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UNITED STATES
HOUSE OF REPRESENTATIVES

ROSA L. DELAURO

3RD DISTRICT, CONNECTICUT

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AND RELATED AGENCIES

COMMITTEE ON THE BUDGET

April 23, 2020

The Honorable Robert Wilkie
Secretary of Veterans Affairs
810 Vermont Ave., NW
Washington, DC 20420

Dear Secretary Wilkie:

As you may know, the National Institute of Allergies and Infectious Diseases released guidelines yesterday that concretely established there is no drug or therapeutic is safe and effective to treat COVID-19.¹ The Food and Drug Administration issued an Emergency Use Authorization (EUA) allowing for the emergency use of hydroxychloroquine sulfate supplied from the Strategic National Stockpile to treat adults and adolescents hospitalized with COVID-19 based on limited clinical data and medical literature. Instead, experts have recommended hydroxychloroquine plus azithromycin not be used on patients because of the potential for toxicities that could increase the risk of death.

My understanding from your comments during the official bipartisan briefing on Friday April 17, 2020 with the Veterans Affairs (VA) and Military Construction Appropriations Subcommittee was that the VA had made efforts to purchase large quantities of Hydroxychloroquine for treatment of COVID-19 patients.

Further, a group of scientists published a study looking at all available data from patients hospitalized at VA medial centers with confirmed COVID-19 diagnosis finding there was no evidence that hydroxychloroquine alone, or in combination with azithromycin, reduced the potential use of ventilation in these patients.² In fact, the study found there was an increase in overall mortality in the patients treated with hydroxychloroquine alone.³ Given this study, as well, as the guidance published by experts at the National Institute of Allergies and Infectious Diseases, I urge you to stop the use of Hydroxychloroquine for treatment of COVID-19 patients pending further scientific evaluation.

¹ <https://covid19treatmentguidelines.nih.gov/therapeutic-options-under-investigation/antiviral-therapy/>

² <https://www.medrxiv.org/content/10.1101/2020.04.16.20065920v1>

³ *Id.*

Additionally, at your earliest convenience please provide answers to the following questions:

- How much Hydroxychloroquine was purchased by the Veterans Health Administration for use in VA facilities?
- What funds were used to purchase these quantities of Hydroxychloroquine? How much in total has VHA spent on Hydroxychloroquine in the wake of the COVID-19 pandemic?
- How many VA patients were treated using this drug? Has the VA tracked the use of Hydroxychloroquine on veterans who have been treated in non-VA facilities?
- In light of the guidance provided by NIAD, have VA facilities ceased using this drug on patients suffering from COVID-19? If not, when will you plan to do so?

Given the urgent circumstances, I would appreciate a response to these questions as soon as possible.

As always, I stand ready to work with you to protect the health and safety of the American people and all of our brave veterans.

Sincerely,

A handwritten signature in black ink that reads "Rosa L. DeLauro". The signature is written in a cursive, flowing style.

Rosa L. DeLauro
Member of Congress