

**Table 3. Summary of clinical studies assessing the efficacy of ivermectin in COVID-19**

AUTHOR, COUNTRY, SOURCE	STUDY DESIGN, SIZE	STUDY SUBJECTS	IVERMECTIN DOSE	DOSE FREQUENCY	CLINICAL OUTCOMES REPORTED
<b>Prophylaxis Trials</b>					% Ivermectin vs. % Controls
Shouman W, Egypt <i>www.clinicaltrials.gov</i> NCT04422561	RCT N=304	Household members of pts with +COVID-19 PCR test	40–60 kg: 15 mg 60–80 kg: 18 mg > 80 kg: 24 mg	Two doses, 72 hours apart	7.4% vs. 58.4% developed COVID-19 symptoms, p<.001
Carvallo H, Argentina <i>www.clinicaltrials.gov</i> NCT04425850	RCT N=229	Healthy patients negative for COVID-19 PCR	0.2 mg drops	1 drop five times a day x 28 days	0.0% vs. 11.2% contracted COVID-19 p<.001
Elgazzar A, Egypt ResearchSquare doi.org/10.21203/rs.3.rs-100956/v1	RCT N=200	Health care and Household contacts of pts with +COVID-19 PCR test	0.4 mg/kg	Two doses, Day 1 and Day 7	2% vs. 10% tested positive for COVID-19 p<.05
Carvallo H. Argentina Pharma Baires <a href="http://pharmabaires.com/1739-resultados-positivos-del-protocolo-iver-car-en-la-profilaxis-de-los-agentes-de-salud.html">http://pharmabaires.com/1739-resultados-positivos-del-protocolo-iver-car-en-la-profilaxis-de-los-agentes-de-salud.html</a>	RCT N=1,195	Health Care Workers	12 mg	Once weekly for up to ten weeks	0.0% of the 788 workers taking ivermectin vs. 48% of the 407 controls contracted COVID-19.
Bernigaud C. France Annales de Dermatologie et de Venereologie doi.org/10.1016/j.annder.2020.09.231	OCT N=69 case control pairs	Nursing Home Residents	0.2 mg/kg	Once	10.1% vs. 22.6% residents contracted COVID-19 0.0% vs 4.9% mortality
Behera P, India <i>medRxiv</i> doi.org/10.1101/2020.10.29.20222661	OCT N=186 case control pairs	Health Care Workers	0.3 mg/kg	Day 1 and Day 4	2 doses reduced odds of contracting COVID-19 (OR 0.27 95% CI 0.16–0.53)

