

WHO to trial malaria, arthritis drugs as COVID treatments

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Malaysia, which has struggled to control COVID-19 this year, is among the 52 countries participating in the new treatment trial [File: Lim Huey Teng/Reuters]

Geneva, August 12 (RHC)-- The World Health Organization (WHO) will test three new drugs as potential treatments for people in hospital with severe COVID-19 as it expands its global trial to 52 countries.

The three treatments – artesunate, imatinib and infliximab – were selected by an independent expert panel for their potential in reducing the risk of death in hospitalised patients. Artesunate is currently used for severe malaria, imatinib for certain cancers, and infliximab for diseases of the immune system such as Crohn's disease and rheumatoid arthritis.

"Finding more effective and accessible therapeutics for COVID-19 patients remains a critical need, and WHO is proud to lead this global effort," WHO Director-General Tedros Adhanom Ghebreyesus said in a statement. The drugs were donated to the trial by the manufacturers.

The WHO completed the first phase of the so-called Solidarity trials last year, working with countries worldwide to find effective treatments for the novel coronavirus and assess their effect on mortality, no matter how small. The new phase of the trial involves 600 hospitals in 52 countries – 16 more than the initial phase – and thousands of patients.

Four drugs have already been evaluated by the trial with results showing that remdesivir, hydroxychloroquine, lopinavir and interferon had little or no effect on people admitted to hospital with COVID-19.

The expansion of the trial comes as the world battles a new surge in the pandemic, fuelled by the highly transmissible Delta variant. Countries that have not been able to vaccinate a significant proportion of their population have been particularly hard hit.

The WHO has so far recommended only two treatments for COVID-19 – interleukin-6 receptor blockers, recommended last month, and corticosteroids. Trials in the United Kingdom last year found dexamethasone, a cheap and widely available steroid, reduced the risk of death by a third for patients on ventilators.

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