

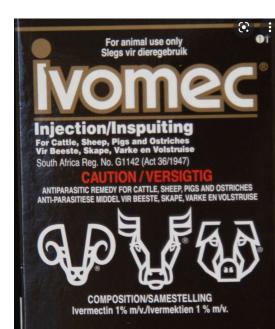
COVID-19 therapeutics update

Ivermectin

October 12th, 2021

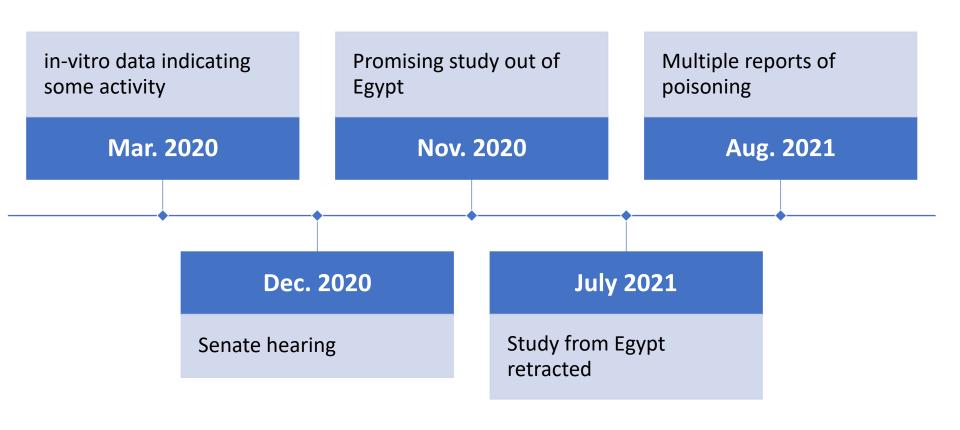
Ivermectin

- What: anti-parasitic (strongyloides, scabies)
- *In vitro:* antiviral (dengue, SARS-CoV2)
 -at concentrations >50-fold the anti-parasitic effect
- Pros: Older drug, available, \$



Guidelines	Ivermectin Recommendation	Website
National Institutes of Health	There is insufficient evidence for the COVID-19 Treatment Guidelines Panel (the Panel) to recommend either for or against the use of ivermectin for the treatment of COVID-19.	https://www.covid19tr eatmentguidelines.nih. gov/therapies/antiviral -therapy/ivermectin/
Infectious Diseases Society of America	Suggest against use except in a clinical trial	https://www.idsociety. org/practice- guideline/covid-19- guideline-treatment- and-management/
World Health Organization	We recommend not to use ivermectin in patients with COVID-19 except in the context of a clinical trial.	https://www.bmj.com/ content/370/bmj.m337 9
FDA and CDC	Recommend against	https://emergency.cdc. gov/han/2021/han004 49.asp

The ivermectin story





Egypt study retraction

Mortality: 35/1064 (3%) vs. 93/1063 (8.7%)

