# Trump declares scientific study a “Trump-enemy statement”

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Early in April, before much data was in on potential COVID-19 treatments, President Trump promoted one that seemed to have anecdotal support. Hydroxychloroquine was suggested as a potential treatment very early on in the pandemic and had picked up some weak support via a badly flawed French study. That was enough for Trump to suggest people take it, his rhetorical “What do you have to lose?” question breezing past the well-known and potentially dangerous side effects of the drug.

In the time since, however, Trump went silent on the topic, and the evidence piled up that chloroquine did little while retaining its problematic side effects. But it returned to the spotlight on Monday when Trump announced he had been taking it, possibly in response to several cases among the White House staff. This naturally led to questions about why he was doing that in light of the research that has come out in the

intervening weeks. Trump’s response was to label a study done by government researchers a “Trump-enemy statement.”

## The chloroquine saga

Chloroquine and its derivatives, like hydroxychloroquine, were first developed as anti-malarial drugs. But they have a variety of effects on the body and have found a use through their role as immune suppressors, treating autoimmune diseases like lupus. In cultured cells, they show a relatively general antiviral activity, including the suppression of SARS-CoV-1. This led a number of teams to try chloroquine against SARS-CoV-2 early on in the pandemic. Notably, a French team released a draft study that seemed to show some promising results.

Other researchers highlighted a number of serious flaws in the draft study, but by then, a landslide had started that was difficult to stop. Plenty of other groups started trials with the drug, and the FDA approved its emergency use for COVID-19. There was a run on the drug that made it difficult for those with autoimmune disorders to obtain their needed prescriptions—and that was before Trump’s “What have you got to lose?” promotion.

All of this seemed to ignore the very well-known side effects of the drug, which include slowing a key interval in the heart’s rhythm. This can set off fatal heart arrhythmias in vulnerable patients.

Since March, however, additional results have come in, most showing that chloroquine has limited impact on COVID-19, and the known side effects are still present and sometimes lethal. Prominent among these was a study by the US Veterans Administration, which was quickly followed by the FDA issuing a safety announcement, stating that the drugs should only be used in hospitalized patients or via clinical trials.

All of these studies were limited, having small patient populations and/or lacking randomization and placebo arms. But, over time, the trials got larger; a recent one tracked the outcomes of over 1,400 patients. And other researchers started doing meta-analyses, combining the data from multiple smaller trials. One of these combined records from over 4,000 patients and echoed the growing consensus: no impact on COVID-19 and "significantly higher incidence of adverse events with hydroxychloroquine use."

## Bring on the politics

Under normal circumstances, this would be when attention turns away from chloroquine derivatives and focuses on drugs that might actually work. Trump's silence on the topic would undoubtedly have enabled this, although the drug had developed a fanatical following that seemed indifferent to the growing evidence. But things changed, perhaps due to some recent cases that turned up in testing of White House staff. Trump says that he recently asked his doctor to start him on the hydroxychloroquine and made that information public this week, and he went right back to promoting the drug.

In doing so, Trump is basically ignoring both developing and well-established science. In the well-established category, he is now essentially saying that the potentially fatal cardiac side effects don't exist. In a pair of press Q&A's held on Tuesday, Trump claimed: "I'm not going to get hurt by it," and "it doesn't hurt people," and "you're not going to get sick or die" if you take it. Those statements contradict decades of data and experience.

But Trump is also favoring anecdotes over the growing research consensus. "I think it's good," he said in response to a question. "I've heard a lot of good stories." He later suggested those stories *were* the equivalent of evidence, saying, "Here's my evidence: I get a lot of positive calls

about it.” Elsewhere in the same session, however, he admitted, “It seems to have an impact, and maybe it does; maybe it doesn’t.”

This could easily be dismissed as ignorance of the state of the evidence, but that doesn’t seem to actually be true, because Trump made it clear he’s very aware of the Veterans Administration study that provided some of the first evidence that hydroxychloroquine is ineffective. But he has an explanation of why that evidence exists: it was a flawed study by a bunch of Trump haters.

Trump falsely declares that there’s only a single report that suggests chloroquine is ineffective and potentially harmful, saying, “And if you look at the one survey, the only bad survey, they were giving it to people that were in very bad shape. They were very old, almost dead.” Elsewhere, he termed it a “phony” report and an “unscientific report,” again emphasizing that the drug was given to those who were very ill. That is a limitation of the study, but again, that is not the only study that shows chloroquine is ineffective.

Not satisfied with assailing the quality of the study, Trump went on to attack the researchers themselves: “The only negative I’ve heard was the study where they gave it, was it the [Veterans Administration]? With, you know, people that aren’t big Trump fans gave it.” He later went on to term the study “a ‘Trump enemy’ statement.”

## Personal beliefs vs. science

The number of issues in just these short statements is extraordinary. Trump is promoting misinformation about a medication with potentially fatal side effects. He’s ignoring a wealth of relevant studies. And he’s suggesting that the only reason a study produced results he didn’t like is because the researchers behind it decided to attack him.

This is hardly the first time people in power have misrepresented the state of science; climate change has suffered from this issue repeatedly. And politicians have sometimes suggested that climate scientists' conclusions were driven by political or financial considerations rather than data-driven. But the accusation that scientists are reaching conclusions out of personal animosity toward a single politician appears to be a first, and it's a potentially dangerous one.

How dangerous? As noted above, the FDA's current policy is that chloroquine's side effects are dangerous enough that it should not be used outside of hospitalization or a clinical trial. Yet when asked about how Trump's use of the drug seems to go against that guidance, the FDA Commissioner appeared to back away from his agency's own policy.

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