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Hydroxychloroquine may have some use to treat COVID after all, NJ study shows

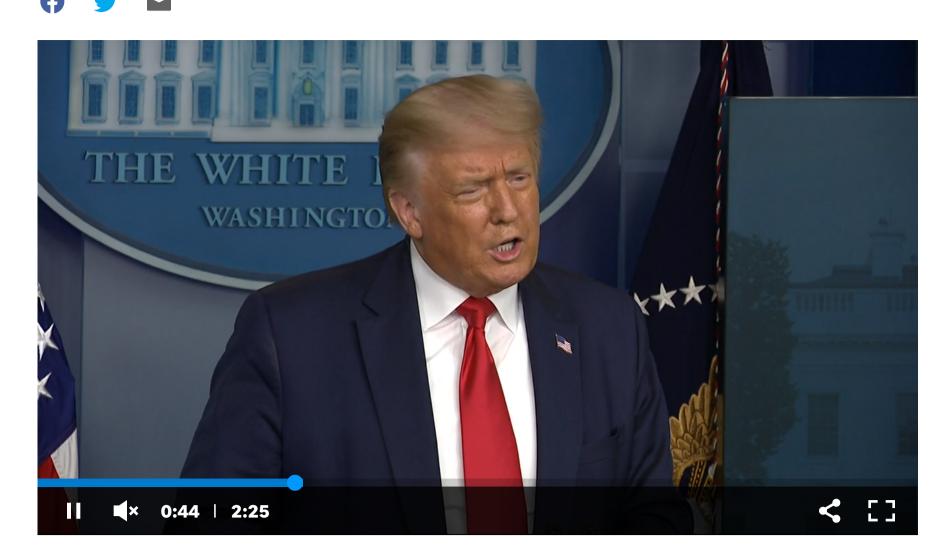
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Abbott Koloff NorthJersey.com Published 11:53 a.m. ET Jan. 27, 2021

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Legals

Trump again touts hydroxychloroquine for COVID

A day after President Donald Trump and his son shared a fresh dose of misinformation about hydroxychloroquine in videos that were taken down by Twitter and Facebook, Trump again touted the benefits of the drug, insisting it's safe and effective. (July 28) AP

A new New Jersey study shows that people with mild symptoms of COVID-19 may be helped by a controversial drug that had been widely used in the early days of the pandemic before several studies questioned its benefits and safety.

The recently published study by Hackensack Meridian Health looked at a group of people treated as outpatients last year and found that those who received an anti-inflammatory drug, hydroxychloroquine, which is often used for malaria, were significantly less likely to end up in the hospital. Doctors who conducted the study say the findings suggest that it should be tested further.

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"We make it clear we can't recommend it to be given," said Andrew Ip, a lymphoma physician and director of the Division of Outcomes and Value Research at the John Theurer Cancer Center, part of the Hackensack Meridian system. "This is only an observational study. We can only recommend it in the context of a clinical trial. There may be a benefit for using this drug in an outpatient setting."

The use of hydroxychloroquine became a political flashpoint last year when President Donald Trump and some others proclaimed it to be a miracle cure despite a lack of studies to back up their claims. It was widely used in hospitals during a time of unprecedented desperation, a practice that stopped after some studies found no clinical benefit for seriously ill patients.

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During that period, from March to mid-May, Ip said, physicians throughout the Hackensack Meridian Health system used the drug to treat outpatients who did not have severe symptoms, such as low oxygen levels. Of more than 100 people who received the drug, a little more than one in five ended up in the hospital, compared with almost one in three in the group of more than 1,000 people who did not get it. Ip said the drug also appeared to be safe, with no reports of cardiac arrhythmia, a potential side effect of hydroxychloroquine.

"I've gotten messages from doctors saying it supports what they are seeing in their clinics," Ip said.

A National Institutes of Health clinical trial last year concluded that hydroxychloroquine was safe to use but provided no benefit to hospitalized patients.

Last year, several physicians interviewed by The Record and NorthJersey.com said they'd had mixed results using the drug, with some measure of success, particularly when it was given early in the course of the illness.

One North Jersey doctor, Stephen Smith, head of an infectious disease center in

East Orange, said he had good results treating hospitalized patients with hydroxychloroquine and azithromycin, an antibiotic. He said Monday that he's been reviewing records that indicate hydroxychloroquine helped patients who were intubated, but he has been having trouble finding someone to analyze the information because of what he believes is a stigma against the drug stemming from the political debate over its use.

He said he was "encouraged" by the Hackensack study, adding that "it's harder to

show that something works than to show that it doesn't."

Ip said the use of hydroxychloroquine in hospitals "drastically dropped after some

of the initial reports came out in April and May." In June, the Food and Drug Administration withdrew an emergency approval for its use as a COVID treatment. However, Ip said doctors may continue to prescribe the drug to treat COVID as

long as patients are informed it is not approved for that use. "There are still doctors who are prescribing it," he said.

For a time last year, medical experts were concerned about a shortage of the drug to treat people with malaria and rheumatoid arthritis. But Ip said the supply is no longer an issue and that hydroxychloroquine may be a good alternative for some people instead of antibody treatments, which require intravenous infusions.

"If you're going to say it's a cure, that's definitely crazy," Ip said. But he said the study found "less hospitalizations and not much toxicity," adding that "you still need to validate these findings" with a clinical trial.

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