



# WHO recommends against the use of remdesivir in COVID-19 patients

20 November 2020



**WHO has updated its recommendation on remdesivir for the treatment of COVID-19.**

**On 22 April 2022, following publication of new data from a clinical trial looking at the outcome of admission to hospital, WHO now suggests the use of remdesivir in mild or moderate COVID-19 patients who are at high risk of hospitalization.**

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WHO has issued a conditional recommendation against the use of remdesivir in hospitalized patients, regardless of disease severity, as there is currently no evidence that remdesivir improves survival and other outcomes in these patients.

This recommendation, released on 20 November, is part of a living guideline on clinical care for COVID-19. It was developed by an international guideline development group, which includes 28 clinical care experts, 4 patient-partners and one ethicist.

The guidelines were developed in collaboration with the non-profit Magic Evidence Ecosystem Foundation (MAGIC), which provided methodologic support. The guidelines are an innovation, matching scientific standards with the speed required to respond to an ongoing pandemic.

Work on this began on 15 October when the WHO Solidarity Trial published its interim results. Data reviewed by the panel included results from this trial, as well as 3 other randomized controlled trials. In all, data from over 7000 patients across the 4 trials were considered.

The evidence suggested no important effect on mortality, need for mechanical ventilation, time to clinical improvement, and other patient-important outcomes.

The guideline development group recognized that more research is needed, especially to provide higher certainty of evidence for specific groups of patients. They supported continued enrollment in trials evaluating remdesivir.

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\* A conditional recommendation is issued when the evidence around the benefits and risks of an intervention are less certain. In this case, there is a conditional recommendation against the use of remdesivir. This means that there isn't enough evidence to support its use.

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