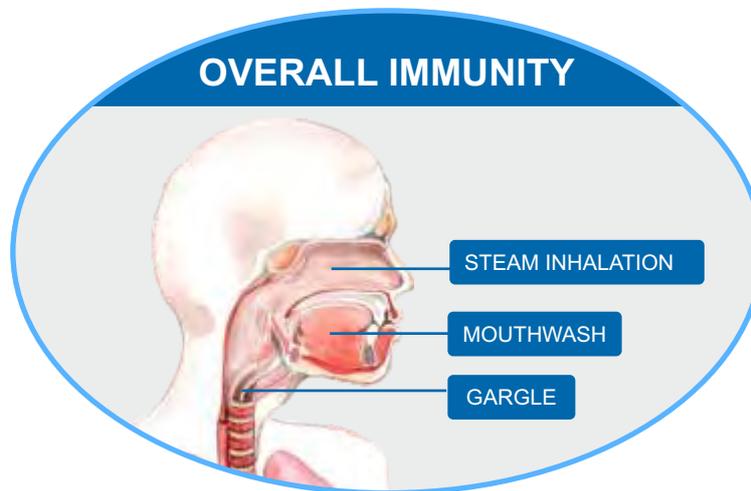


Covid Prevention Guidelines

Transmission of severe acute respiratory syndrome Coronavirus 2 (SARS-Cov-2) mainly occurs through respiratory droplets, transmitted from an infectious person to others within six feet range. The virus enters into the nasal cavity, which further enters the pharynx and throat.

To block the COVID-19 virus from entering the human body, Indoco Remedies, after extensive clinical research has developed the following products that help in prevention & treatment of COVID-19 at entry points.



PREVENTION



TREATMENT





karvol[®] plus
(Inhalant Capsules)

VAPO CAPS

It contains Camphor, Eucalyptol, Chlorothymol, Menthol and Terpineol. The virus enters through the nasal cavity. Precautions should be taken by wearing mask and using hand sanitizer to avoid getting infected by the virus.

Steam inhalation is one of the most widely prevalent home remedies as it is effective, inexpensive and easily available. Decongestant inhalant capsules containing Camphor, Menthol, Eucalyptol, Chlorothymol, and Terpineol are a better and faster option to get relief from the Covid-19 symptoms. The side effects of the same are also minimal.

- Camphor: Potent nasal decongestant action.
- Eucalyptol: Shows potent decongestant action, liquefies mucus and prevents it from drying.
- Chlorothymol: Antiseptic useful in cold symptoms.
- Menthol: Shows decongestant action and helps in relief from cough.
- Terpineol: Antiseptic properties.

[Click on how to use
Inhalant](#)

Rexidin SRS
Chlorhexidine Gluconate 0.2% w/v

MOUTHWASH

Chlorhexidine mouthwash can eliminate SARS-COV-2 (latest study in Journal of Medical Virology, March 2021):*

Chlorhexidine's antiviral effect on enveloped viruses is known since the year 1990. The novel coronavirus SARS-COV-2 is an enveloped virus. Studies published in 2020 showed that Chlorhexidine can inactivate SARS-COV-2 in a concentration as low as 0.05%. Also, that a single rinse of Chlorhexidine can reduce the viral load in the mouth for 2 hours.

This can help in reducing the viral transmission during the pandemic.

Taking it further, the latest study (March 2021) states that 4 days of Chlorhexidine use can eliminate Oropharyngeal SARS-COV-2 in Covid-19 patients.

This is of great significance at this stage of pandemic when the cases are rising, because Chlorhexidine acts by destroying the outer envelope. So the mutations and genetically different variants are all susceptible.





Use of chlorhexidine mouthwash in preventing spread of covid 19,

One rinse will reduce the virus load in the mouth for 2 hours.

A new study published by Korea University College of Medicine, Seoul, Korea on 25th May 2020 in the Journal of Korean Medical Science has concluded that Chlorhexidine (CHX) mouthwash was effective in reducing the SARS-CoV-2 viral load in the saliva for a short-term period (2 hours).

Since the risk of virus spread via droplet transmission is very high, this finding holds great significance in the middle of the current COVID-19 pandemic.

The authors state the key finding “the viral load in the saliva decreased transiently for 2 hours after using the chlorhexidine mouthwash, but it increased again at 2–4 hours' post-mouthwash”.

The authors suggest that chlorhexidine mouthwash might be beneficial for the control of SARS-CoV-2 transmission in both the community and hospital setting.

