

Remdesivir- A Trump Card

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Try googling 'Remdesivir arrested', you will be spoiled for choice for which link to open first. From touts getting arrested for selling clear liquid as remdesivir to a high-profile politician allegedly trying to smuggle the drug into the state.

Donald Trump has left The Oval Office, and left us with an elixir named Remdesivir, which is actually an experimental treatment for coronavirus. Having failed to effectively treat Ebola in 2014, remdesivir received another chance when Donald Trump [announced](#) last year that he would find a treatment for 'China virus' (as he preferred referring to COVID-19) before the elections. It was a [race against time](#). The clinical trial of the drug began, with Trump denouncing China and the World Health Organisation (WHO) as the chief architects behind the spread of the virus. Could this have been a political move to prepare the ground to showcase the US science as superior to that of WHO? Maybe. International diplomacy has always been open to interpretations. The clinical trials of the drug were being [sponsored](#) by National Institutes of Health (NIH), a US government agency and Gilead Sciences- the parent company of remdesivir itself.

The stage was set to let the world know about one of the first antivirals to work on coronavirus. Initial results said that it can reduce recovery time for severely ill COVID-19 patients. It was a matter of procedural clearances from here to unveil the drug before the elections. In May 2020, the US Food and Drug Administration cleared the drug, but it was only authorised for emergency use, one step at a time. By the end of June 2020, the USA had [bought](#) literally every drop of remdesivir for the USA, leaving none for the rest of the world. Donald Trump wanted his fellow country people to have the first access to the drug.

Trump's election campaign hit a roadblock in the first week of October, when he contracted coronavirus. Clinical trial of remdesivir claimed to reduce the [recovery time](#) from 15 to 10 days. Now if this story has to hold on to its plot, he had to recover by the 10th day. Dr. Sean Conley, President's physician [made a statement](#) "it had been 10 days since Mr. Trump first began showing symptoms of the coronavirus. Tests showed there was no longer evidence of actively replicating the virus."

While Trump was undergoing treatment, Gilead Sciences and European Commission struck a [deal worth](#) \$1.2 billion for remdesivir. There could have been no better brand ambassador for remdesivir than the President himself. On the other hand, in mid-October a week after the billion-dollar deal was struck, trials conducted by the World Health Organisation (WHO) found remdesivir to be ineffective. Dr. Soumya Swaminathan, Chief Scientist of WHO, and former Director General of Indian Council of Medical Research stated the [findings](#) of the trial "remdesivir given to hospitalised patients, didn't reduce mortality, it didn't reduce the duration of hospitalisation and it didn't affect the progression of the disease." The WHO till date does not [recommend](#) the use of remdesivir including hydroxychloroquine, lopinavir/ritonavir and interferon which also produced little to no benefit result like remdesivir.

The findings are a result of WHO's [Solidarity trial](#). Solidarity is one of the biggest randomised clinical trials spread across more than 10000 patients from 30 countries. Considering the varying scale and broad range of people affected from the virus, solidarity studied a diverse set of data on which treatments have been tested upon. Adopting the results of which in practice depends on international diplomacy, investments pressure of pharmaceutical giants, political promises, apart from understanding of practising doctors.

Trump had to keep a promise and more importantly a billion-dollar deal was already signed, while many more were in waiting. Coincidentally, just 12 days before the polling in the US, the Food and Drug Administration approved remdesivir as the '[First Treatment for COVID-19](#)', based on the results of studies sponsored by NIH and Gilead Sciences. Subsequently, Gilead [signed](#) deals for technology transfer to manufacture remdesivir with pharmaceutical manufacturers of Egypt, India and Pakistan to supply remdesivir in 127 countries.

Similar is the case with plasma treatment. A randomised control trial [study](#) has found plasma treatment making no difference in mortality reduction. At present, there is a huge demand for plasma and remdesivir, creating a panic-like situation. Doctors have been [quoted](#) that "What is the point in asking patients to pay through their noses for a drug, which has no clinically meaningful benefit?...We are using our resources, equipment, blood banks and healthcare personnel for an intervention that does not work". The Mahatma Gandhi Institute of Medical Sciences explicitly prohibits the use of Favipira'vir' (one more drug from the "vir" basket that disrupts the RNA virus cell which is classified under the anti-viral drug class), plasma and other anti-virals like Hydroxychloroquine, Itolizumab, and Tocilizumab in its treatment protocol.

Can we as a nation afford to spend millions on a drug for mass use that has clinically been proven ineffective? Are we using an ineffective drug on a mass population as an experiment? The Ministry of Health issued a [notice](#) which says "Remdesivir is an experimental investigational drug granted emergency authorisation use." But has this emergency usage received ethical clearances? What are the modalities through which experimental use data will be collected?

India rates amongst the highest out of pocket health expenditure countries. It has a direct impact on the poverty levels, the [rate](#) at which the vials of an ineffective and experimental drug are being sold is going to break the back of the poor.

Meanwhile, [The Lancet](#) has published a [study](#) that the use of Dexamethasone reduced mortality in hospitalized patients. As a result of which Dexamethasone has been reported to have [saved](#) more than a million lives worldwide. It is an easily available and cheap drug that comes without lofty political promises, billion dollar deals, international diplomacy and black marketing. Already in use in several countries including India, Dexamethasone is silently saving lives.

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