

## Chloroquine

S

### **QTc interval prolongation leading to frequent extrasystoles and ventricular tachycardia following off label use: case report**

A study conducted at the Spaarne Gasthuis, Netherlands, and involving 106 patients admitted between 1 March 2020 and 19 April 2020 due to COVID-19, described a patient [*age and sex not stated*], who developed QTc interval prolongation leading to frequent extrasystoles and ventricular tachycardia during off label treatment with chloroquine for COVID-19.

The patient was admitted to a hospital in the Netherlands with COVID-19. The patient started receiving off-label treatment with chloroquine as per the Dutch guidelines. As per guidelines, the patient received a loading dose of 600mg chloroquine base [*sic*], followed by 300mg chloroquine base twice daily for a total period of 5 days [*route not stated*]. The dose of 300mg chloroquine base was equivalent to 500mg chloroquine-diphosphate [chloroquine phosphate]. Thereafter, the patient developed QTc interval prolongation above 500ms. Subsequently, the patient developed frequent extrasystoles and ventricular tachycardia. These events were attributed to chloroquine [*duration of treatment to reaction onset not stated*].

Therefore, the patient's chloroquine therapy was stopped [*outcome not stated*].

Becker ML, et al. QTc Prolongation in COVID-19 Patients Using Chloroquine. *Cardiovascular Toxicology* 21: 314-321, No. 4, Apr 2021. Available from: URL: <http://www.springerlink.com/content/120550/>

803613526