Date	Médicament étudié	NCT	Autre ID#	Nom de l'étude	Pays	Devis / Design	n	Lieu intervention	Stade	Âge	Population	Intervention	Comparateur	Résultat d'intérêt primaire	Durée du suivi	Financement	Contacts	Lien web	Autres Molecules	Autres Molecules	Autres Molecules	Autres Molecules	Autres Molecules
30/03/2020	Chloroquine + Azithromycine	NCT04324463	PHRI.ACT.COVID19	ACT COVID19	Canada	Phase 3	1500	En communauté ou Hospitalisé	Léger, léger + facteur de risque, modéré ou Sévère	≥18	COVID-19 confirmed by established testing	Chloroquine (Adults with a bodyweight ≥ 50 kg: 500 mg twice daily for 7 days. Adults with a bodyweight < 50 kg: 500 mg twice daily on days 1 and 2, followed by 500 mg once daily for days 3-7), plus Azithromycin (500 mg on day 1 followed by 250 mg daily for 4 days)	No constraints for treating physicians on the therapies within the standard of care arm. All key co-interventions will be documented.	Outpatients: Hospital Admission or Death [Time Frame: Up to 6 weeks post randomization] In outpatients with COVID-19, the occurrence of hospital admission or death Inpatients: Invasive mechanical ventilation or mortality [Time Frame: Up to 6 weeks post randomization] Patients intubated or requiring imminent intubation at the time of randomization will only be followed for the primary outcome of death.	6 semaines	Population Health Research Institute	ACT COVID-19 Study Coordinator 905-297-3479 ACT.ProjectTeam@PHRI.ca	https://clinicaltrials.gov/ct2/show/NCT04324463	Chloroquine	Azithromycin			
06/04/2020	Hydroxychloroquine + Azithromycine	NCT04334512	PRG-044	HAZCpaC	Etats-Unis	Phase 2	60	Inconnu	Inconnu	≥18 et <55	Diagnosis of COVID-19 by RT-PCR	quintuple therapy (Hydroxychloroquine, Azithromycin, Vitamin C, Vitamin D, and Zinc)	Pas de comparateur	Successful treatment as determined by Negative Test and resolution of symptoms [Time Frame: 24 weeks] Patients will experience complete resolution of symptoms and test negative for COVID-19 Safety of Quintuple Therapy [Time Frame: 24 weeks] Patients will tolerate Quintuple Therapy with minimal side effects. Meaning that side effects will not be severe enough to warrant discontinuation of therapy	24 semaines	ProgenaBiome	Sabine Hazan, MD 805-200-7438 sabinehazan@ahm.com Jordan Daniels, MS 217-494-8992 majordanieldaniels@gmail.com	https://clinicaltrials.gov/ct2/show/NCT04334512	Hydroxychloroquine	Azithromycin	vitamin C	Vitamin D	Zinc
07/04/2020	Hydroxychloroquine + Azithromycine	NCT04336332	002011 Pro2020000712 (Other Identifier: Rutgers Health Sciences IRB)	-	Etats-Unis	Phase 2	160	En communauté ou Hospitalisé	Léger ou Modéré	≥18	- Patients with proven SARS-CoV-2 infection by an accepted assay with symptoms consistent with COVID-19 - Ability to measure and quantify viral load by quantitative PCR - Temperature >100.6°F	Arm 1: Hydroxychloroquine Sulfate + Azithromycin Hydroxychloroquine sulfate 200 mg taken by mouth three (3) times a day for 10 days Azithromycin 500 mg taken by mouth on Day 1, followed by Azithromycin 250 mg taken by mouth once (1) time a day for four (4) days Arm 2: Hydroxychloroquine Sulfate alone • Hydroxychloroquine sulfate 200 mg taken by mouth three (3) times a day for 10 days	Supportive Care	Changes in patients viral load [Time Frame: Baseline, day 3 and day 6] Will be assessed at day six compared to baseline between Hydroxychloroquine sulfate alone and Hydroxychloroquine sulfate plus azithromycin to treat COVID-19. Second evaluation of changes in patients viral load [Time Frame: Day 6] A second concurrent comparison will evaluate change in viral load at day 6 between Hydroxychloroquine sulfate alone and supportive c	10 jours	Rutgers, The State University of New Jersey	Sabiha Hussain, MD 732-235-7640 hussaisa@rwjms.rutgers.edu	https://clinicaltrials.gov/ct2/show/NCT04336332	Hydroxychloroquine	Azithromycin			
