An update for those taking Hydroxychloroquine (Plaquenil)

25th March 2020

The Autoimmune Resource and Research Centre (ARRC) are receiving a number of telephone and online enquiries regarding the reduced availability of the drug hydroxychloroquine (Plaquenil). This drug is used as a primary treatment (with or without other therapies) for many autoimmune patients, in particular those with lupus or arthritic symptoms, and has immune-modulating and anti-inflammatory activities.

Reflexive actions based upon small case reports involving unblinded, uncontrolled trials are to be discouraged. It appears that much of the enthusiasm about the possible use of Plaquenil in the setting of CoVID-19 stems from two small non-controlled clinical trials, with final results to be formally released and evaluated. There is currently no high-quality evidence to confirm if any prevention or treatment benefit can be achieved by taking hydroxychloroquine. These trials need to involve control patients, those with CoVID-19 and also address issues of optimal dosage and safety when used without autoimmune illness. Caution must be exercised when anyone is providing tenuous treatment hopes based on limited or anecdotal reports. Studies are now currently being designed here in Australia and also internationally with us all awaiting results.

Unfortunately, following on from media reports that this drug, as well as other antimalarial drugs, may be of use in preventing and even treating COVID-19, some supply shortages have been reported in local pharmacies. This has caused some worried and anxious calls for information regarding continuing supply. As a result of these enquiries, ARRC has contacted the Pharmaceutical Society of Australia (PSA) and Sanofi the supplier of Plaquenil in Australia to seek clarification so we can provide information direct to you.

The PSA's National President, Associate Professor Chris Freeman, has issued a letter to all prescribers including Specialists, GPs, dentists and other health care workers over the weekend making them aware of the increased prescribing of hydroxychloroquine. The letter addresses this by encouraging prescribers to be responsible to ensure availability of supply of hydroxychloroquine for those patients who need it and to prevent inappropriate use.

In addition, the Commonwealth Government has adopted and enforced a new pharmaceutical supply instrument in specific regards to Hydroxychloroquine, the *Poisons Standard Amendment (Hydroxychloroquine and Salbutamol) Instrument 2020.* This provides additional controls in the Poisons Standard which apply to the prescribing of hydroxychloroquine; specifically, that initial treatment of a patient with hydroxychloroquine must be authorised by a specialist in any of the following specialties: dermatology, intensive care medicine, paediatrics and child health, physician, and emergency medicine. General practitioners will not be able to initiate treatment with hydroxychloroquine for a patient, but will be able to authorise (prescribe) continuing supply of hydroxychloroquine for a patient (after specialist initiation).

I am also assured by Sanofi and the PSA that there is a national stockpile of the drug with PSA stating that they will continue to work with governments and regulators to help address issues relating to medicine stock supply.

ARRC will continue to keep you updated on COVID-19 issues that arise over the coming weeks.

Stay safe. May we all practice kindness and care towards each other.

Assoc Prof Glenn Reeves, Medical Director
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