Why do Asian countries use hydroxychloroquine for Covid-19 despite Western rejection?

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Abstract

In the competition between East and West over global governance models, it seems Asian countries may be emerging as the winners when it comes to health governance. Asian countries overall have fared better in managing the Covid-19 pandemic, with lower mortality rate which are attributed to Asian culture, climate, demographics, prior experience with SARS and MERS coronaviruses, and use of antimalarial drug hydroxychloroquine. Given the more successful mitigation models compared to their western counterparts, Asian countries appear likely to continue heeding their own judgement and guidelines for pandemic management rather than deferring to Western models.

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Analysis

In the competition between East and West over global governance models, it seems Asian countries may be emerging as the winners when it comes to health governance.

On the issue of pandemic management, currently East Asian and South Asian countries enjoy comparative lower mortality rate for Covid-19 than western countries.1 Taiwan, now touted as the gold standard for pandemic management, has a population of 23.7 million people but only seven deaths.2 Vietnam has registered zero death with a population of 95.5 million, while South Korea (population: 51 million) has lost 300 and Japan (population: 126 million) has lost 1001.

In contrast, the US (population: 328 million) has lost 154,000 while the UK (population: 66 million) has lost 45,961. Italy (population 60 million) has lost 35,121, Spain (population: 47 million) has lost 28,443 while France (population: 67 million) has lost 30,238 and Germany (population: 83 million) has lost 9,217.

In order to control for population variance across countries, as measured by case-fatality-rate (CFR) per 100,000 people, Asian countries still rank lower in the CFR vis-à-vis Western countries.3 According to Johns Hopkins University, European countries have the highest CFR rate in double digits with UK at 15.2% followed by Belgium (14.6%), Italy (14.2%), France (13.7%), Spain (10.1%), and Germany and US at 4.4% and 3.4% respectively.

In Asia, CFR is at single digits with China at 5.3% followed by Japan (3%), India (2.2%), South Korea (2.1%), Malaysia (1.4%), Taiwan (1.5%) and Singapore (0.1%).

There have been debates over the reason for this discrepancy, ranging from Asian culture of wearing masks, climate contrasts, genetic differences, younger demographic, and previous experience with the SARS coronavirus and MERS coronavirus epidemics that enabled faster responses to the new threat. Another possible reason is the widespread use of the anti-malarial drug Hydroxychloroquine (HCQ), which has somehow become a political football in the West.

HCQ is an anti-viral drug sold under the brand name Plaquenil as well as a generic medicine. It has been around for 60 years, and is often used to treat malaria, lupus, rheumatoid arthritis, and other autoimmune diseases. In 2005, US National Institute of Health (NIH) reported in its journal Virology that chloroquine, a more toxic form of hydroxychloroquine, was effective in preventing the spread of Covid-19's predecessor SARS. Covid-19 is the novel SARS Coronavirus 2 (SARS-CoV-2), which is genetically closely related to the SARS Coronavirus (SARS-CoV) from 2002.

Authored by Martin J Vincent, Eric Bergeron, Suzanne Benjannet, Bobbie R Erickson, Pierre E Rollin, Thomas G Ksiazek, Nabil G Seidah, and Stuart T Nichol, the study concluded that “Favorable inhibition of virus spread was observed when the cells were either treated with chloroquine prior to or after SARS CoV infection”, and this appears to be supported by health experts in Asian countries.

For example India and Indonesia stand by the antimalarials, with Indian Council for Medical Research (ICMR) arguing they found no evidence the drug caused harm as a prophylaxis and encouraging HCQ as a preventive treatment for its medical workers. Indonesian doctors also use the drug to treat all Covid-19 patients and has ramped up its production, granting licenses to local manufacturers to produce millions of doses.

In South Korea, Korean Centers for Disease Control and Prevention also used HCQ in combination with an anti-HIV drug to effectively treat Covid-19, as well as in Taiwan for treating mild cases. Likewise, Malaysia found...
the antimalarial effective in treating early stages of Covid-19 infections.\footnote{Kanmani Batumalai, “Malaysia finds hydroxychloroquine can slow Covid-19 progress”, Code Blue, June 9, 2020, \url{https://codeblue.galencentre.org/2020/06/09/malaysia-finds-hydroxychloroquine-can-slow-covid-19-progress/}} Malaysian Health Director-General Dr. Noor Hisham Abdullah said the off-label use of HCQ managed to delay Covid-19 progression that could have led to low fatality rates in the country.

He divides Covid-19 infections into four stages: the first is testing positive without symptoms; the second stage shows mild symptoms; the third is pneumonia but does not need oxygen; the fourth stage is pneumonia needing oxygen; and the fifth stage is needing ventilator support.\footnote{“Antimalarial drug helped stop Covid-19 patients from worsening: DG”, Code Blue, April 7, 2020, \url{https://codeblue.galencentre.org/2020/04/07/antimalarial-drug-helped-stop-covid-19-patients-from-worsening-dg/}} In Malaysia, 88% of its Covid-19 cases are in the first two early stages, and Dr. Abdullah observed the impact of HCQ is mainly on Categories 1 and 2 which prevented deterioration into Categories 4 and 5.

It is important to point out that HCQ is not a cure, nor is it an effective treatment for severe case of Covid-19. Rather, many Asian countries use it to treat early and mild cases of the virus to prevent it from becoming worse, which according to a recent Henry Ford Hospitals group study of 2,500 patients, show promise it could reduce mortality by about half compared to those not given the drug.\footnote{“Treatment with Hydroxychloroquine Cut Death Rate Significantly in Covid-19 Patients”, Henry Ford Health Systems Study Shows”, Henry Ford Health System, July 2, 2020, \url{https://www.henryford.com/news/2020/07/hydro-treatment-study}} The Association of American Physicians and Surgeons (AAPS) seems to share views on the drug’s benefits as well.\footnote{“Hydroxychloroquine has about 90 percent chance of helping Covid-19 patients”, Association of American Physicians and Surgeons, (AAPS), April 27, 2020, \url{https://aapsonline.org/hcq-90-percent-chance/}} In light of Asian countries’ lower mortality rate and comparative success in Covid-19 management, perhaps this time Western countries could take some lessons learned from their model of health governance. It may also benefit a seemingly politicised WHO to learn from Taiwan which has emerged as a successful model for managing Covid-19, yet continues to be banned from WHO membership. Given this, in conjunction with WHO’s at times contradictory guidance on Covid-19, it appears Asian countries will likely continue to exercise their own judgement when it comes to guidelines for mitigating the pandemic.\footnote{Bayram Altug, “WHO criticized for ‘contradictory’ Covid-19 statements”, Anadolu Agency, July 7, 2020, \url{https://www.aa.com.tr/en/europe/who-criticized-for-contradictory-covid-19-statements/1902436}}

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\textit{Remarks:} Opinions expressed in this contribution are those of the author.
About the Author of this Issue

Dr. Christina Lin is a California-based foreign policy analyst. She has extensive US government experience working on national security policy planning, including at DoD, State, and NSC, and was a research consultant at Jane’s Information Group’s Chemical, Biological, Radiological & Nuclear Assessments Intelligence Centre.

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