STRONGYLOIDES STERCORALIS PROPHYLAXIS WITH IVERMECTIN IN COVID-19 PATIENTS

Background and importance
The RECOVERY trial revealed a survival benefit related with the use of dexamethasone in hospitalized patients with COVID-19.

Strongyloides stercoralis hyperinfection or dissemination syndrome

Complication associated with use of an immunosuppressive drug

Aim and objectives
To evaluate effectiveness and safety of S. stercoralis hyperinfection syndrome prophylaxis with ivermectin in COVID-19 patients from endemic zones treated with immunosuppressive treatment.

Material and methods
A retrospective observational study was performed including all patients from S. stercoralis endemic areas treated with prophylactic ivermectin 6 mg/8 hours for 2 days between March 2020-September 2020.

Effectiveness non-presentation of S. stercoralis hyperinfection or dissemination syndrome
Safety non-presentation adverse events

Results n=35
Home countries

- Bolivia: 48%
- Nicaragua: 24%
- Ecuador: 12%
- Peru: 8%
- Colombia: 8%

Immunosuppressive treatment
- Dexamethasone 6 mg/24h
- Tocilizumab 400 mg
- Methylprednisolone bolus 250 mg
- No immunosuppressive treatment

- 3 patients (9%) presented positive S. stercoralis serology.

- None of the patients develop hyperinfection or dissemination syndrome

- None of the patients had adverse events.

Conclusion and relevance
Prophylactic treatment with ivermectin was safe. Patients from endemic areas who should start immunosuppressive treatment as soon as possible could be treated prophylactically with ivermectin. More studies are needed to generate evidence.

References and/or acknowledgements

Conflict of Interest
No conflict of interest