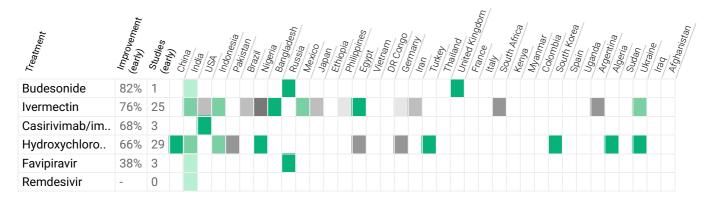
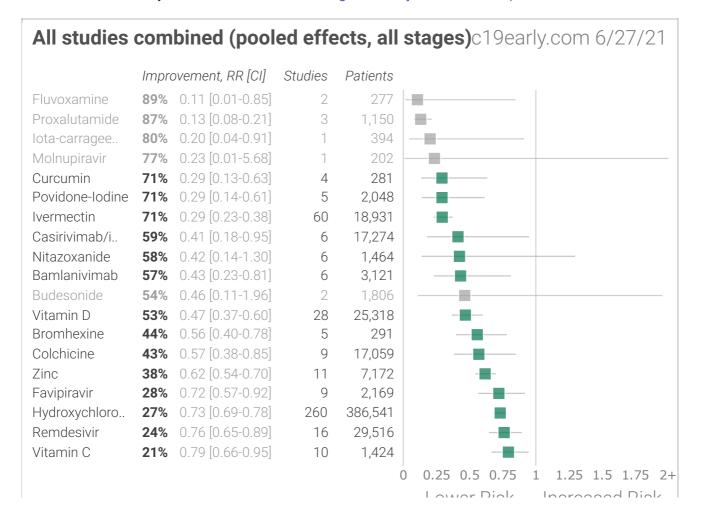
COVID-19 early treatment: real-time analysis of 718 studies

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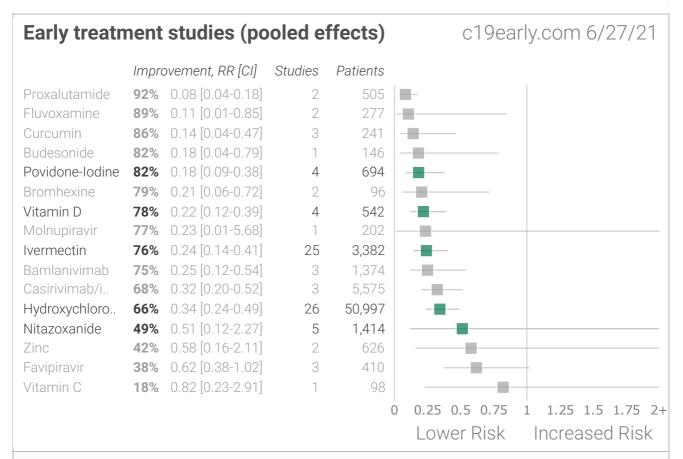
Analysis of the efficacy of early treatments for COVID-19. Treatments do not replace vaccines and other measures. All practical, effective, and safe means should be used. Elimination of COVID-19 is a race against viral evolution. No treatment, vaccine, or intervention is 100% available and effective for all current and future variants. Denying the efficacy of any method increases the risk of COVID-19 becoming endemic; and increases mortality, morbidity, and collateral damage.



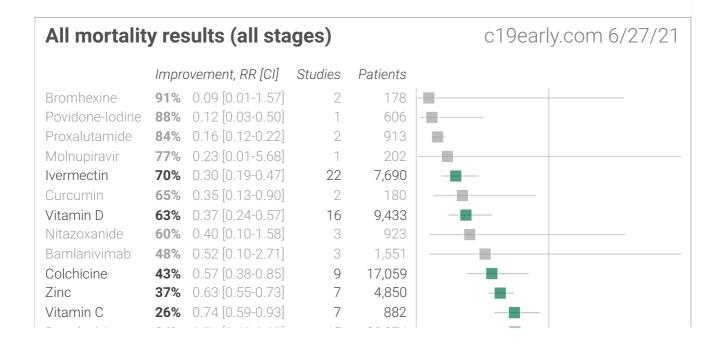
Medications approved for early treatment by >2 countries. 55 countries have officially approved early treatment. For details see global early treatment adoption.