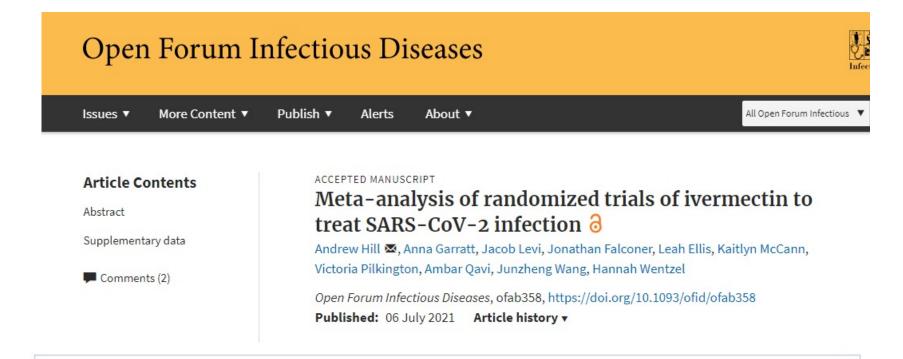
Figure 1G

1G)	lverme	ctin	Conti	rol		Risk Ratio	Risk Ratio		
Study or Subgroup	Events	Total	Events	Total	Weight	IV, Random, 95% CI	IV, Random, 95% CI		
4.3.1 Severe									
Brazil Fonseca et al	12	53	25	115	18.4%	1.04 [0.57, 1.91]			
Egypt Elgazzar Severe	2	100	20	100	9.4%	0.10 [0.02, 0.42]			
Mexico Gonzalez et al	5	36	6	37	12.5%	0.86 [0.29, 2.56]	-		
Turkey Okumus et al	6	30	9	30	14.7%	0.67 [0.27, 1.64]			
Subtotal (95% CI)		219		282	55.0%	0.58 [0.25, 1.32]	-		
Total events	25		60						
Heterogeneity: $Tau^2 = 0.45$; C	$hi^2 = 8.90$	df = 3	P = 0.0	$(3); I^2 =$	66%				
Test for overall effect: $Z = 1.3$	0 (P = 0.1)	9)							
4.3.2 Mild/moderate									
Bangladesh Mahmud et al	0	183	3	180	3.2%	0.14 [0.01, 2.70]			
Colombia Lopez-Medina et al	0	200	1	198	2.8%	0.33 [0.01, 8.05]			
Fovnt Ahd-Elsalam et al	3	82	4	82	9.1%	0.75 [0.17.3.25]			
Egypt Elgazzar Moderate	0	100	4	100	3.2%	0.11 [0.01, 2.04]			
India Kirti et al	0	55	4	57	3.3%	0.12 [0.01, 2.09]	-		
Iran Niaee et al	4	120	11	60	12.4%	0.18 [0.06, 0.55]			
Iran Rezai et al	1	35	0	34	2.8%	2.92 [0.12, 69.20]			
Iraq Hashim et al	2	70	6	70	8.4%	0.33 [0.07, 1.60]			
Subtotal (95% CI)		845		781	45.0%	0.30 [0.15, 0.58]	•		
Total events	10		33						
Heterogeneity: Tau2 = 0.00; C	$hi^2 = 5.42$	df = 7	7 (P = 0.6)	$(51); I^2 =$: 0%				
Test for overall effect: $Z = 3.5$	7 (P = 0.0)	004)							
Total (95% CI)		1064		1063	100.0%	0.44 [0.25, 0.77]	•		
Total events	35		93						
Heterogeneity: Tau2 = 0.35; C	$hi^2 = 19.2$	4, df =	11 (P =	0.06); 1	$^{2} = 43\%$		0.01 0.1 1 10 1		
Test for overall effect: $Z = 2.8$							Favours Ivermectin Favours Control		
Test for subgroup differences:	$Chi^2 = 1.$	54, df :	= 1 (P =	0.21), 1	$^{2} = 35.1\%$	5	rayours ivermeetin rayours control		

https://www.theguardian.com/science/2021/jul/16/huge-study-supporting-ivermectin-as-covid-treatment-withdrawn-over-ethical-concerns
Lawrence, J.M., Meyerowitz-Katz, G., Heathers, J.A.J. et al. The lesson of ivermectin: meta-analyses based on summary data alone are inherently

unreliable. Nat Med (2021). https://doi.org/10.1038/s41591-021-01535-y

New (old) data on Ivermectin



A correction has been published: Open Forum Infectious Diseases, Volume 8, Issue 8, August 2021, ofab394, https://doi.org/10.1093/ofid/ofab394

RETRACTED and will re-analyze data without fraudulent studies



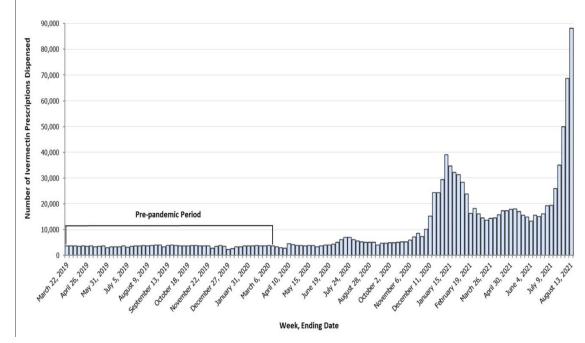
What is the harm?

Jan 2021, calls to US poison control up three-fold for human exposures to ivermectin

July 2021, ivermectin calls continued to sharply increase, to a five-fold increase from baseline

These reports are also associated with increased frequency of adverse effects and emergency department/hospital visits.

Estimated number of outpatient ivermectin prescriptions dispensed from retail pharmacies — United States, March 16, 2019-August 13, 2021*





Ongoing Clinical trials

PRINCIPLE- https://www.principletrial.org/

UK study evaluating Standard of care vs Favipiravir (an antiviral drug) vs ivermectin

ACTIV-6, Trial of Repurposed drugs (NIH sponsored) 15,000 participants

- Ivermectin vs placebo
- Fluvoxamine vs placebo
- Inhaled Fluticasone vs placebo



