COVID-19 Persistent: TREATMENT WITH IVERMECTIN AND ACETYLSALICYLIC ACID OF PATIENTS WITH THE PERSISTENT SYMPTOM OF ANOSMIA OR HYPOSMIA

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doi: http://dx.doi.org/10.13140/RG.2.2.18883.63522/1

SUMMARY:

INTRODUCTION: Anosmia and Hyposmia, which is the loss or decrease of smell, is a symptom that occurs in 30 to 70% of patients with COVID-19 in its acute stage, but it also occurs frequently within the symptoms that persist for weeks after the acute stage of the disease. There is no consensus regarding a specific and effective treatment for this persistent symptom, and there is a lack of knowledge of its pathophysiology and the factors related to its persistence. Based on the previous experiences by our work team, regarding the use of drugs to reduce the load and viral replication for the treatment of persistent symptoms of COVID-19, we carried out new studies with the use of Ivermectin for these cases, and adding drugs to reduce thrombophilia, the state of hypercoagulability, hypoperfusion and nitric oxide production related to Endothelitis caused by SARS CoV-2 infection.

MATERIAL AND METHODS: In the present study, 21 adult patients with the persistent symptom of Anosmia or Hyposmia and who had been previously diagnosed and treated for COVID-19 were included.
The following treatment protocol was followed: Ivermectin was administered at a dose of 0.2 mg. per kilo of body weight per day for 2 days, it was indicated to take the drug after dinner.
If the patients still presented Anosmia or Hyposmia after the Ivermectin doses of the first 2 days, the following protocol was continued: take Acetylsalicylic Acid (Aspirin) 100 mg. after breakfast and dinner (200 mg per day) for 5 days (from 3rd to 7th day). In addition, after stopping taking ivermectin for 2 days (the 3rd and 4th day), take a dose of 0.4 mg. per kilo of weight per day for 2 days (the 5th and 6th day), indicating that you take half the dose after lunch and the remaining half after dinner.
In cases where, on the 8th day of treatment, the patient still presented Anosmia or Hyposmia, the 200 mg doses were continued. a day of Acetylsalicylic Acid and a treatment scheme with L-Lysine was indicated, starting with daily doses of 500 mg. and that they were increasing every 3 days by 500 mg. until reaching 2,000 mg. per day, it was also indicated that from the 8th day after starting treatment with L-Lysine, a new cycle of treatment with Ivermectin at a dose of 0.4 mg be administered per kilo of weight per day for 3 days.
During the treatment period, patients had to avoid consuming coffee, soft drinks, orange and other citrus fruits.

RESULTS: Of the 21 adult patients with persistent Anosmia or Hyposmia treated with Ivermectin, 66.7% had a total clinical improvement (100%) after 2 days of treatment with

Ivermectin, and this percentage rose to 85.7% after of administering 2 more doses of Ivermectin and Acetylsalicylic Acid for 5 days.
In 14.3% of the patients who did not present a total clinical improvement in Anosmia or Hyposmia after 4 doses of Ivermectin and Acetylsalicylic Acid for 5 days, L-Lysine was administered according to the established treatment scheme, in addition to Acid Acetylsalicylic and a new course of treatment with Ivermectin. With this, the total clinical resolution of the Anosmia or Hyposmia was achieved in 90.5% of the cases and a significant partial response of clinical improvement in the remaining cases.
In the 2 cases that did not obtain a total response, the partial response of the clinical improvement was 60% in one case and 75% in the other case, that is, the Anosmia was reduced in these 2 cases by 60 and 75 % since starting the established treatment.

CONCLUSION: In the present study, a total clinical improvement of the persistent symptom of Anosmia or Hyposmia is observed in a very high percentage of patients treated with Ivermectin and Acetylsalicylic Acid following the established protocol.
The fact that most cases respond favorably with a few days of treatment indicates the reversible nature of Anosmia in COVID-19 and suggests that its pathophysiology does not involve prolonged or permanent damage to the level of the nerves involved in the sense of olfaction, so it would be more of a problem located at the level of the olfactory epithelium and cells of the olfactory bulb.

Key Words: COVID-19, Anosmia, Hyposmia, Persistent Symptoms of COVID-19, Post-Acute COVID Symptoms, Long-Term COVID, Persistent COVID-19, Long hauler, Long COVID, COVID Long term, Ivermectin, Lysine, Acid Acetylsalicylic, Aspirin.

Palabras Clave: COVID-19, Anosmia, Hiposmia, Síntomas Persistentes de COVID-19, Síntomas Post-Agudos de COVID, COVID de Larga Duración, COVID-19 Persistente, Long hauler, Long COVID, COVID Long term, Ivermectina, Lisina, Ácido Acetilsalicílico, Aspirina.