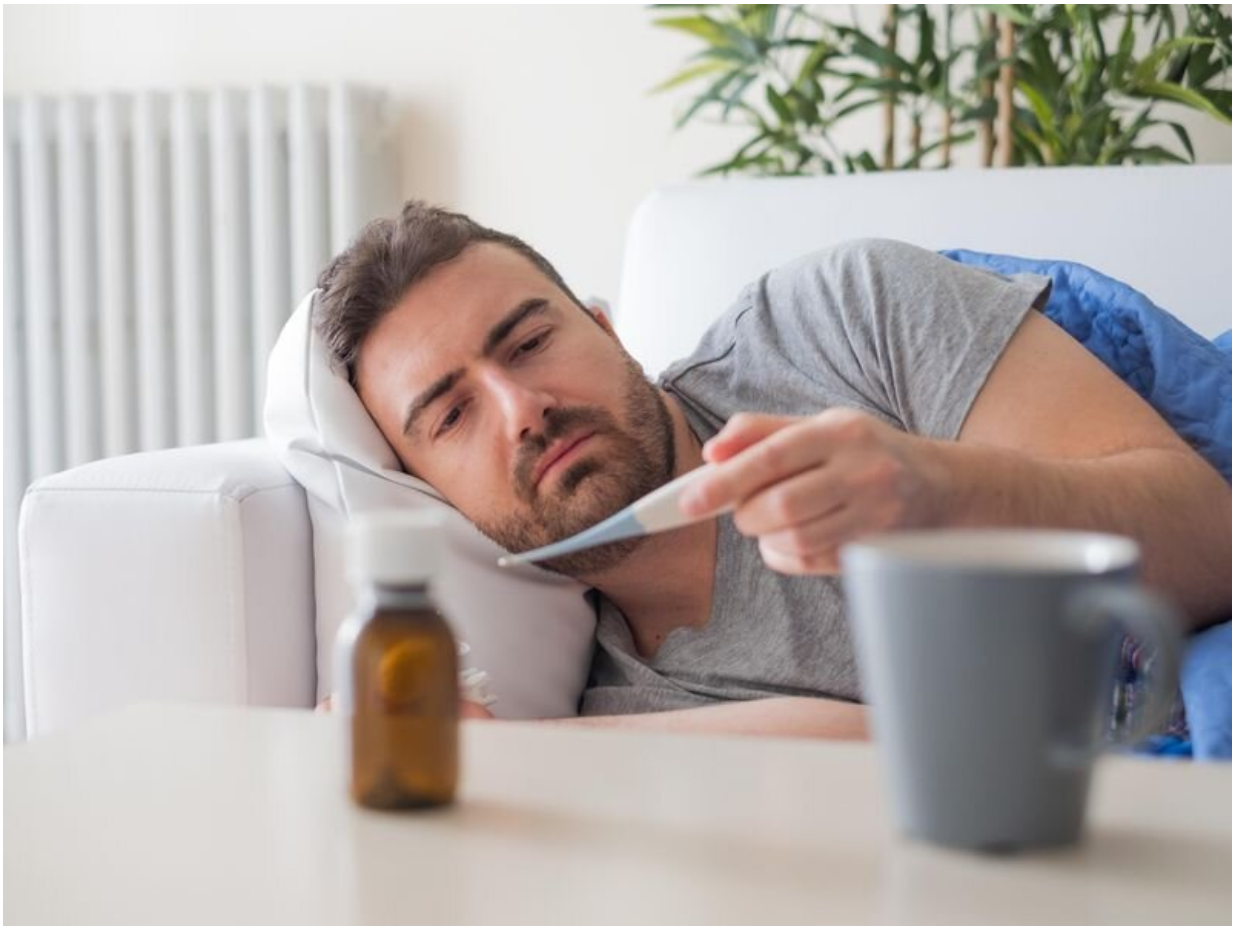

For patients with mild-to-moderate COVID-19, treatment with

fluvoxamine does not improve time to sustained recovery versus placebo, according to a study published online Jan. 12 in *Journal of the American Medical Association*.

Matthew W. McCarthy, M.D., Ph.D., from Weill Cornell Medicine in New York City, and colleagues examined the efficacy of low-dose (50 mg twice daily) fluvoxamine for 10 days versus placebo among 1,288 patients (674 in the fluvoxamine group and 614 in the placebo group) aged 30 years or older with severe acute respiratory syndrome coronavirus 2 infection and experiencing two or more symptoms of acute COVID-19 for seven days or less.

The researchers found that the median time to sustained recovery was 12 and 13 days in the fluvoxamine and placebo groups, respectively (hazard ratio, 0.96; 95 percent credible interval, 0.86 to 1.06). Overall, 3.9 and 3.8 percent of participants in the fluvoxamine and placebo groups, respectively, had the composite outcome of hospitalization, urgent care visit, emergency department visit, or death through day 28 (hazard ratio, 1.1; 95 percent credible interval, 0.5 to 1.8). One and two participants in the fluvoxamine and placebo groups, respectively, were hospitalized; there were no deaths reported in either group.

"These findings do not support the use of fluvoxamine at this dose and duration in patients with mild-to-moderate COVID-19," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

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Editorial