Random effects meta-analysis of all studies combined (pooled effects, all stages). Treatments with 3 or fewer studies are shown in grey. Pooled results across all stages and outcomes depend on the distribution of stages and outcomes tested - for example late stage treatment may be less effective and if the majority of studies are late stage this may obscure the efficacy of early treatment. Please see the specific stage and outcome analyses.

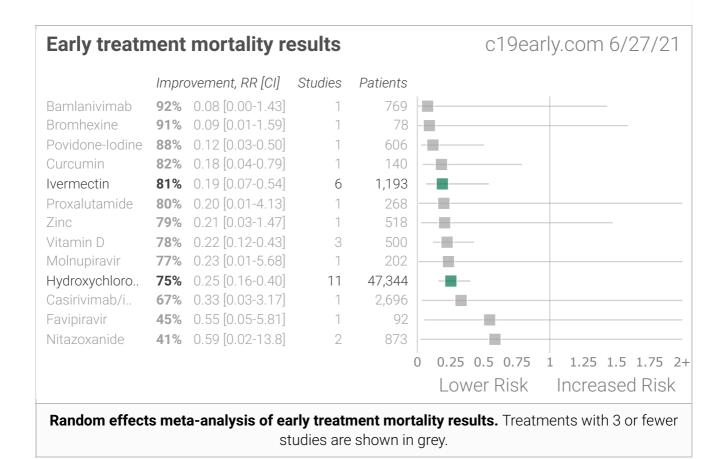


Random effects meta-analysis of early treatment studies (pooled effects). Treatments with 3 or fewer studies are shown in grey. Pooled results across all outcomes are affected by the distribution of outcomes tested, please see detail pages for specific outcome analysis.



Remdesivir	26%	0.74 [0.62-0.89]	15	29,374		_					
Hydroxychloro	25%	0.75 [0.69-0.81]	162	270,250		-					
Casirivimab/i	6%	0.94 [0.87-1.02]	2	12,481		-					
Favipiravir	-4%	1.04 [0.66-1.66]	3	1,456						_	
				(0	0.25 0.5 0.75	1	1.25	1.5	1.75	2+
						Lower Risk		ncrea	asec	d Ris	sk

Random effects meta-analysis of all mortality results (all stages). Treatments with 3 or fewer studies are shown in grey. Pooled results across all stages depend on the distribution of stages tested - for example late stage treatment may be less effective and if the majority of studies are late stage this may obscure the efficacy of early treatment. Please see the specific stage analyses.



Recent studies (see the individual treatment pages for all studies):

6/24	Late Details	Sabico et al., Nutrients, doi:10.33 Effects of a 2-Week 5000 IU versus 10 Small RCT of 69 hospitalized patients comparing 1000IU and 5000IU daily c
6/24	Meta Details	Pal et al., Jo meta-analysis Vitamin D supplementation and clinic Meta analysis of 13 vitamin D treatment studies, showing significantly lowe
6/24	Late Details	Gerlovin et a death, ↑22.0%, Pharmacoepidemiology, Machine Lea Retrospective 1,769 hospitalized patients in the USA showing no significant

