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COVID-19: Can early home treatment with Azithromycin alone or with Zinc help prevent hospitalisation, death, and long-COVID-19? A review

Cold Spring Harbor Laboratory

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Abstract

Introduction The effects of the SARS-CoV-2 pandemic continues to disrupt health systems worldwide, leading to population lockdowns in many countries. Preventing hospitalisation, death and long-COVID-19 with repurposed drugs remains a priority. Hydroxychloroquine (HCQ) and azithromycin (AZM) are the most commonly used in ambulatory care, with divergent results. With the aim of decentralizing early treatment to family practitioners, we addressed the question: *Can early home treatment with AZM alone or with zinc help prevent hospitalisation, death, and long-COVID-19*?

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Methodology We conducted a scoping review of articles published from 31st December 2019 to 5th November 2020 in Pubmed, Google Scholar, MedRxiv, and BioRxiv databases, and a review of undergoing clinical trials published in the Clinicaltrial.gov database.

Results Many studies report on outpatient treatment with a combination of AZM + HCQ versus AZM alone, and few studies propose the addition of Zinc (Zn) to AZM. In addition, we identified 5 clinical trials currently recruiting individuals for early outpatient treatment with AZM. However, we failed in identifying any study or clinical trial conducted with family practitioners responding to our question.

Discussion The antiviral, anti-inflammatory, immunomodulatory benefits of AZM + Zn make this drugs combination a good candidate therapy to treat flu-like-COVID-19 and atypical pneumoniae. The antibacterial action of AZM can also help disrupting the bacteria/virus cooperation that is poorly documented. Considering pros and cons of macrolide use (including antimicrobial resistance), we call for early use of this therapy by family practitioners for home treatment of individuals presenting mild or moderate symptoms under rigorous scientific guidance to prevent hospitalisation, death and long-COVID.

Competing Interest Statement

The authors have declared no competing interest.

Funding Statement

No external funding received

Author Declarations

I confirm all relevant ethical guidelines have been followed, and any necessary IRB and/or ethics committee approvals have been obtained.

Yes

The details of the IRB/oversight body that provided approval or exemption for the research described are given below:

No need to request approval from ethics committee

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All necessary patient/participant consent has been obtained and the appropriate institutional forms have been archived.

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I understand that all clinical trials and any other prospective interventional studies must be registered with an ICMJE-approved registry, such as ClinicalTrials.gov. I confirm that any such study reported in the manuscript has been registered and the trial registration ID is provided (note: if posting a prospective study registered retrospectively, please provide a statement in the trial ID field explaining why the study was not registered in advance).

Yes

I have followed all appropriate research reporting guidelines and uploaded the relevant EQUATOR Network research reporting checklist(s) and other pertinent material as supplementary files, if applicable.

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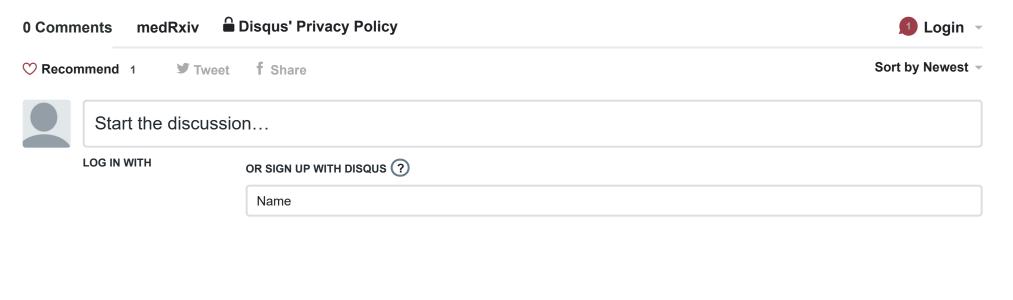
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