

## ELEMENTS: IN THIS MONTH'S ISSUE

# COVID-19 and community self-prescribing: a dangerous folly

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My fellow Irishman, George Bernard Shaw stated 'Beware of false knowledge it is more dangerous than ignorance'. We live in an age where the spreading of information—whether true or false, is at a touch of a button. These are indeed challenging pandemic times and particularly for infected individuals within the community who are susceptible to social media so-called 'influencers' advocating unproven treatments to this vulnerable population. A case in point is the use of corticosteroids early in COVID-19 infection.

We therefore welcome the authoritative commentary piece by Dr Ray and colleagues from the All-India Institute of Medical Sciences in New Delhi who highlight the widespread use of corticosteroids in India by infected individuals in their homes with mild disease. The fear of disease progression on a backdrop of scarce health resources has, as the authors state, 'opened the floodgates to therapeutic misadventure'. No study, to date, has shown any tangible benefits of use of steroids in mild cases. The authors highlight how steroids are available without prescription in India fueling this inappropriate behavior.

## Tocilizumab treatment in COVID-19

The QJM has fast-tracked publication of a number of seminal articles on potential treatments for COVID-19 infections.<sup>1-4</sup> In the context of Tocilizumab, the journal was one of the first medical journals to initially report both the use and subsequently a clinical trial showing the benefit of Tocilizumab, the interleukin-6 inhibitor, in acute COVID-19 infection.<sup>5,6</sup> We now publish the definitive meta-analysis from Dr. Avni and

colleagues from Technion, the Israel Institute of Technology quantifying the benefit of this biological therapy in a pre-intensive care unit (ICU) population with worsening disease. The summation of the trials to date showed principally a significant reduction in rates of superinfection and also a significant reduction in the requirement for ICU beds in the Tocilizumab treatment arms of trials.

## References

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