10/04/2020	Hydroxychloroquine + Azithromycine	NCT04341207	2020-001250-21 2020/3078 (Other Identifier: CSET number)	ONCOVID	France	Phase 2	1 000	Inconnu	Inconnu	≥18	All types of locally advanced and metastatic malignancy	Arm 1:Hydroxychloroquine 200 mg 3 times a day for 10 days + Azithromycin 500 mg on day 1 followed by 250 mg/day for 4 days Arm2 Hydroxychloroquine 200 mg 3 times a day for 10 days	No intervention	Prevalence and the 3-months incidence of SARS-CoV-2 in cancer patients [Time Frame: Up to 3 months] Covid-19 disease-specific mortality rate in cancer patients treated by Hydroxychloroquine and azithromycin [Time Frame: Up to 12 months]	12 mois	Gustave Roussy, Cancer Campus, Grand Paris	Lisa DEROSA, MD 0142114211 ext +33 lisa.derosa@gustaveroussy.fr Stefan MICHIELS, MD 0142114211 ext +33 Stefan.michiels@gustaveroussy.fr	https://clinicaltrials.gov/ct2/show/NCT04341207	Hydroxychloroquine	Azithromycin			
14/04/2020	Hydroxychloroquine + Azithromycine + Indomethacin	NCT04344457	HIZ-PRC-COVID-19	HIZ-PRC-COVID-19	Etats-Unis	Phase 1/2	80	En communauté	Léger	≥18	Confirmed Sars-CoV2 infection by PCR Have mild symptoms of Sars-CoV2 Must show documentation of Sars-CoV2 to screening visit Must have had recent hematology and chemistry results	Drug: Hydroxychloroquine 200 mg PO BID 5 days Drug: Indomethacin 50 mg PO TID 14 Days Drug: Zithromax Oral Product 500 mg PO QD 3 Days	Pas de comparateur	Improvement of clinical status [Time Frame: up to 28 days] measured by time (days) required from initiation of treatment to improvement of clinical status from mild to symptom free	28 jours	Perseverance Research Center, LLC Athena Medical Group	Nicole C Hank, PhD,MCR,MHSM 4804716132 ext 4804716132 nhank@pcmresearcheducation.com	https://clinicaltrials.gov/ct2/show/NCT04344457	Hydroxychloroquine	Azithromycin	Indomethacin		
15/04/2020	Hydroxychloroquine + Azithromycine	NCT04347512	7783	TEACHCOVID	France	Phase 3	405	Inconnu	Inconnu	≥18	Positive Sars-CoV-2 RT-PCR on nasopharyngeal swab CT scan suggestive of Sars-CoV-2 pneumonia	Hydroxychloroquine Hydroxychloroquine is given for 5 days, with a loading dose of 400 mg qd at D1, and 200 mg qd for the next 4 days (D2-D5). Hydroxychloroquine and Azithromycin Hydroxychloroquine is given for 5 days, with a loading dose of 400 mg qd at D1, and 200 mg qd for the next 4 days (D2-D5). Azithromycin is given for 5 days, with a loading dose of 500 mg at D1, and 250 mg for the next 4 days.	Standard of Care treatment	Rate of patients reaching a significant hypoxemia, in each arms. [Time Frame: From day 0 to day 7] A significant hypoxemia is an arterial partial pressure of oxygen of less than 60 mmHg despite an oxygen flow of more than 6 L/min, patient at rest	7 jours	University Hospital, Strasbourg, France	Loic Kassegne, MD 0033339355018 loic.kassegne@chru-strasbourg.fr	https://clinicaltrials.gov/ct2/show/NCT04347512	Hydroxychloroquine	azithromycin			
16/04/2020	Hydroxychloroquine + Azithromycine	NCT04348474	HAPRED4200R	-	Brésil	Tôt Phase1	200	En communauté	Léger	≥18	Male or female, and: - aged ≥ 70 years; or - aged < 70 with associated risk factors (chronic obstructive pulmonary disease; heart failure, immunosuppressed, obesity (BMI ≥ 26); uncontrolled diabetes and uncontrolled systemic arterial hypertension) One or more mild symptoms characteristic of COVID-19 for 3 days, such as fever, cough and signs of respiratory distress, which do not require hospitalization.	All patients included in the study will receive Hydroxychloroquine (HCQ) 400 mg (00 mg BID on D1 and 400 mg/day on D2 to D7) and azithromycin (AZT) (500 mg/ 5 days) on top of standard care.	Pas de comparateur	Change in Clinical Condition [Time Frame: 28 days] Ordinal scale (7 points ordinal scale that measures illness severity over time)	28 jours	Apoio Brasil PREVENT SENIOR PRIVATE OPERADORA DE SAUDE LTDA	Rafael Souza, MD, PhD +55 11 98383-3256 dr.rafaelsouza@ig.com.br	https://clinicaltrials.gov/show/NCT04348474	Hydroxychloroquine	Azithromycin			
