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Dr. Gus Grant
Registrar
College of Physicians and Surgeons of Nova Scotia
Suite 400 – 175 Western Parkway
Bedford, Nova Scotia, B4B 0V1

Dear Dr. Grant,

Re: Off-label prescribing of antimicrobials for COVID-19

It has come to our attention that some physicians have been prescribing lopinavir/ritonavir and hydroxychloroquine to prevent COVID-19 in their patients. It is entirely conceivable that physicians will turn to other medications, such as ribavirin, in the future with this possibility in mind.

To date there is no evidence of a benefit for any licensed medication in the treatment or prophylaxis of COVID-19. As this pandemic evolves, evidence may emerge of a therapeutic benefit of certain antimicrobials in the management of COVID-19. Already we are anticipating supply and equipment shortages in patient management. It is entirely possible that we will see medication shortages. Therefore, we need to reserve potential therapeutic options for those in most need. Additionally, lopinavir is not a commonly prescribed antiretroviral and, as such, in limited supply. Prescribing it for non-HIV infected individuals will likely mean that it is unavailable to HIV patients for whom this medication is the most active agent in the regimen, jeopardizing their treatment success.

In short, it is unacceptable for physicians to be prescribing lopinavir/ritonavir and hydroxychloroquine (or any other unproven medication) to prevent COVID-19 in their patients. The Division of Infectious Diseases strongly recommends that this practice be terminated immediately.

Sincerely,



On behalf of the Division of Infectious Diseases