

Azithromycin/hydroxychloroquine/lopinavir/ritonavir

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Complete atrioventricular-block, torsades-de-pointes and QT-interval-prolongation following off label use: 2 case reports

In an observational, retrospective, multicenter study of 87 patients with COVID-19 admitted in Italy between 01 March 2020 to 01 April 2020, two patients [*ages and sexes not stated*] were described, who developed

torsades-de-pointes along with QTc interval prolongation and complete atrioventricular (AV) block following off label treatment with azithromycin, hydroxychloroquine and lopinavir/ritonavir for COVID-19, respectively [*routes, durations of treatments and outcomes not stated*].

The patients were diagnosed with COVID-19 and received off label treatment with triple combination including lopinavir/ritonavir 250/50mg twice daily, hydroxychloroquine 200mg twice daily and azithromycin 500 mg/day for COVID-19. However, one patient developed torsades-de-pointes along with QTc interval prolongation (QTc: 560ms) after 5 days of triple combination therapy. Another patient with initial baseline of first degree AV block (PR: 230ms) developed complete AV block after 3 days of triple combination therapy.

Russo V, et al. Effect of Triple Combination Therapy With Lopinavir-Ritonavir, Azithromycin, and Hydroxychloroquine on QT Interval and Arrhythmic Risk in Hospitalized COVID-19 Patients. *Frontiers in Pharmacology* 11: 8 Oct 2020. Available from: URL: <http://doi.org/10.3389/fphar.2020.582348>

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