17/04/2020	Hydroxychloroquine + Azithromycine	NCT04351919	ECC2020-04	COVID+PA	Tunisie	Phase 4	400	En communauté	Léger ou Modéré	≥18 et < 80	confirmed COVID19 (+) Qn<500ms no severity criteria pauci-symptomatique patients	Hydroxychloroquine 400mg per day during 10 days Drug: Azithromycin 500 mg per day during 5 days	Pas de comparateur	improvment or healing of clinical signs [Time Frame: at the end of the study treatment - 1 month after inclusion] no respiratory infectious signs Evolution of clinical signs [Time Frame: at the end of the study treatment -1 month after inclusion] Low respiratory signs with severity criteria	1 mois	Abderrahmane Mami Hospital Elshrouk Clinical Research Centre	Eshmoun team +21627870563 eshmouncompany@eshmoun.com.tn	https://clinicaltrials.gov/show/NCT04351919	Hydroxychloroquine	Azithromycin			
21/04/2020	Hydroxychloroquine + Azithromycine	NCT04354428	STUDY00009878	-	Etats-Unis	Phase 2/3	630	En communauté	Léger	≥18 et < 80	Laboratory confirmed SARS-CoV-2 infection, with teal results within past 72 hours Access to device and internet for Telehealth visits At increased risk of developing severe COVID-19 disease	Arm 1 : Hydroxychloroquine and Folic Acid HCQ 400 mg orally twice on Day 1, followed by 200 mg orally twice daily for an additional 9 days (Days 2 to 10) + placebo (folic acid 800 µg orally once on Day 1, followed by 400 µg orally once daily for an additional 4 days (Days 2 to 5)) Arm 2 : Hydroxychloroquine and Azithromycin HCQ 400 mg orally twice on Day 1, followed by 200 mg orally twice daily for an additional 9 days (Days 2 to 10) + azithromycin 500 mg orally once on Day 1, followed by 250 mg orally once daily for an additional 4 days (Days 2 to 5).	Ascorbic acid and Folic acid Ascorbic acid 500 mg orally twice on Day 1, followed by 250 mg orally twice daily for 9 days + folic acid 800 µg orally once on Day 1, followed by 400 µg orally once daily for an additional 4 days (Days 2 to 5)	Lower respiratory tract infection (LRTI) rates [Time Frame: 28 days from enrolment] Resting blood oxygen saturation (SpO2<93%) level sustained for 2 readings 2 hours apart and presence of subjective dyspnea or cough Incidence of hospitalization or mortality [Time Frame: Day 28 after enrolment] Cumulative incidence of hospitalization or mortality Change in upper respiratory viral shedding [Time Frame: Day 1 through Day 14 after enrolment] Time to clearance of nasal SARS-CoV-2, defined as 2 consecutive negative swabs	28 jours	University of Washington Bill and Melinda Gates Foundation	Christine Johnston, MD, MPH 206-520-4340 cjohnsto@uw.edu Hannah Leingang 206-520-3827 hannal2@uw.edu	https://clinicaltrials.gov/show/NCT04354428	Vitamin C (Ascorbic acid)	Folic Acid	Hydroxychloroquine		
21/04/2020	Hydroxychloroquine + Azithromycine	NCT04355052	7092-20-SMC	COSTA	Israel	Phase 3	250	Hospitalisé	Léger (+ facteur de risque) ou Modéré	≥18	COVID-19 confirmed by a real-time RT-PCR tests 7 days prior to clinical trial enrollment Mild disease (no pneumonia) with at least one of the following risk factors: Age > 55, prior lung or kidney disease, DM with HbA1c > 7.6%, hypertension, CVD, immuno - supressed, organ transplantation, HIV with a CD4 cell count of less than 250 cells/mm3, heavy smoking, BMI > 30. Moderate disease - pneumonia, Tachypnea > 24 BPM, tachicardia > 125 BPM, O2 saturation 93% or less	Arm 1: Hydroxychloroquine in combination of Azithromycin Hydroxychloroquine 400 mg BID on day 1 and then 200 mg BID on days 2-5 + Azithromycin 500 mg QD on day 1 and 250 mg QD on days 2-5 Arm2 : Hydroxychloroquine in combination with camostat mesylate Two drugs which may act as antivirals against SARS CoVid 2 (Hydroxichloroquine may also act as an immunomodulator, Camostat mesylate is a protease inhibitor)	No intervention	clinical state as reflected by NEWS scoring [Time Frame: 7 days] the clinical state of the patient regarding respiratory state as defined by the NEWS scoring system positive PCR [Time Frame: 7 days] positive PCR SARS COVID 2 in the respiratory system	60 jours	Sheba Medical Center	Itzchak Levy, MD 9723520493? itzik.levi@sheba.health.gov.il Int Aviser, RN 9723520493? int.aviser@sheba.health.gov.il	https://clinicaltrials.gov/show/NCT04355052	Hydroxychloroquine	camostat mesylate	Azithromycin		
