

Chapter 4

PHARMACOLOGICAL PROPERTIES OF HYDROXYCHLOROQUINE, AZITHROMYCIN, FAVIPIRAVIR AND LOPINAVIR/RITONAVIR USED IN THE COVID-19 TREATMENT

Mahluga JAFAROVA DEMIRKAPU¹

INTRODUCTION

COVID-19, due to SARS-CoV-2, which was first reported from Wuhan, Hubei province of the Republic of China, and spreads all over the world, causing pandemics, has no effective treatment yet. Therefore, the use of certain drugs, such as hydroxychloroquine (HCQ), azithromycin, favipiravir and lopinavir/ritonavir, has been granted an emergency use authorization (EUA) by authorities^(1,2). The EUA of HCQ in COVID-19 treatment was issued by the FDA in April 2020, but revoked in June 2020⁽³⁾. However, its effectiveness in COVID-19 continues to be investigated by clinical studies⁽⁴⁾. HCQ administration in COVID-19 prophylaxis and/or treatment is still recommended in Turkey⁽²⁾.

Pharmacokinetics and pharmacodynamics of HCQ, azithromycin, favipiravir and lopinavir/ritonavir, effects on reproduction, pregnancy and breastfeeding, drug-drug interactions are detailed in subtitles.

HYDROXYCHLOROQUINE

HCQ is an antimalarial drug of the aminoquinoline group, that has been used since 1955⁽⁵⁾. Besides malaria treatment, it is used in diseases such as rheumatoid arthritis (RA), systemic lupus erythematosus (SLE), chronic discoid lupus erythematosus, dermatomyositis (cutaneous disease), porphyria cutanea tarda, primary Sjögren syndrome (extraglandular involvements), Q fever (*Coxiella burnetii*), Sarcoidosis (arthropathy and cutaneous disease) etc^(5,6). Pharmacokinetics and pharmacodynamics of HCQ are presented in Table 1.

¹ Asst Prof., Department of Pharmacology, Tekirdag Namık Kemal University Faculty of Medicine, Tekirdag, Turkey ORCID iD: 0000-0001-8717-4342.

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