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RE: Warning on the use of unproven treatments and medications for COVID-19

As the COVID-19 global health pandemic continues to impact nearly every aspect of peoples' professional and personal lives, health professionals are likely aware of online and social media-driven conversations about the use of antimalarial, antibiotic and antiviral therapies to treat COVID-19 patients.

Although all British Columbians are hopeful a cure or treatment can be found quickly, it is critical to note that at this time, a proven treatment for COVID-19 does not exist.

These treatment claims may include, but are not limited to, the following drugs: hydroxychloroquine, chloroquine, azithromycin, lopinavir/ritonavir (Kaletra), and colchicine.

In a recently posted [position statement](#) on unproven therapies for COVID-19, the [BC Centre for Disease Control](#) states: "It is important to understand that there are potential harms to the patient, risks to our understanding of what is truly a beneficial treatment or not, and depleting access to therapies known to be helpful or essential in other disease states. For these reasons, the use of unproven therapies for COVID-19 is not recommended outside clinical trials."

Public health officials continue to emphasize that the situation involving COVID-19 is going to become even more acute in the coming weeks. More British Columbians will become infected and tragically, more may die from this virus. This means the well-intentioned pressure from patients, fellow health-care workers, and even friends and family to help access these medications, will undoubtedly increase.

Health professionals all have a responsibility to their patients and to their profession to focus only on evidence-based care and not yield to patient pressure around unproven and potentially dangerous uses of existing medications.

There are also other unintended consequences of the demand for these unproven treatments. Even before COVID-19 was formally declared a pandemic by the World Health Organization, Canada was already facing shortages and, in some cases, supply outages of a number of medications. Due to these recent COVID-19 claims involving hydroxychloroquine in particular, there has been a growth in demand and even more acute shortages. This brings serious potential consequences for patients who need this medication for other conditions including Lupus and rheumatoid arthritis.

Information around COVID-19 is rapidly evolving and new recommendations and evidence may become available with time. Given the critical role health professionals play in ensuring the appropriate distribution of medications, all must assist in ensuring that care decisions are based solely on the most

current evidence available. This will ensure the best possible care for patients through this global health pandemic.

Physicians and nurse practitioners should not prescribe these therapies for COVID-19 outside the context of a clinical trial, and pharmacists should not dispense them if they do.

For more information on the unproven therapies for COVID-19, see the following BC Centre for Disease Control documents:

- [Unproven Therapies for COVID-19](#)
- [Clinical Reference Group Recommendation: Unproven Therapies for COVID-19](#)

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