22/04/2020	Hydroxychloroquine + Azithromycine	NCT04358068	ACTG A5395 38720 (Other Identifier: DAIDS-ES Registry Number)	-	Etats-Unis	Phase 2	2 000	En communauté	Léger ou Modéré	≥18	Experiencing at least one of the following SARS-CoV-2 infection symptoms: fever (can be subjective) OR cough OR shortness of breath	Arm A: Hydroxychloroquine (HCQ) and Azithromycin (Azithro) Day 0-6/7: Hydroxychloroquine 600 mg (administered as three 200 mg capsules) as a single dose on Day 0, then in 6-8 hours begin 200 mg (administered as one 200 mg capsule) three times daily for 21 doses (total of 4800 mg over 7 days). Days 0-4: Azithromycin 500 mg (administered as two 250 mg capsules) as a single dose on Day 0, followed by 250 mg (administered as one 250 mg capsule) once daily for 4 doses (4 days, Days 1-4).	Placebo	Proportion of participants who died from any cause or were hospitalized [Time Frame: Measured during the 21-day period from and including the day of the first (confirmed) dose of study treatment]	21 jours	National Institute of Allergy and Infectious Diseases (NIAID) Teva Pharmaceuticals Industries LTD	Non disponible	https://clinicaltrials.gov/show/NCT04358068	Hydroxychloroquine	Azithromycin			
28/04/2020	Hydroxychloroquine + Azithromycine	NCT04365231	HASCOPT2020	HASCOPT	France	Phase 3	50	Inconnu	Léger ou Modéré	≥18	Female pregnant, monofetal pregnancy between 22+0 and 41+0 weeks of gestation presenting a positive COVID-19 RT-PCR test result after nasopharyngeal swab for one or more minor symptoms: cough, body temperature >37,3 °C, shortness of breath, diarrhea, asthenia, anosmia, taste loss, myalgia presenting no contraindication to Hydroxychloroquine and azithromycin	Hydroxychloroquine and azithromycin treatment Hydroxychloroquine 10-day course of Hydroxychloroquine 200 mg tablet three times a day. To be taken orally. - azithromycin 5-day course of azithromycin 250 mg tablet twice a day on the first day of treatment, then once a day the 4 following days.	conventional management of patients	Percentage of patients with a negative RT-PCR test result to COVID-19 [Time Frame: 7 days] Percentage of patients with a negative RT-PCR test result to COVID-19 nasopharyngeal swab at the 7th day of treatment by Hydroxychloroquine and azithromycin.	25 jours	Hospital St. Joseph, Marseille, France	Xavier-Côme xcd Donato 33491808642 xdonato@hopital-saint-joseph.fr Maria mg Gackiere 33491808642 mgackiere@hopital-saint-joseph.fr	https://clinicaltrials.gov/show/NCT04365231	Hydroxychloroquine	azithromycin			
28/04/2020	Hydroxychloroquine + Azithromycine	NCT04366245	PCICOVID-19	-	Espagne	Phase 1/2	72	Inconnu	Inconnu	≥18 et < 80	Meet all current requirements to be a donor of apheresis plasma in accordance with European and Spanish regulations. (RD 1088/2005); Comply with the recommendations for obtaining plasma from convalescent donors of COVID-19 of the Scientific Committee for Transfusion Safety (CCST) ; Presence of detectable anti-SARS-CoV-2 antibodies in peripheral blood. Absence of symptoms by COVID19 in the last 14 days. Negative PCR for SARS-CoV-2 PCR (in naso / oropharyngeal swab) in two tests with a minimum interval of 24/48 hours.	Hyperimmune plasma PLASMA OF CONVALESCENT COVID-19	Hidroxicloroquina + Azitromicina o Lopinavir/ritonavir + Interferon β-1b + Hidroxicloroquina + Azitromicina o Lopinavir/ritonavir + Interferon β-1b + Hidroxicloroquina	Safety: Incidence of Adverse Events and Serious Adverse Events grade 3 and 4, related to the product under investigation or the administration procedure, graduated according to the common toxicity criteria scale (CTCAE). [Time Frame: 30 days after enrollment] Efficacy: Death from any cause [Time Frame: Day +21 after randomization] Efficacy: Need for mechanical ventilation [Time Frame: Day +21 after randomization] Efficacy: Any of the following analytical data after 72h of randomization. [Time Frame: Day +21 after randomization] IL-6> 40 pg / mL, D-dimer> 1500, ferritin> 1000ng / mL.	21 jours	Andalusian Network for Design and Translation of Advanced Therapies	Ana Cardesa Gil 697 95 69 41 ext 0034 ana.cardesa@juntadeandalucia.es	https://clinicaltrials.gov/show/NCT04366245	Plasma	Hidroxicloroquine	Azitromicin	Lopinavir/ritona vir	Interferon β-1b
