

Response to 'To consider or not antimalarials as a prophylactic intervention in the SARS-CoV-2 (Covid-19) pandemic' by Parperis

We thank Konstantinos Parperis for his correspondence to our letter 'To consider or not antimalarials as a prophylactic intervention in the SARS-CoV-2 (Covid-19) pandemic' speculating on prophylactic use of antimalarials for subjects at high risk of getting infected by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).^{1,2}

As the author highlights, at this time, it is preferable to be cautious when addressing this topic. These days, the scientific information is moving faster than usual, and new data are available every day; however, the scientific evidence collected to date is not robust enough and not unequivocal. The pathogenesis of Covid-19 is still largely unknown and the precise effect of antimalarial drugs in Covid-19 patients is not fully predictable. Every day new data are accessible, even though not conclusive and not yet supporting a role for antimalarials in the management of SARS-Cov-2 infection, especially in critically ill patients.³ The enthusiastic reactions for the early French study by Gautret *et al*, showing a fast virus clearance in patients with Covid-19 treated with hydroxychloroquine, have not found confirmation in all the subsequent observations.⁴⁻⁸ In any case, the empiric use of hydroxychloroquine has already been diffused in many countries.⁹

The issue of fair allocation of resources during the Covid-19 pandemic is a matter of debate. Even appreciating the great efforts to manage the current pandemic in the best possible way, as rheumatologists, we should feel obliged to consider the care of our patients with autoimmune rheumatic diseases, in which hydroxychloroquine and chloroquine have demonstrated their efficacy. As we stated at the end of the letter, a major concern is the possible effect of a wide use of antimalarials on their global supply. For sure, treatment of Covid-19 with hydroxychloroquine and chloroquine should not compromise the chronic therapy of patients with rheumatological diseases.

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