Quoting another important finding of this study, the authors state “we have shown that the SARS-CoV-2 viral load is consistently high in the saliva. Owing to its high viral load in the saliva, SARS-CoV-2 might be transmitted to other people during a conversation”.

Eight key areas where this study can have significant application:

1. Outpatient care: like Dermatology, ENT, Ophthalmology, General Practice, Dental clinics and many more, can ask their patients to gargle with Chlorhexidine mouthwash before entering the clinics. That will give them a safety period of 2 hours in which they can complete their appointments.
2. Dentists being the highest risk group, may use the mouthwash even more frequently (every 15 -30 min) to keep the risk consistently low.
3. In-patient care hospitals: Many patients admitted in the hospitals may be asymptomatic SARS CoV-2 carriers. To prevent the disease transmission within the hospitals, use of Chlorhexidine mouthwash at every 2-hour interval may be needed.
4. COVID-19 facilities: A lot of healthcare workers (HCW) are getting infected in the COVID wards. Chlorhexidine mouthwash given every 2 hours to the admitted patients and the HCW may minimize the virus transmission within the COVID wards.
5. Suspected individuals / travelers coming from red zones and containment zones and put in quarantine facilities can be given Chlorhexidine mouthwash every 2 hours.
6. Home quarantined individuals: to prevent spread to their family members.
7. Working people from the family going out every day to work: They cannot wear masks at home. These people need to prevent their family members from getting affected. They can use the mouthwash every 2 hours or at least as soon as they come home.
8. Domestic flights of up to 2 hrs duration: Passengers can rinse and gargle before getting into the flight. Since flights are closed environments, this additional measure can be of great help.

**Click on how to use
Mouthwash**



Poor oral hygiene increases risk of COVID-19. Therefore, it is necessary to minimize viral load in saliva and maintain good oral hygiene by following preventive measures such as, rinsing with an antimicrobial mouth rinse. Gargling with mouthwash solutions may help 'inactivate' the viral load of the SARS-COV-2 virus persisting in the mouth and throat and thereby, help lessen the spread of the infection.

Povidone-iodine (PVP-I) is a broad-spectrum antiseptic with no known resistance, that has been listed by the World Health Organization as an essential medicine. It is available in both developed and developing nations alike. PVP-I products have a long history of utility because of strong antiviral, antifungal, and antibacterial properties stemming from the harnessed potency of the halogen and iodine. PVP-I is broadly virucidal; a recently developed nasal/oral formulation has been shown to rapidly deactivate SARS-CoV-2 in vitro.

For oral decontamination, studies have shown that PVP-I gargle and mouthwash demonstrate strong bactericidal properties. Oral virucidal studies underscore its efficacy, reporting that it outperforms other antiseptics such as, chlorhexidine and benzalkonium chloride. Gargling with PVP-I is common practice in Japan, and it is used for both the prevention and treatment of upper respiratory tract infections caused by influenza-like illnesses and the common cold. Gargling has been shown to decrease transport of bacteria into the trachea. PVP-I rinsing of the Oropharyngeal tissues prior to intubation leads to a lower rate of ventilation-associated pneumonia. This data supports the notion that PVP-I may provide a protective Oropharyngeal hygiene measure for individuals at high risk of exposure to oral and respiratory pathogens. Cost-effectiveness of gargling for the prevention of upper respiratory tract infections.

Hence, application of virucidal P-I in nose, pharynx and mouth is safe and may play a significant role in reducing Covid-19 transmission by decreasing viral replication and shedding take place in the upper respiratory tract (the principal reservoir for Covid-19), during the first phase of infection.

[Click on how to use Gargle](#)



Strategies that can mitigate respiratory infection risk & strengthen overall immunity are critical at this time. Good nutrition is important to support the immune system. Dietary supplements containing micronutrients, vitamins A, C, D & E are safe, low-cost and effective in helping our immune system fight off Covid-19 and other acute respiratory tract diseases.

Among the essential micronutrients required to support a normal immune function, vitamin C, vitamin D and the mineral zinc play a central role. Complimentarily and synergistically they support components of both innate and adaptive immunity, which comprise of epithelial barriers, cellular defense & antibodies constituting the three main lines of immune defense. Vitamin C, D and zinc are actively used by cells of the immune system engaged in fighting infections like upper respiratory tract infections and a state of micronutrient deficiency can arise during severe infections.

