

COVID-19: Lessons to Learn from Public Discourse Regarding Hydroxychloroquine



The COVID-19 pandemic has affected all aspects of our lives, including the economy, healthcare and scientific research. In the race to find effective and safe treatment for coronavirus disease, there has been a significant increase in scientific communication. However, the quality of this communication remains questionable. Preprints are not peer-reviewed even though they are being distributed online, and even though many will never be published in a peer-reviewed scientific journal.

One very prominent example of this is the story of hydroxychloroquine. When the possibility that this drug could be the miracle cure for COVID-19 was presented to the world, there was great enthusiasm and excitement. It soon became a hot topic and was aggressively promoted on social media. Because of this massive promotion, the use of hydroxychloroquine increased, but this usage was mainly fuelled by social media, lay press and celebrity influence. There was no solid scientific evidence, and eventually, this is what turned all the enthusiasm to skepticism.

There were concerns that the use of hydroxychloroquine might induce arrhythmias. Results from multiple large clinical trials on hydroxychloroquine for prevention or treatment of COVID-19 showed no significant differences in infection rates between treatment and control groups. The RECOVERY trial announced the suspension of its hydroxychloroquine arm, citing lack of efficacy. The WHO soon announced that the hydroxychloroquine arm of the Solidarity trial had also been stopped due to inefficacy. Hence, what started off as a full-scale declaration of a miracle cure soon turned into nothing.

The hydroxychloroquine fiasco clearly shows how important it is to disseminate accurate information to the public and to not politicise healthcare or treatment strategies. It has become very clear during this pandemic that there is a need to combat misinformation, and there is also a need for greater coordination between physician-researchers, patient advocacy groups and patient care partners. There is also a need to control access to preliminary reports because they are disseminated via social media. During COVID-19, we have seen the press acting as a substitute for peer review, and this has really had a negative impact on the quality of scientific research.

It is not new for humans to pin their hopes on one compound. Desperate times often result in such desperate measures, but it is up to the scientific community to ensure that this does not happen. Social media may be an excellent tool for the dissemination of information and scientific findings, but it should not be allowed to spread claims that have no scientific backing. Scientific rigour must be upheld at all times. Effective peer review is critical to determine the validity of the data and interpretation of results. Publication ethics must always be adhered to, and clinical and scientists must understand that their role as communicators and the role they play in distributing information. The scientific community should always be a reliable source for guidance, and any safety or efficacy claims must be backed by scientific evidence.

Source: Expert Review of Clinical Immunology

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