### GOVERNMENT OF MEGHALAYA HEALTH & FAMILY WELFARE DEPARTMENT

#### No.Health.100/2020/37,

#### Dated Shillong, the 20<sup>th</sup>April,2020.

#### Suggested protocol for using Hydroxychloroquine for COVID-19

In view of the pandemic situation arising out of the COVID-19 and the need to ensure that Hydroxychloroquine prophylaxis to front line workers including Doctors, Nurses, Attendants and Sweepers are being properly administered, the following protocols are being issued for necessary guidance based on the advice of medical experts and ICMR guidelines.

Hydroxychloroquine (HCQ) has been found to be effective against coronavirus in laboratory studies and in-vivo studies. Its use in prophylaxis is derived from available evidence of benefit as treatment and supported by pre-clinical data. The following recommendation for the use of HCQ as a prophylactic agent against COVID-19 infection is based on these considerations, as well as risk-benefit consideration, under exceptional circumstances that call for the protection of high-risk individuals.

The use of HCQ has been recommended for only selected individuals. ECG is to be done before giving prophylaxisand checking QT interval levels.

Eligible individuals are:		DOSAGE:
•	Asymptomatic healthcare workers	Asymptomatic healthcare workers involved in
	involved in the care of suspected or	the care of suspected or confirmed cases of
	confirmed cases of COVID-19	COVID-19: 400 mg twice a day on Day 1,
	commed cases of COVID-17	followed by 400 mg once weekly for next 7
		weeks; to be taken with meals.
	Agumptomatic household contacts of	Asymptomatic household contacts of
•	Asymptomatic household contacts of	
	laboratory confirmed cases	laboratory confirmed cases: 400 mg twice a
		day on Day 1, followed by 400 mg once
		weekly for next 3 weeks; to be taken with
		meals.
•	Symptomatic <b>CRITICAL</b> healthcare	
	workers/ symptomatic	Dose of Hydroxychloroquin and
	<b>CRITICAL</b> household contacts of	Azithromycin (Off Label indication):
	laboratory confirmed cases	HCQ 400mg 2 times a day on 1st day then
	laboratory committee cases	200mg 2 times a day for 4 days.
		e
		Azithromycin 500mg once a day for 5 days.
		(To be given only under close monitoring of
		QT interval)

#### Chest CT scan is also conducted to see the detailed condition of the lungs.

### Individuals who are not eligible to take HCQ are:

- The drug is not recommended for prophylaxis in children under 15 years of age.
- The drug is contraindicated in persons with known case of retinopathy, known hypersensitivity to hydroxychloroquine, 4-aminoquinoline compounds

## Key Considerations to be taken into account:

- The drug has to be given only on the prescription of a registered medical practitioner.
- It is advised to consult with a physician for any adverse event or potential drug interaction before initiation of medication.
- The prophylactic use of hydroxychloroquine to be coupled with the pharmacovigilance for adverse drug reactions through self-reporting using the Pharmacovigilance Program of India (PvPI) helpline/app.
- If anyone becomes symptomatic while on prophylaxis he/she should immediately contact the health facility, get tested as per national guidelines and follow the standard treatment protocol.
- All asymptomatic contacts of laboratory confirmed cases should remain in home quarantine as per the protocol, even if they are on prophylactic therapy.
- Simultaneously, proof of concept and pharmacokinetics studies are to be taken up expeditiously. Findings from these studies and other new evidence will guide any change in the recommendation.

It should be noted that the intake of the said medicine should not instill a sense of false security. The hydroxychloroquine may not be replaced by any other compound.

# (Sampath Kumar, IAS)

### Commissioner & Secretary to the Government of Meghalaya, Health & Family Welfare Department

Dated Shillong, the 20<sup>th</sup>April,2020.

### Memo No.Health.100/2020/38-A, Copy to :-

1. The Private Secretary to Chief Minister, Meghalaya, Shillong for kind information of Chief Minister.

2. The Private Secretary to Deputy Chief Minister, Meghalaya, Shillong for kind information of Deputy Chief Minister.

3. The Private Secretary to Health Minister, Meghalaya, Shillong for kind information of Minister.

- 4. Private Secretary to Chief Secretary for kind information of the Chief Secretary.
- 5. The Commissioners & Secretary, Health & F.W.Department.
- 6. Secretary, Health & F.W.Department.
- 7.Director of Health Services (MI)/(MCH &FW)/(Research),Meghalaya,Shillong.
- 8. The Director General of Police, Meghalaya, Shillong

9.Deputy Commissioners,

East Khasi Hills, Shillong/ West Khasi Hills, Nongstoin/Ri Bhoi District, Nongpoh / West Jaintia Hills District, Jowai / West Garo Hills District, Tura / East Garo Hills District, Williamnagar / South Garo Hills District, Baghmara/North Garo Hills, Resubelpara/South West Garo Hills, Ampati/East Jaintia Hills, Khliehriat/ South West Khasi Hills, Mawkyrwat.

10. Joint Director of Health Services (MCH & FW) I/c IDSP, Meghalaya, Shillong.

11.District Medical & Health Officer,

East Khasi Hills, Shillong/ West Khasi Hills, Nongstoin/Ri Bhoi District, Nongpoh / West Jaintia Hills District, Jowai / West Garo Hills District, Tura / East Garo Hills District, Williamnagar / South Garo Hills District, Baghmara/North Garo Hills, Resubelpara/South West Garo Hills, Ampati/East Jaintia Hills, Khliehriat/ South West Khasi Hills, Mawkyrwat.

By Orders, etc.

Deputy Secretary to the Government of Meghalaya, Health & Family Welfare Department