

COVID-19

CORONAVIRUS DISEASE

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MISSION: TMA supports Texas physicians by providing distinctive solutions to the challenges they encounter in the care of patients.



Physicians Caring for Texans

Statement on Chloroquine and Hydroxychloroquine

TMA COVID-19 Task Force

JUNE 19, 2020

Per the [National Institutes of Health \(NIH\) COVID-19 Treatment Guidelines](#):

At present, there are no Food and Drug Administration (FDA)-approved drugs for the treatment of COVID-19.

- The COVID-19 Treatment Guidelines Panel **recommends against** the use of **chloroquine** or **hydroxychloroquine** for the treatment of COVID-19, except in a clinical trial.
- The COVID-19 Treatment Guidelines Panel **recommends against** using **high-dose chloroquine** (600 mg twice daily for 10 days) for the treatment of COVID-19.
- The COVID-19 Treatment Guidelines Panel **recommends against** the use of **hydroxychloroquine plus azithromycin** for the treatment of COVID-19, except in the context of a clinical trial.
- **Given the risk of dysrhythmias, the FDA cautions against the use of chloroquine or hydroxychloroquine for the treatment of COVID-19** outside of a hospital or clinical trial. When chloroquine or hydroxychloroquine is used, clinicians should monitor the patient for adverse effects, especially prolonged QTc interval.
- On June 15, the FDA revoked the emergency use authorization (EUA) that permitted the use of chloroquine and hydroxychloroquine donated to the Strategic National Stockpile to treat certain patients with COVID-19.

Prophylaxis

The COVID-19 Treatment Guidelines Panel **does not recommend** the use of any agents for SARS-CoV-2 pre-exposure prophylaxis (PrEP) OR post-exposure prophylaxis (PEP) outside the setting of a clinical trial.

At present, no agent given before an exposure (i.e., as PrEP) is known to be effective in preventing SARS-CoV-2 infection, and no agent is known to be effective for preventing SARS-CoV-2 infection after an exposure (i.e., as PEP).

Clinical trials using hydroxychloroquine, chloroquine, or HIV protease inhibitors as PrEP or PEP are in development or underway.

Further, the Texas Medical Association supports the [guidance by the Texas State Board of Pharmacy](#) which places medical limitations on the prescribing of hydroxychloroquine as a means to conserve this drug for patients for whom it is medically necessary.

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