

EULAR: Hydroxychloroquine use in lupus patients 'does not seem to prevent COVID-19'

April 27 2020



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The current outbreak of COVID-19 represents a source of concern for the management of systemic

lupus erythematous, SLE, patients. These patients have an increased risk of severe infections due to their underlying <u>disease</u>, the use of immunosuppressive drugs, as well as the potential presence of organ damage associated with their disease.

Hydroxychloroquine, HCQ, a drug that is currently part of the long-term care treatment for SLE, has been reported to possess anti-viral activity in vitro and recent publications have suggested a beneficial effect on COVID-19.

The Annals of the Rheumatic Diseases has published a letter this week regarding the impact of COVID-19 on SLE patients taking flares, as whydoxychloroquine: "Clinical course of Coronavirus Symptoms. Disease 2019 (COVID-19) in a series of 17 systemic lupus erythematous patients under longterm treatment with hydroxychloroquine."

EULAR Past-President Professor Johannes W. Bijlsma says, "This gives a first clinical picture of the course of COVID-19 in SLE patients treated with HCQ. It paves the way for a larger observational study to identify the risk factors associated with the occurrence of a severe form of COVID-19 in patients with SLE. Our preliminary conclusion, based on the observation that most of the SLE patients in this study received long-term treatment with HCQ, having blood concentrations of the drug within therapeutic range, is that HCQ does not seem to prevent COVID-19, at least its severe forms, in patients with SLE."

Medicine shortages are a significant challenge for people with rheumatic and musculoskeletal diseases in the ongoing situation around COVID-19. Data collected by EULAR shows that a majority of countries in Europe have encountered and are still encountering serious shortages of hydroxychloroquine (HCQ), and that shortages in essential medicines were also encountered before the COVID-19 pandemic. EULAR advises that the unrestricted access to HCQ for a possible COVID-19 prophylaxis in the absence of evidence from clinical trial data should be avoided and the drug rather continue to be available for those who are in need of it, for example for use in the case of a disease in which it has already been long approved.

Systemic Lupus Erythematous is an autoimmune disease in which the body's immune system mistakenly attacks healthy tissue in many parts of the body. Symptoms vary from mild to severe and can include painful and swollen joints among other factors. There are often periods of illness, called flares, as well as remission in which there are fewer symptoms.

EULAR has launched the COVID-19 rheumatic and



musculoskeletal diseases reporting database, a
European paediatric and adult database to monitor
and report outcomes of COVID-19 occurring in
patients with rheumatic and musculoskeletal
diseases with the support of the Global
Rheumatology Alliance:

https://www.eular.org/eular_covid19_database.cfm

EULAR has released guidance for patients in the context of the COVID-19 outbreak. The guidance addresses typical questions that patients with RMDs have and recommends protective measures both for patients and the health care workforce. More information and a video can be found here:

https://www.eular.org/policy_statement_on_covid_1 9.cfm

More information: Clinical course of coronavirus disease 2019 (COVID-19) in a series of 17 patients with systemic lupus erythematosus under long-term treatment with hydroxychloroquine. *Annals of the Rheumatic Diseases*, 24 April 2020. DOI: 10.1136/annrheumdis-2020-217566

Provided by European League Against Rheumatism (EULAR)

APA citation: EULAR: Hydroxychloroquine use in lupus patients 'does not seem to prevent COVID-19' (2020, April 27) retrieved 11 December 2022 from https://medicalxpress.com/news/2020-04-eular-hydroxychloroquine-lupus-patients-covid-.html

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