01/05/2020	Hydroxychloroquine + Azithromycine	NCT04370782	20-21	-	Etats-Unis	Phase 4	750	En communauté	Léger	≥30	High initial clinical suspicion by physician based on signs and symptoms followed by RT-PCR for confirmation of COVID-19 diagnosis with one or more of the following: - abnormal lung exam - abnormal oxygen saturation <95% - abnormal chest x-ray or chest CT - persistent fever >100.4 degrees Fahrenheit upon arrival to Emergency department (ED) - one of the following co-morbidities: hypertension, diabetes mellitus, history of coronary artery disease, chronic kidney disease (CKD), asthma, chronic obstructive pulmonary disease, current or former smoker, or morbid obesity (Body Mass Index ≥35)	Drug: Hydroxychloroquine Hydroxychloroquine 400mg twice a day (BID) on day 1, followed by 200mg BID for days 2-5 Drug: Azithromycin Azithromycin 500mg on day 1, followed by 250mg once daily for days 2-5 Drug: Zinc Sulfate Zinc sulfate 220mg once daily for 5 days	Drug: Hydroxychloroquine Hydroxychloroquine 400mg twice a day (BID) on day 1, followed by 200mg BID for days 2-5 Drug: Zinc Sulfate Zinc sulfate 220mg once daily for 5 days Drug: Doxycycline Doxycycline 200 mg once daily for 5 days	Time to Resolution of Symptoms relative to baseline (day 1 of trial) [Time Frame: Day 5] Time to Resolution of Symptoms relative to baseline (day 1 of trial) [Time Frame: Day 14] Time to Resolution of Symptoms relative to baseline (day 1 of trial) [Time Frame: Day 21] Number of participants hospitalized and/or requiring repeat ER visits [Time Frame: 21 days] ICU Length of Stay [Time Frame: Until Discharged up to 30 days] Ventilator [Time Frame: Until extubated up to 30 days]	30 jours	St. Francis Hospital, New York	Avni Thakore, MD 516-563-7936 avni.thakore@chsli.org Elizabeth S Haag, RN 516-622-4612 elizabeth.haag@chsli.org	https://clinicaltrials.gov/show/NCT04370782	Hydroxychloroquine	Azithromycin	Doxycycline	Zinc Sulfate	
01/05/2020	Hydroxychloroquine + Azithromycine	NCT04371406	APHP200447 2020-001702-35 (EudraCT Number)	MG-COVID	France	Phase 3	2 770	En communauté	Léger	≥18 et < 75	Taken into primary health care for suspicion of early-stage COVID-19 infection (maximum 5 days of evolution). The patient must have presented within the previous 5 days at least one of the following criteria: fever (≥38°C), cough, anosmia, aguesia, diarrhea, headache, myalgia.	Hydroxychloroquine sulfate (PLAQUENIL®), 200mg x 3 /d, for 10 days AND Azithromycin (ZITHROMAX®), 500mg on D1 and then 250mg/d for the next 4 days, in addition to standard of care	Control Arm Dietetary supplement, Astrec form and vitalityB, 2 capsules per day, for 10 days, in addition to standard of care	Rate of patients with occurrence of an unfavorable outcome between randomization and day 14 [Time Frame: between randomization and day14] Unfavorable outcome defined by the onset of at least one of the following between randomization and day 14: hospitalization, death or pericutaneous O² saturation ≤ 92% in ambient air Primary outcome of ancillary virological study : evolution of viral load between day 0 and day 14] Ancillary virological study : evolution of viral load between day 0 and day 14, measured by the threshold cycle,Ct, with PCR on naso-pharyngeal swab	28 jours	Assistance Publique - Hôpitaux de Paris	Sarra POCHON +331 42 16 76 74 sarra.pochon@aphp.fr Alix PENEL +331 42 16 78 04 alix.penel@aphp.fr	https://clinicaltrials.gov/show/NCT04371406	Hydroxychloroquine	Azithromycin	Azinc		
05/05/2020	Hydroxychloroquine + Azithromycine	NCT04374552	Pro2020000872	ACT	Etats-Unis	Phase 2	140	En communauté	Léger	≥20	Documented SARS-CoV-2 infection by qPCR assay without symptoms consistent with COVID-19 within 1 week of enrollment	Hydroxychloroquine & Azithromycin Hydroxychloroquine sulfate 400 mg po BID for day one and then 400 mg QD for 4 days Azithromycin 500 mg po on day one, followed by 250 mg po QD X 4 days	Placebo	The primary outcome is the rate of decline in viral load over the 10 days after randomization [Time Frame: 10 days] Change in SARS-CoV-2 viral from baseline to day 6	10 jours	Rutgers, The State University of New Jersey	Jeffrey L Carson, MD 732-235-7122 jeffrey.carson@rutgers.edu Helaine Noveck, MPH 732-235-9581 helaine.noveck@rutgers.edu	https://clinicaltrials.gov/show/NCT04374552	Hydroxychloroquine	Azithromycin			