Resources

CDC and FDA warnings

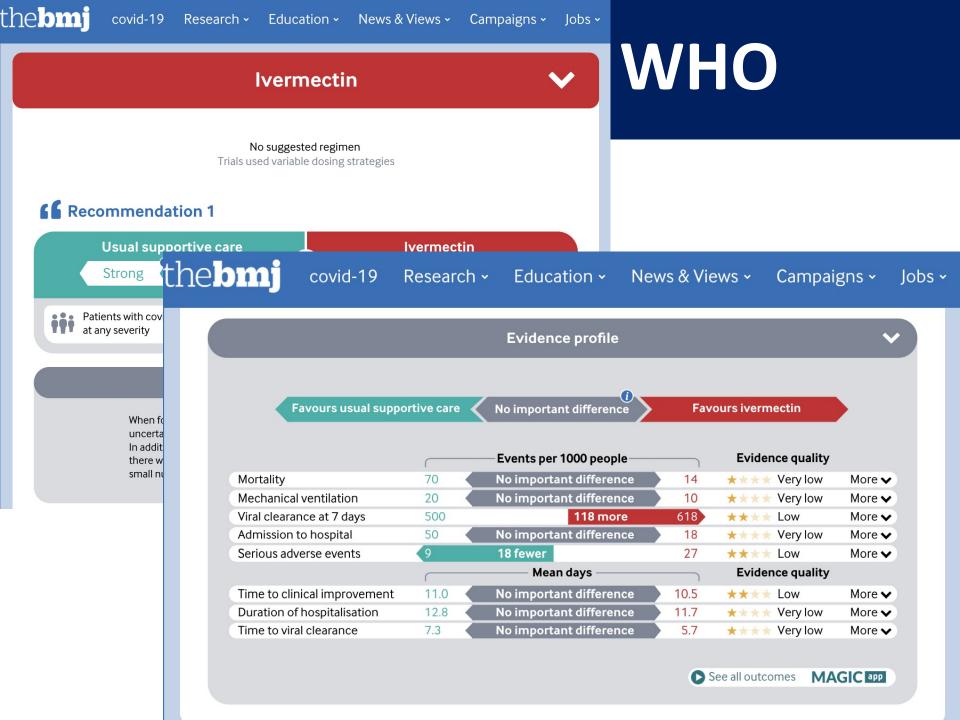
https://emergency.cdc.gov/han/2021/han00449.asp

Data tables:

- https://www.covid19treatmentguidelines.nih.gov/table s/table-2c/
- https://www.bmj.com/content/370/bmj.m3379







Fluvoxamine

There is **insufficient evidence** for the COVID-19 Treatment Guidelines Panel to recommend either for or against the use of fluvoxamine for the treatment of COVID-19.

small placebo-controlled trial, none of the participants who received fluvoxamine and six (8.3%) of those who received placebo reached the primary endpoint.

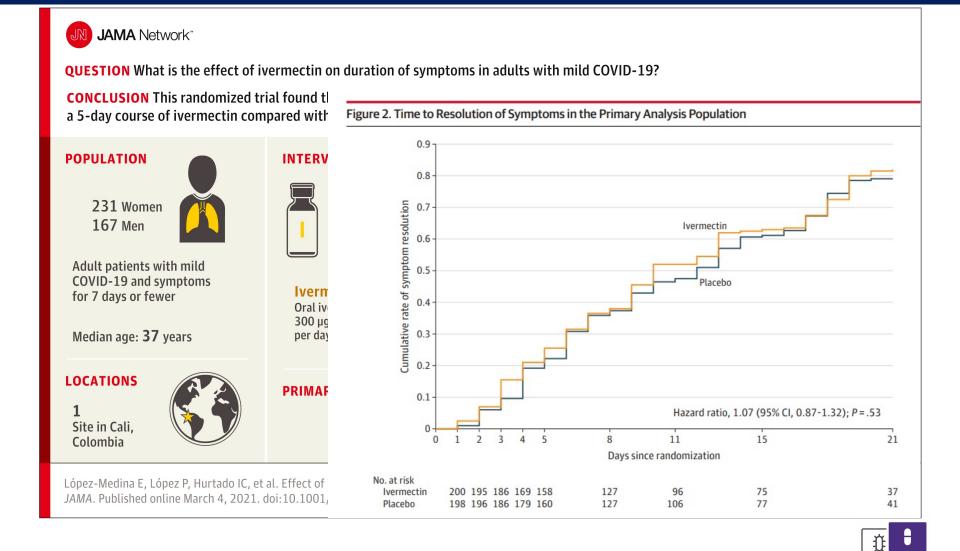
Limitations:

- study's reliance on participant self-reports
- missing data

Difficult to draw definitive conclusions about the efficacy of fluvoxamine for the treatment of COVID-19.



Ivermectin: no effect!



IDSA and FDA weigh in

Overview of IDSA COVID-19 Treatment Guidelines

Version 4.1.0 - March 5, 2021

		Setting and severity of illness						
		Ambulatory care: mild-to- moderate disease	Hospitalized: mild-to-moderate disease without need for suppl. oxygen	Hospitalized: severe but non- critical disease (spO₂ <94% on room air)	Hospitalized: critical disease (e.g., in ICU needing MV, or septic shock, ECMO)			
17- 18	Ivermectin	Suggests against use except in a clinical trial	NA	Suggests against use except in a clinical trial	NA			

Why You Should Not Use Ivermectin to Treat or Prevent COVID-19

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COVID-19. We've been living with it for what sometimes seems like forever. Given the number of deaths that have occurred from the disease, it's perhaps not surprising that

