

# Put Inpatient Hydroxychloroquine Use for COVID-19 in Perspective

You'll continue to hear **controversy over using hydroxychloroquine to treat COVID-19 in the hospital.**

Hydroxychloroquine and chloroquine are thought to prevent some viruses from multiplying...and to have immunomodulating effects.

But neither is proven effective for treating COVID-19.

A French report started the buzz. It included 6 patients who "cleared" the virus after 6 days on hydroxychloroquine and azithromycin. This report is now being questioned.

To date, a few small randomized trials show mixed results. Observational data are inconclusive...and some even suggest worse outcomes with these meds. But the evidence so far has MANY flaws.

Continue to use supportive care as first-line treatment.

Limit hydroxychloroquine use to a clinical trial...now that trials are available. This is the best way to promote safety...and contribute to evidence about treatment.

If hydroxychloroquine is used and your hospital isn't enrolled in a trial, consider FDA's "emergency use authorization" (EUA).

Clarify that the EUA doesn't mean it's FDA-approved for COVID-19. The benefits of the EUA are that safety measures and data reporting are required...and meds come from a national stockpile.

For instance, the EUA requires you to review potential med risks with your patient using the "fact sheet"...submit outcomes with the EUA online form...and also report adverse events to FDA MedWatch.

Get a baseline ECG, especially with torsades risks...other QT meds, low ejection fraction, etc. And correct potassium and magnesium. Hold hydroxychloroquine for a corrected QT over 500 ms.

Be aware, there's not an optimal hydroxychloroquine dose. If using, consider a once-daily dose...to limit nurses' exposure to patients.

Don't add azithromycin unless it's indicated for another infection. There's no proof this addition improves COVID-19 outcomes. And azithromycin can also prolong the QT.

See our chart, *COVID-19 and Pharmacotherapy*, for more on remdesivir, IL-6 inhibitors, and other potential therapies...and our *Coronavirus (COVID-19) Resource Hub* for additional tools.

## Key References:

- <https://covid19treatmentguidelines.nih.gov/> (5-1-20)
- [www.idsociety.org/practice-guideline/covid-19-guideline-treatment-and-management/](http://www.idsociety.org/practice-guideline/covid-19-guideline-treatment-and-management/) (5-1-20)
- [www.ashp.org/Pharmacy-Practice/Resource-Centers/Coronavirus](http://www.ashp.org/Pharmacy-Practice/Resource-Centers/Coronavirus) (5-1-20)
- [www.fda.gov/media/136784/download](http://www.fda.gov/media/136784/download) (5-1-20)
- [www.fda.gov/media/136537/download](http://www.fda.gov/media/136537/download) (5-1-20)

Hospital Pharmacist's Letter. May 2020, No. 360522

Cite this document as follows: Article, Put Inpatient Hydroxychloroquine Use for COVID-19 in Perspective, Prescriber's Letter, May 2020

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