WHAT DID THE REVIEW FIND?

- High degree of uncertainty of the effect of ivermectin on mortality
- High degree of uncertainty of the effect of ivermectin on the need for invasive mechanical ventilation or the need for supplemental oxygen
- High degree of uncertainty of the effect of ivermectin on adverse events
- Hospitalised patients: little or no effect on clinical improvement or duration of hospitalisation up to 28 days.
- Ambulatory patients: ivermectin had little or no effect on clinical improvement up to 14 days

THE KEY REVIEW QUESTION

This review aimed to determine whether ivermectin should be used for the management of COVID-19.

WHAT WAS INCLUDED IN REVIEW?

- An updated review of evidence from further randomised placebo-controlled trials (RCTs) evidenced in two electronic databases Epistemonikos and the Cochrane COVID-19 Study Register.
- Previous rapid reviews included active comparator trials, with the emergence of further RCT data, the comparator has now been restricted to placebo/standard of care.

BACKGROUND

Ivermectin is an antiparasitic drug that is commonly used for the treatment and prophylaxis of onchocerciasis and treatment of strongyloidiasis and intractable scabies.

Additional rapid COVID-19 reviews can be found [here](#).

CONSIDERATIONS

- Guideline organisations globally do not recommend the use of ivermectin for the management of COVID-19.
- Ongoing RCTs may produce clearer answers on this topic in the future.
- Much of the RCT evidence consists of trials of low methodological quality, with small sample sizes and disparate interventions and controls, limiting the confidence in any conclusions with respect to ivermectin.
- Existing evidence does not suggest any clear clinical or virological benefits.

SUGGESTION

The current very low- to low-certainty evidence does not suggest any clear benefit to the use of ivermectin.

NEML MAC suggests that ivermectin not be used in the management of COVID-19, except in the context of a clinical trial.