18/05/2020	Hydroxychloroquine + Azithromycine	NCT04392128	2020-005 2020-002002-45	HYACINTHE	France	Phase 2	114	En communauté ou Hospitalisé	Léger ou Modéré	≥18	Patient with hematologic malignancy who received or not hematopoietic stem cell transplantation Non severe Covid-19 disease PCR-confirmed COVID-19 disease by a nasopharyngeal swab Life-expectancy related to the hematologic malignancy of at least 1 month	Patients enrolled in the experimental arm will receive hydroxychloroquine (200mgx3 tablets per day during 10 days) and azithromycine (500 mg at day 1 (2 capsules taken at the same time) then 250mg per day (1 capsule per day) during 4 days).	Placebo	Evaluation of the efficacy of hydroxychloroquine and azithromycine on the viral load drop at day 5. [Time Frame: 5 days of treatment]	3 mois	Institut de Cancerologie Strasbourg Europe	Valérie SARTORI 0368767223.ext.33 v.sartori@icans.eu Manon VOEGELIN 0368767360.ext.33 m.voegelin@icans.eu	https://clinicaltrials.gov/show/NCT04392128	Hydroxychloroquine	Azithromycin			
20/05/2020	Hydroxychloroquine + Azithromycine	NCT04395768	Alliance-COVID19	ALLIANCE	Australie	Phase 2	200	Inconnu	Inconnu	≥18	Diagnosis of active COVID-19	Inpatients: IV Vitamin C (Sodium Ascorbate) 50mg/kg every 6hrs on day 1 followed by 100mg/kg every 6hrs (4x per day; 400mg/kg/day) for 7 days (average 28g/day; maximum dose of 50g/24hrs for those weighing more than 125kg). Can be converted to 1 gram threa times per day PO on hospital discharge) Outpatients: Vitamin C Outpatient trial: 200mg/kg x1 IV, then 1 gram PO three times per day for 7 days; Hydroxychloroquine Hydroxychloroquine 400mg PO twice a day for 1 day, followed by 200mg PO two times a day for 6 days Azithromycin 500 mg PO on day 1 followed by 250 mg PO once daily for 4 days Zinc Citrate 30mg elemental zinc PO daily Vitamin D3 5,000iu PO daily for 14 days Vitamin B12 (Methylcobalamin) 500mcg PO daily for 14 days	Hydroxychloroquine Hydroxychloroquine 400mg PO twice a day for 1 day, followed by 200mg PO two times a day for 6 days Azithromycin 500 mg PO on day 1 followed by 250 mg PO once daily for 4 days Zinc Citrate 30mg elemental zinc PO daily Vitamin D3 5,000iu PO daily for 14 days Vitamin B12 (Methylcobalamin) 500mcg PO daily for 14 days	Symptoms [Time Frame: once daily for 15 days since enrollment/baseline at admission to hospital] Length of hospital stay [Time Frame: at 15 and 45 days since admission/ enrolment] Invasive mechanical ventilation or mortality [Time Frame: any time within 15 days from enrolment]	45 jours	National Institute of Integrative Medicine, Australia Catholic Health Initiatives	Karin Ried, PhD 0061399128545 karinried@slnm.com.au Taufiq Binjemain, MD 0061480840062 tbinjemain@gmail.com	https://clinicaltrials.gov/show/NCT04395768	Vitamin C	Hydroxychloroquine	Azithromycin	Vitamin D3	Zinc Citrate
20/05/2020	Hydroxychloroquine + Azithromycine + Vitamin C	NCT04395768	Alliance-COVID19	ALLIANCE	Australie	Phase 2	200	Inconnu	Inconnu	≥18	Diagnosis of active COVID-19	Inpatients: IV Vitamin C (Sodium Ascorbate) 50mg/kg every 6hrs on day 1 followed by 100mg/kg every 6hrs (4x per day; 400mg/kg/day) for 7 days (average 28g/day; maximum dose of 50g/24hrs for those weighing more than 125kg). Can be converted to 1 gram threa times per day PO on hospital discharge) Outpatients: Vitamin C Outpatient trial: 200mg/kg x1 IV, then 1 gram PO three times per day for 7 days; Hydroxychloroquine Hydroxychloroquine 400mg PO twice a day for 1 day, followed by 200mg PO two times a day for 6 days Azithromycin 500 mg PO on day 1 followed by 250 mg PO once daily for 4 days Zinc Citrate 30mg elemental zinc PO daily Vitamin D3 5,000iu PO daily for 14 days Vitamin B12 (Methylcobalamin) 500mcg PO daily for 14 days	Hydroxychloroquine Hydroxychloroquine 400mg