Vitamin C:

- The immune-enhancing roles of vitamin C are well established.
- Immunostimulatory properties, vitamin C postulated to be effective in ameliorating symptoms of upper respiratory tract infections, especially the common cold.
- Regulates immune system because of its antioxidant properties and its role in collagen synthesis required for stabilization of epithelial barriers.

Vitamin D:

- Vitamin D appears capable of inhibiting pulmonary inflammatory responses while enhancing innate defence mechanisms against respiratory pathogens.
- Vitamin D status is associated inversely with recent URTI and that the association may be stronger in those with respiratory diseases, such as asthma.
- Vitamin D supplementation reduces total mortality.
- Vitamin D insufficiency (VDI) causes essential hypertension and is associated with every COVID-19 mortality risk factor.
- Vitamin D and especially 1,25(OH)₂D are potent immunomodulators.
- Vitamin D acts against bacteria, viruses and fungi and helps fight infections.

Zinc:

- Altered Immune Function and Cytokine Production.
- Its deficiency causes impaired immune response, increased susceptibility to infections and delayed wound healing.
- Zinc is considered key for optimal functioning of both innate and acquired immunity. Impaired immune functions due to inadequate zinc status may be the most common cause of secondary immunodeficiency in humans.
- In children, low concentrations of circulating zinc are associated with an increased risk of respiratory tract morbidity.
- Zinc supplementation to maintain a normal serum concentration may help to reduce the mean incidence of infections (i.e., common cold, cold sores and flu), as well as, the incidence of pneumonia and associated morbidity in the elderly.



Favipiravir, a purine nucleic acid analog, is one of the antiviral candidates evaluated in several clinical trials. In 2014, it was approved in Japan as a backup choice for resistant influenza infection and since then has been approved in several countries. It is indicated for the treatment of patients with mild to moderate COVID-19 disease.

Favipiravir is an RNA-dependent RNA polymerase inhibitor, now available in China, India, Russia, Japan, Saudi Arabia, USA, Canada, Italy, France and UK. As per various clinical studies conducted, Favipiravir showed a significantly faster mean time to viral clearance than lopinavir/ritonavir [4 days vs 11 days].

FAVIPIRAVIR

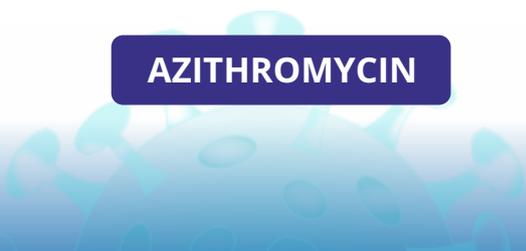
ATM

The strongest evidence of effectiveness for azithromycin concerns its role as an antibacterial drug. Although there is no direct evidence of the effectiveness of azithromycin in COVID-19, some scientific bodies have suggested that the antibacterial properties of azithromycin remain clinically useful in the empirical treatment of community acquired pneumonia (CAP) occurring in COVID-19 patients. Not all current treatment guidelines agree on azithromycin use in CAP. There is evidence on the antiviral and immunomodulating effects of azithromycin, which in addition was not derived from persons with COVID-19 specifically.

Antibacterial effect in Bacterial Community-Acquired Pneumonia

In most patients with suspected or confirmed SARS-CoV-2 infection, lung damage correlates with the severity of viral infection; however, bacterial co-infection has been reported in several patients affected by COVID-19 pneumonia. Thus, some guidelines have been adapted in the context of the COVID-19 pandemic to promote the appropriate use of antibiotics and to delineate the role of these drugs, including azithromycin, in COVID-19 patients.

AZITHROMYCIN





DISCLAIMER:

Wearing masks, regular hand sanitization and adhering to social distancing norms are important factors in reducing the risk of spreading the Covid-19 virus. These Guidelines intend to provide information on the medicinal benefits of some therapies that have shown positive results in reducing the spread of Covid-19 along with wearing masks, hand sanitization and social distancing. It is important to note that one must consult their doctor to check if these medications are suitable for them.

People with Covid-19 and care givers are advised to strictly follow the advice and medication as prescribed by their treating clinicians.

Issued in Public Interest by



MAKERS OF

karvol[®] plus
(Inhalant Capsules)

Rexidin SRS
Chlorhexidine Gluconate 0.2% w/v

P/VICLEAN
Povidone Iodine gargle 0.5% w/v
GARGLE

ZmunCD

In Mild to Moderate Covid-19,
Fevindo 400
Favipiravir 400 mg Tablet

ATM

