Overview

Ivermectin is an antiparasitic drug approved for the treatment of parasitic infections, including strongyloidiasis and onchocerciasis in humans. There is a reported increase in the use of ivermectin for the prevention and treatment of COVID-19 by the public in African Union Member States.

Currently, there is:

1. No scientific evidence from pre-clinical studies on the therapeutic effect of ivermectin for the management of COVID-19;
2. No evidence of its clinical efficacy for the management of patients with asymptomatic, mild, moderate or severe COVID-19; and
3. No safety data regarding the use of ivermectin for COVID-19 in the majority of the published studies.

While there are some studies that suggest potential effectiveness of ivermectin in the prevention and management of COVID-19, existing data has limitations:

1. Most of the studies had small numbers of participants.
2. The doses and schedules of ivermectin administration varied.
3. Some patients taking ivermectin were also on other medications during study.
4. Many of the studies did not clearly describe the severity of COVID-19.
5. Some of the randomized controlled trials were open-label studies.

Although ivermectin inhibits the replication of SARS-CoV-2 in laboratory studies, the doses used in the laboratory to produce those results are 100-fold higher than those approved for use in humans. Therefore, data from well-designed, randomized, controlled clinical trials are needed to provide evidence for decision on the efficacy of ivermectin for preventing and treating COVID-19.

Africa CDC will continue to monitor emerging evidence on the safety and efficacy of ivermectin for the prevention and treatment of COVID-19 and provide update.

Recommendations

- Member States are advised against the use of ivermectin for the prevention and treatment of COVID-19 because there is no conclusive clinical data to support its safety and efficacy.
- The public is advised to adhere to country-specific guidelines for the prevention and treatment of COVID-19.

References

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