PO twice a day for 1 day, followed by 200mg PO two times a day for 6 days Azithromycin 500 mg PO on day 1 followed by 250 mg PO once daily for 4 days Zinc Citrate 30mg elemental zinc PO daily Vitamin D3 5,000iu PO daily for 14 days Vitamin B12 (Methylcobalamin) 500mcg PO daily for 14 days	Symptoms [Time Frame: once daily for 15 days since enrollment/baseline at admission to hospital] Length of hospital stay [Time Frame: at 15 and 45 days since admission/ enrolment] Invasive mechanical ventilation or mortality [Time Frame: any time within 15 days from enrolment]	45 jours	National Institute of Integrative Medicine, Australia Catholic Health Initiatives	Karin Ried, PhD 0061399128545 karinried@slnm.com.au Taufiq Binjemain, MD 0061480840062 tbinjemain@gmail.com	https://clinicaltrials.gov/show/NCT04395768	Vitamin C	Hydroxychloroquine	Azithromycin	Vitamin D3	Zinc Citrate
28/05/2020	Hydroxychloroquine + Azithromycine	NCT04405921	PACTT	PACTT	Tunisie	Phase 3	200	Hospitalisé	Inconnu	≥18	PositiveSARS-COV-2 RT-PCR in hospitalized patients in University Hospital Farhat Hached in Sousse Tunisia. Had either not received hydroxychloroquine before or had received hydroxychloroquine for at least 1 day and could tolerate a dose of 200 mg of hydroxychloroquine/day.	Hydroxychloroquine associated to azithromycin Hydroxychloroquine: 200 mg twice a day orally or via gastric tube (total 400 mg/day) for 5 days. Azithromycin: 500 mg at day 1 then 250 mg/day for 4 days. with standard of care in association to treatments.	Hydroxychloroquine with placebo Hydroxychloroquine: 200 mg twice a day orally or via gastric tube (total 400 mg/day) for 5 days. with standard of care in association to treatments.	Clinical recovery at day-14, from the start of treatment. [Time Frame: 14 days] Clinical recovery is defined as a complete resolution clinical signs appeared during the medical history and related to COVID-19.	14 jours	Centre Hôpital Universitaire Farhat Hached	Amel Lebiet, Professor 21673102501 amellebiet@gmail.com	https://clinicaltrials.gov/show/NCT04405921	Hydroxychloroquine	Azithromycin			
02/06/2020	Hydroxychloroquine + Azithromycine	NCT04411433	COVID-19-FAV	-	Turquie	Phase 3	1 000	Inconnu	Léger ou Modéré	≥18 et < 70	Patients with symptoms and complaints consistent with possible or confirmed COVID- 19 observed within the last 5 days. Patients with uncomplicated possible or confirmed COVID-19: Symptoms such as fever, muscle aches, joint pain, cough, sore throat, nasal congestion, however no respiratory distress, no tachypnea or no SpO2 < 93%. Chest imaging (X-ray or CT chest) documented as normal Patients with mild possible or confirmed COVID-19 pneumonia	Arm 1 : Favipiravir (3200 mg + 1200 mg) Dosage and method of administration: in a regimen of 2x1600 mg (oral) loading dose on day-1 followed by 1200 mg maintenance dose (2x600 mg, 2 times daily) on day-2 to day-5 (5 days in total). Arm 2 : Favipiravir (3600 mg + 1600 mg) Dosage and method of administration: in a regimen of 2x1800 mg (oral) loading dose on day-1 followed by 1600 mg maintenance dose (2x800 mg, 2 times daily) on day-2 to day-5 (5 days in total). Arm 3 : ipiravir combined with Hydroxychloroquine Hydroxychloroquine Dosage and method of administration: in a regimen of 2x400 mg (oral) loading dose on day-1 followed by 400 mg maintenance dose (2x200 mg oral, 2 times daily) on day-2 to day-5 (5 days in total). Favipiravir Dosage and method of administration: in a regimen of 2x1600 mg (oral) loading dose on day-1 followed by 1200 mg maintenance dose (2x600 mg, 2 times daily) on day-2 to day-5 (5 days in total). Arm 4 : Favipiravir combined with Azithromycin Azithromycin Dosage and method of administration: in a regimen of 1x500 mg (oral) loading dose on day-1 followed by 250 mg maintenance dose (oral daily) on day-2 to day-5 (5 days in total). Favipiravir Dosage and method of administration: in a regimen of 2x1600 mg (oral) loading dose on day-1 followed by 1200 mg maintenance dose (2x600 mg, 2 times daily) on day-2 to day-5 (5 days in total).	