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<b>Clinical Trials – Hospitalized Patients</b>					
Elgazzar A, Egypt ResearchSquare doi.org/10.21203/rs.3.rs-100956/v1	RCT N=400	Hospitalized Patients	0.4 mg/kg	Once	Moderate illness worsened (1% vs 22%, p<.001. Severe illness worsened 4% vs 30%, mortality 2% vs 20%, p<.001
Niaee S. M. Research Square doi.org/10.21203/rs.3.rs-109670/v1	RCT N=180	Hospitalized Patients	0.2, 0.3, 0.4 mg/kg (3 dosing strategies)	Once vs. Days 1,3,5	Mortality 3.3% vs. 18.3%. OR 0.18, (.06-0.55)
Hashim H, Iraq <i>medRxiv</i> doi.org/10.1101/2020.10.26.20219345	RCT N=140	2/3 outpatients, 1/3 hospital pts	0.2 mg/kg + doxycycline	Daily for 2–3 days	Recovery time 6.3 vs 13.6 days (p<.001), 0% vs 27.3% mortality in severely ill (p=.052)
Spoorthi S, India AIAM, 2020; 7(10):177–182	RCT N=100	Hospitalized Patients	0.2 mg/kg+ Doxycycline	Once	Shorter Hospital LOS, 3.7 vs. 4.7 days, p=.03, faster resolution of symptoms, 6.7vs 7.9 days, p=.01
Ahmed S. Dhaka, Bangladesh International Journal of Infectious Disease doi.org/10.1016/j.ijid.2020.11.191	RCT N=72	Hospitalized Patients	12mg	Daily for 5 days	Faster viral clearance 9.7 vs 12.7 days, p=.02
Portman-Baracco A, Brazil <i>Arch Bronconeumol.</i> 2020 doi.org/10.1016/j.arbres.2020.06.011	OCT N=1408	Hospitalized patients	0.15 mg/kg	Once	Overall mortality 1.4% vs. 8.5%, HR 0.2, 95% CI 0.11-0.37, p<.0001
Soto-Beccerra P, Peru <i>medRxiv</i> doi.org/10.1101/2020.10.06.20208066	OCT N=5683, IVM, N=563	Hospitalized patients, database analysis	Unknown dose <48hrs after admission	Unknown	No benefits found
Rajter JC, Florida <i>Chest</i> 2020 doi.org/10.1016/j.chest.2020.10.009	OCT N=280	Hospitalized patients	0.2 mg/kg + azithromycin	Day 1 and Day 7 if needed	Overall mortality 15.0% vs. 25.2%, p=.03, Severe illness mortality 38.8 vs. 80.7%, p=.001
Khan X, Bangladesh <i>Arch Bronconeumol.</i> 2020 doi.org/10.1016/j.arbres.2020.08.007	OCT N=248	Hospitalized patients	12 mg	Once on admission	Mortality 0.9% vs. 6.8%, p<.05, LOS 9 vs. 15 days, p<.001
Gorial FI, Iraq <i>medRxiv</i> doi.org/10.1101/2020.07.07.20145979	OCT N=87	Hospitalized patients	0.2 mg/kg + HCQ and azithromycin	Once on admission	LOS 7.6 vs. 13.2, p<.001, 0/15 vs. 2/71 died
Camprubi D. Spain Plos One doi.org/10.1371/journal.pone.0242184	OCT N=26	Hospitalized Patients	0.2mg/kg	Once, median of 12 days after symptom onset (8-18 days)	Discharged by Day 8: 53.8% vs. 46.1% – NS Mortality 15.4% vs 23.1% – NS
<b>Clinical Trials – Outpatients</b>					
Mahmud R, Bangladesh <i>www.clinicaltrials.gov</i> NCT0452383	RCT N=363	Outpatients and hospitalized	12 mg + doxycycline	Once, within 3 days of PCR+ test	Early improvement 60.7% vs. 44.4%, p<.03, deterioration 8.7% vs 17.8%, p<.02
Chowdhury A, Bangladesh <i>Research Square</i> doi.org/10.21203/rs.3.rs-38896/v1	RCT N=116	Outpatients	0.2 mg//kg + doxycycline	Once	Recovery time 5.93 vs 9.33 days (p=.071)
Podder CS, Bangladesh <i>IMC J Med Sci</i> 2020;14(2)	RCT, N=62	Outpatients	0.2 mg/kg	Once	Recovery time 10.1 vs 11.5 days (NS), average time 5.3 vs 6.3 (NS)

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Morgenstern J, Dominican Republic <i>medRxiv</i> doi.org/10.1101/2020.10.29.20222505	Case Series N=3,099	Outpatients and hospitalized	Outpatients: 0.4 mg/kg  Hospital Patients: 0.3 mg/kg	Outpatients: 0.3 mg/kg x 1 dose  Inpatients: 0.3 mg/kg, Days 1,2,6,7	Mortality = 0.03% in 2688 outpatients, 1% in 300 non-ICU hospital patients, 30.6% in 111 ICU patients
Carvallo H, Argentina <i>medRxiv</i> doi.org/10.1101/2020.09.10.20191619	Case Series N=167	Outpatients and hospitalized	24 mg=mild, 36 mg=moderate, 48 mg=severe	Days 0 and 7	All 135 with mild illness survived, 1/32 (3.1% of hospitalized patients died
Alam A, Bangladesh, <i>J of Bangladesh College Phys and Surg</i> , 2020;38:10-15 doi.org/10.3329/jbcps.v38i0.47512	Case series N=100	Outpatients	0.2 mg/kg + doxycycline	Once	All improved within 72 hours

HCQ = hydroxychloroquine, NS = non-significant OCT = observational controlled trial, RCT = randomized controlled Trial