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| **Letter to Editor** |
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**Large‐scale homoeoprophylaxis as an add‐on measure to prevent COVID‐19 disease: Cuban preliminary experiences**

Dear Editor,

Cuba has developed previous experiences using homoeopathic interventions to prevent epidemic diseases, such as leptospirosis.[1] Following the identification of the coronavirus disease COVID‐19 on 11 March 2020, Cuba activated its National Action Plan for Epidemics and convened a National Intersectorial Commission to design measures to protect population health.

The homoeopathic combination remedy PrevengHo®‐Vir was included in the Cuban National Protocol for COVID‐19 as a preventive medication.[3] It is produced by AICA Laboratories, from BioCubaFarma Enterprise Group, and it was registered (H‐20012‐V03) in correspondence with the regulatory provisions established by the Cuban regulatory agency (CECMED, for its Spanish acronym). PrevengHo®‐Vir is recommended for the prevention of influenza, flu, dengue and emerging viral infections, recommending its use under conditions of epidemiological risk without limiting the application of other medications. It contains 30 CH or 200 CK homoeopathic potencies of *Anas barbariae*, *Arsenicum album*, *Bacillinum*, *Baptisia tinctoria*, *Bryonia alba*, *Crotalus horridus*, *Eupatorium perfoliatum*, *Gelsemium sempervirens*, *Influenzinum*, *Pneumococinum*, *Pyrogenium*, *Tuberculinum aviaire* and Bach flower coadjutants on a 30% hydro‐alcoholic solution.[4]

PrevengHo®‐Vir is an add‐on measure to prevent COVID‐19. It is not intended to substitute any other recommendation such as social distancing, hand cleaning and mouth and nose coverage with mask. Posology is of 5 drops, taken on day 1, day 2, day 3 and day 10 of the intervention.[3]

Two groups were established to organise the largest homoeoprophylactic (HP) campaign ever conducted in Cuba. The first group included individuals (patients, interns, semi‐interns and workers) from psychopedagogical medical centres, elderly homes, community centres for the elderly, psychiatric hospitals and pregnant women’s homes where doses were administered by health professionals. The second group was the general Cuban population over 6 months of age, taking as a priority those municipalities with the largest incidence of COVID‐19, and primary healthcare workers distributed the bottles to families for self‐administration. Active pharmacovigilance was oriented to detect suspected adverse drug reactions (ADRs).

The HP campaign started on 1 April, and a total of 45,914 individuals from the included health facilities received PrevengHo®‐Vir until 30 April (97.8% of this universe), with only 62 persons positive to COVID‐19 (0.14%). One of these patients did not use PrevengHo®‐Vir.

The medication was distributed to 953,416 families in 43 municipalities by the same time, when Cuba accumulated 1537 patients positive to COVID‐19. Anyway, only Consolacion del Sur, Plaza de la Revolucion and Florencia had completed the 10‐day treatment during April, with 4 patients from Plaza de la Revolucion municipality in Havana positive to COVID‐19 after its completion (0,002% of the population from these 3 municipalities). There were 11 reports of suspected ADR to PrevengHo®‐Vir referred to the National System of Pharmacovigilance during the 1st month of the HP campaign, 4 were classified as moderate (36.4%) and 7 were mild (63.6%).

A quasi‐experimental post‐sanitary registration study is registered on the Public Registry of Clinical Trials of the Republic of Cuba (Unique ID number: RPCEC00000312).[5] It will provide further information about the safety (primary outcome) and effect (secondary outcome) of PrevengHo®‐Vir. Publications of these results are guaranteed.

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**Conflicts of interest**

None declared.

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1. Bracho G, Varela E, Fernández R, Ordaz B, Marzoa N, Menéndez J, *et al*. Large‐scale application of highly‐diluted bacteria for leptospirosis epidemic control. Homeopathy 2010;99:156‐66.
2. Cuba’s COVID‐19 Strategy: Main actions through April 23, 2020. Medicc Rev 2020;22:50‐2. Available from: https://mediccreview.org/ cubas‐covid‐19‐strategy‐main‐actions‐through‐april‐23‐2020/. [Last accessed on 2020 May 12].
3. Ministry of Public Health. National Action Protocol For COVID‐19. Version 1.4. (Provisional version for health staff working in the treatment of patients); 2020. Available from: http://files.sld.cu/editorhome/files/2020/05/MINSAP\_ Protocolo‐de‐Actuaci%C3%B3n‐Nacional‐para‐la‐COVID‐19\_ versi%C3%B3n‐1.4\_mayo‐2020.pdf. [Last accessed on 2020 May 12].
4. CECMED. Resumen de las Características del Producto. PrevengHo®‐Vir; 2020. Available from: https://www.cecmed.cu/ registro/rcp/prevenghor‐vir. [Last accessed on 2020 May 18].
5. Department of Natural and Traditional Medicine, Ministry of Public Health, Republic of Cuba. Homeoprophylaxis Safety Study with PrevengHo®‐Vir in the Context of the COVID‐19 Pandemic in Cuba. Quasi‐Experimental Study Post‐Registration (COVID‐19); 2020.

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