Comparator 1 : Hydroxychloroquine Dosage and method of administration for patients with mild possible or confirmed COVID-19 pneumonia (no severe pneumonia symptoms): in a regimen of 2x400 mg (oral) loading dose on day-1 followed by 400 mg maintenance dose (200 mg oral 2 times daily) on day-2 to day-5 (5 days in total). Comparator 2 : Hydroxychloroquine combined with Azithromycin Hydroxychloroquine Dosage and method of administration for patients with uncomplicated possible or confirmed COVID-19: in a regimen of 400 mg (2x200 mg oral, 2 times daily) throughout 5 days (5 days in total). Azithromycin Dosage and method of administration: in a regimen of 1x500 mg (oral) loading dose on day-1 followed by 250 mg maintenance dose (oral daily) on day-2 to day-5 (5 days in total).	Time to recovery (discharge) [Time Frame: 14 days] The evaluation of recovery (discharge) period until 14th day after administration. Decrease in viral load [Time Frame: 14 days] The evaluation of decrease in viral load until 14th day after administration.	14 jours	Ministry of Health, Turkey Collaborators:	Prof. Ateş KARA, MD +90 532 4135130 ateskara@hacettepe.edu.tr	https://clinicaltrials.gov/show/NCT04411433	Favipiravir	Hydroxychloroquine	Azithromycin		
16/06/2020	Hydroxychloroquine + Azithromycine	NCT04434144	10000918	-	Bangladesh	Inconnu	116	En communauté ou Hospitalisé	Léger ou Modéré	≥16 et < 80	COVID19 patients confirmed bt RT PCR at Chokoria Upazila Health Complex, Cox's Bazar, Bangladesh. Patients with mild to moderate degree of illness. Patients with normal or near-normal chest radiograph. Patients with oxygen Saturation more than 94% who fit the outpatient treatment protocol.	Ivermectin 200ugm/kg single dose + Doxycycline 100mg BID for 10days	Hydroxychloroquine 400mg first day then 200mg BID for 9days + Azithromycin 500mg daily for 5Days.	Number of participants with "treatment success" determine by a negative RT PCR for COVID19. [Time Frame: 02/05/2020 to 05/06/2020] Number of participants with "adverse effects" determined by the existence of the pharmacological side effects of the particular drug during treatment. [Time Frame: 02/05/2020 to 05/06/2020]	inconnu	Upazila Health & Family Planning Officer's (UHFPO) Office, Chakoria, Cox's Bazar	Non disponible	https://clinicaltrials.gov/show/NCT04434144	Ivermectin	Doxycycline	Hydroxychloroquine	Azithromycin	
07/07/2020	Hydroxychloroquine + Azithromycine	NCT04459702	PRG-043	-	États-Unis	Phase 2	200	En communauté	Léger	≥18 et <65	Healthy, ambulant male or female subjects 18 years of age to 65 years of age Positive test for COVID-19 by RT-PCR at screening	Quadruple Therapy Quadruple therapy utilizing hydroxychloroquine, lopinavir, ritonavir, and azithromycin	Dual Therapy Dual Therapy utilizing hydroxychloroquine and azithromycin.	Efficacy of Treatment by Reduced Symptoms NEWS (National Early Warning System) scores [Time Frame: 6 months] Efficacy of Treatment by Time to Non-Infectivity [Time Frame: 10 days]	6 mois	ProgenaBiome Big Corona Ltd.	Sabine Hazan, MD 805-339-0549 drsabinehazan@progenabiome.com Jordan Daniels, MS 805-339-0549 jordan@progenabiome.com	https://clinicaltrials.gov/show/NCT04459702	hydroxychloroquine	Azithromycin	Lopinavir/Riton avir		
07/07/2020	Hydroxychloroquine + Azithromycine + Lopinavir/ritonavir	NCT04459702	PRG-043	-	États-Unis	Phase 2	200	En communauté	Léger	≥18 et <65	Healthy, ambulant male or female subjects 18 years of age to 65 years of age Positive test for COVID-19 by RT-PCR at screening	Quadruple Therapy Quadruple therapy utilizing hydroxychloroquine, lopinavir, ritonavir, and azithromycin	Dual Therapy Dual Therapy utilizing hydroxychloroquine and azithromycin.	Efficacy of Treatment by Reduced Symptoms NEWS (National Early Warning System) scores [Time Frame: 6 months] Efficacy of Treatment by Time to Non-Infectivity [Time Frame: 10 days]	6 mois	ProgenaBiome Big Corona Ltd.	Sabine Hazan, MD 805-339-0549 drsabinehazan@progenabiome.com Jordan Daniels, MS 805-339-0549 jordan@progenabiome.com	https://clinicaltrials.gov/show/NCT04459702	hydroxychloroquine	Azithromycin	Lopinavir/Riton avir		