6/22	News Details	Misiones Mi news Results from ivermectin use from the News report on ivermectin use in Misiones, Argentina, showing significantly
6/21	Late Details	Arch et al., m death, ↓19.9%, Evaluation of the effectiveness of rem Prospective PSM analysis of remdesivir use in the UK showing statistically s
6/21	In Sili Details	Yadav et al., Research Square, d Repurposing the Combination Drug of In Silico study showing stronger inhibition of SAR-CoV-2 for HCQ+favipiravir
6/19	Early Details	Ahmadi et al hosp., \$1.7%, Oral nano-curcumin formulation effica RCT 60 outpatients in Iran, 30 treated with nano-curcumin showing lower ho
6/18	Revie Details	
6/18	Late Details	Schwartz et ICU, ↑133.3%, Assessing the efficacy and safety of h Small early terminated late treatment RCT not showing significant differenc
6/18	In Vitr Details	Purwati et al in vitro An in vitro study of dual drug combina In Vitro study of combinations of drugs showing antiviral efficacy of HCQ al
6/18	Early Details	Fischer et al death, ↓76.5%, Molnupiravir, an Oral Antiviral Treatme RCT 202 outpatients in the USA showing significantly faster viral clearance,
6/18	Early Details	Krolewiecki ventilation, ↑15 Antiviral effect of high-dose ivermectin Proof of concept RCT with 30 ivermectin patients and 15 control patients, s
6/17	Meta Details	Bryant et al., death, ↓62.0%, Ivermectin for Prevention and Treatm Systematic review, meta analysis, and trial sequential analysis of 24 RCTs fi
6/17	Levels Details	Jude et al., J hosp., ↓71.6%, Vitamin D deficiency is associated wit Retrospective 80,670 people in the UK with vitamin D levels measured withi
6/16	Late Details	Horby et al., death, ↓6.0%, p Casirivimab and imdevimab in patient RCT 9,785 hospitalized patients in the UK showing lower mortality with casi
6/15	Revie Details	Zaidi et al., T review The mechanisms of action of Ivermec Extensive review of 20 mechanisms of action of ivermectin for SARS-CoV-2.
6/15		Panchariya e in vitro Zinc2+ ion inhibits SARS-CoV-2 main In Silico and In Vitro study showing that ionic zinc inhibits SARS-CoV-2 main
6/15	Early Details	Aref et al., In recov. time, \(\bullet \)6 Clinical, Biochemical and Molecular Ev RCT 114 patients in Egypt, 57 treated with ivermectin mucoadhesive nanos

6/14	Levels Details	•	•	Vitamin D and COVID-19 severity and d patients in Italy, showing very high pre
6/9	Late Details			Lack of efficacy of hydroxychloroquin not showing significant differences with
6/8	Late Details	•	•	Safety and efficacy of antiviral therapy
6/7	Late Details		·	Evaluation of Zinc Sulfate as an Adjun ving lower mortality with zinc treatment
6/7	PrEP Details		•	Hydroxychloroquine for SARS CoV2 P nealthcare workers, showing lower risk
6/7	Levels Details			Pre-infection 25-hydroxyvitamin D3 lev nts in Israel showing higher mortality a
6/6	Levels Details			The relationship between 25(OH) vita a showing that the frequency of vitamin
6/6	N/A Details	-	·	Ivermectin and outcomes from Covid of 19 RCTs showing mortality RR 0.31

We aim to cover the most promising early treatments for COVID-19. We use pre-specified effect extraction criteria that prioritizes more serious outcomes, for details see methods. For specific outcomes and different treatment stages see the individual pages. Not all treatments are covered here, effectiveness has been reported for many other treatments in studies. Of the 718 studies, 503 present results comparing with a control group, 444 are treatment studies, 59 analyze outcomes based on serum levels, and 46 are meta analyses.

Please send us corrections, updates, or comments. Vaccines and treatments are both extremely valuable and complementary. All practical, effective, and safe means should be used. Elimination of COVID-19 is a race against viral evolution. No treatment, vaccine, or intervention is 100% available and effective for all current and future variants. Denying the efficacy of any method increases the risk of COVID-19 becoming endemic; and increases mortality, morbidity, and collateral damage. We do not provide medical advice. Before taking any medication, consult a qualified physician who can provide personalized advice and details of risks and benefits based on your medical history and situation. Treatment protocols for physicians are available from the FLCCC.

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