Peer review comments – ivermectin

Managing COVID-19 rapid guideline (NG191)

Peer review organisations

For a list of stakeholders invited to comment on COVID-19 guidance as part of the targeted peer review, please see the <u>targeted peer review</u> <u>stakeholder list</u> on the NICE website.

For this topic, the following stakeholder organisations were also invited to comment:

• Royal College of Pathologists

Overarching category	Guideline section	Theme of comments	Action taken
General comments	All	8 organisations responded to say either they agreed with the recommendation or had no comments to add. The remaining 1 organisation did not express agreement or disagreement with the content but provided comments on the wording of the rationale.	No action taken (please see below for response to comments on the wording of the rationale).
Rationale	Rationale	1 organisation noted that the evidence review included poor quality studies that have not shown overall benefit and suggested alternative wording for the rationale.	We have considered the suggested alternative wording provided. However, we have retained the original wording as it was reflective of the panel's

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Overarching category	Guideline section	Theme of comments	Action taken
			considerations of the evidence and is in line with the recommendation.
Evidence to Decision	Evidence to Decision	1 organisation confirmed that they agreed with the labelling of 'small net benefit, or little difference between alternatives' for the benefits and harms subsection of the evidence to decision section.	No action taken
Evidence to Decision	Evidence to Decision	1 organisation confirmed that they agreed with the labelling of 'very low' for the certainty of evidence subsection of the evidence to decision section.	No action taken
Evidence profile	Evidence profile	1 organisation highlighted selected plain language summaries in the hospital settings evidence profile table and noted that they agreed with the interpretation of the data.	No action taken
Evidence profile	Evidence profile	1 organisation noted that they agreed with the section in the evidence summary describing the certainty of evidence for the trials in the community setting.	No action taken
Study design	All	1 organisation noted that they considered the included studies to be poor in quality.	The risk of bias of included studies was presented in the evidence review for consideration by the expert panel. No further action was taken.
Study design	All	1 organisation commented that the dose used in most studies was inadequate.	The doses used in included studies were included in the evidence review for consideration by the panel. No further action was taken.

Overarching category	Guideline section	Theme of comments	Action taken
Evidence	All	1 organisation queried whether the conclusions of a recent published systematic review (<u>Bryant 2021</u>) had been considered.	This systematic review was identified in searches performed as part of the development of the recommendation. This systematic review was not included, as RCTs were included as evidence for this recommendation, in line with the protocol.
Health inequalities	All	1 organisation noted the disproportionate impact of COVID-19 on some groups (for example people from BME groups, people with learning disabilities/autism, people with serious mental illness, inclusion health groups, and people from the most deprived areas) and queried whether evidence was considered on impacts on different groups. This organisation agreed that ivermectin should not be diverted from other evidence-based uses for treatment of conditions other than COVID-19.	The identified evidence did not allow consideration of effectiveness and safety of ivermectin for COVID-19 in different population subgroups (for example, based on ethnic group) as data were not available for different groups. The expert panel were asked to include potential health inequalities in their consideration of the evidence. The panel did not raise any potential health inequalities concerns, except to note the importance of not diverting resources away from other evidence-based indications for ivermectin. However, as the recommendation is not to offer ivermectin except as part of a clinical trial, it is not anticipated to cause inequity among any groups.