











Attenuation of clinical and immunological outcomes during SARS-CoV-2 infection by ivermectin

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Abstract

The devastating pandemic due to SARS-CoV-2 and the emergence of antigenic variants that jeopardize the efficacy of current vaccines create an urgent need for a comprehensive understanding of the pathophysiology of COVID-19, including the contribution of inflammation to disease. It also warrants for the search of immunomodulatory drugs that could improve disease outcome. Here, we show that standard doses of ivermectin (IVM), an anti-parasitic drug with potential immunomodulatory activities through the cholinergic anti-inflammatory pathway, prevent clinical deterioration, reduce olfactory deficit, and limit the inflammation of the upper and lower respiratory tracts in SARS-CoV-2-infected hamsters. Whereas it has no effect on viral load in the airways of infected animals, transcriptomic analyses of infected lungs reveal that IVM dampens type I interferon responses and modulates several other inflammatory pathways. In particular, IVM dramatically reduces the *IL-6/IL-10* ratio in lung tissue and promotes macrophage M2 polarization, which might account for the more favorable clinical presentation of IVM-treated animals. Altogether, this study supports the use of immunomodulatory drugs such as IVM, to improve the clinical condition of SARS-CoV-2-infected patients.

Keywords coronavirus; inflammation; ivermectin; SARS-CoV-2; viral infections

Subject Categories Immunology; Microbiology, Virology & Host Pathogen Interaction

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Introduction

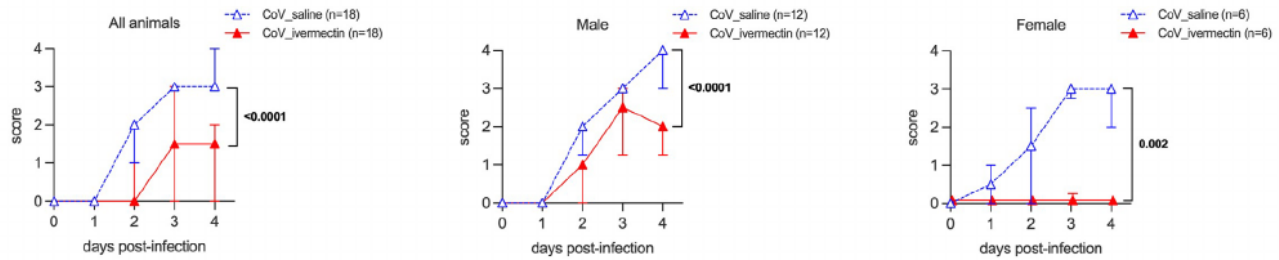
Coronaviruses cause respiratory disease in humans. During the ongoing pandemic of SARS-CoV-2 (COVID-19), clinical signs other than cough and fever have been linked to infection, from neurological symptoms such as anosmia and taste loss to olfactory and gustatory dysfunction. These symptoms have been related to an over-responsive immune system to SARS-CoV-2 (Bhaskar *et al*, 2020). Consequently, there is an urgent need to identify the hallmarks of this over-responsiveness and to develop therapeutics or repurpose drugs to improve the clinical condition of COVID-19 patients (Batalha *et al*, 2021).

Ivermectin (IVM), a macrocyclic lactone anti-parasitic drug which prevents infection by endo- and ectoparasites (Sajid *et al*, 2006; Sajid *et al*, 2020). IVM is an efficient positive allosteric modulator of the nicotinic acetylcholine receptor (nAChR) (and several ligand-gated ion channels, including glutamate (GluCl) in worms (Hibbs & Goulet, 2006)). IVM has been shown to exert an immunomodulatory effect in humans and animals (Sajid *et al*, 2006; Heine *et al*, 2012), even though its underlying mechanism is not yet established (Laing *et al*, 2017). A direct interaction between SARS-CoV-2 with nAChR has also been hypothesized because of sequence homologies between SARS-CoV-2 and nAChR ligands such as snake venom

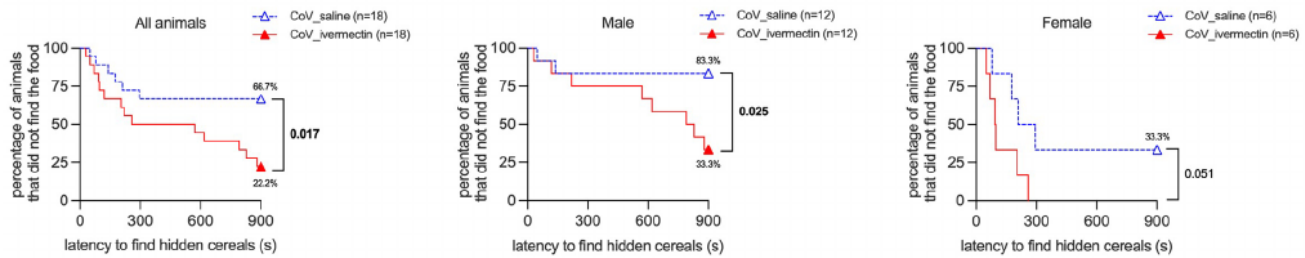
reported to reduce viral load and improve the clinical status of mice infected by an animal coronavirus, the mouse hepatitis virus (MHV) (Areválo *et al.*, 2021). *In vitro* inhibition of SARS-CoV-2 replication by IVM in Vero/hSLAM cells has also been reported (Caly *et al.*, 2020), albeit at much higher concentrations (50- to 100-fold) than those clinically attainable in humans (150–400 µg/kg) (Guzzo *et al.*, 2002; Bray *et al.*, 2020; Chaccour *et al.*, 2020).

The aim of this study is to investigate pathogenesis of COVID-19, in a SARS-Co golden Syrian hamster. This species is naive virus and the most reliable and affordable 19 (Chan *et al.*, 2020; Muñoz-Fontela *et al.* recently used to demonstrate the inflammation with intranasal administratic

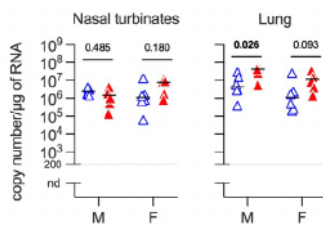
A Clinical signs



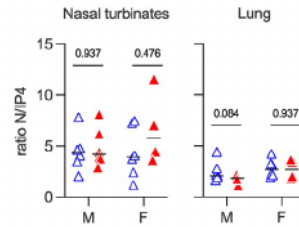
B Olfaction test at 3 dpi (food finding)



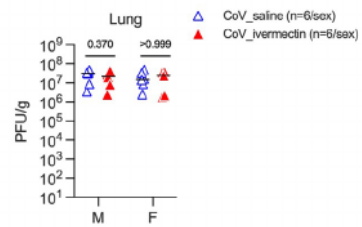
C Viral RNA load at 4 dpi



D ddPCR at 4 dpi



E Viral titer at 4 dpi



Cytokines/chemokines in the nasal turbinates at 4 dpi

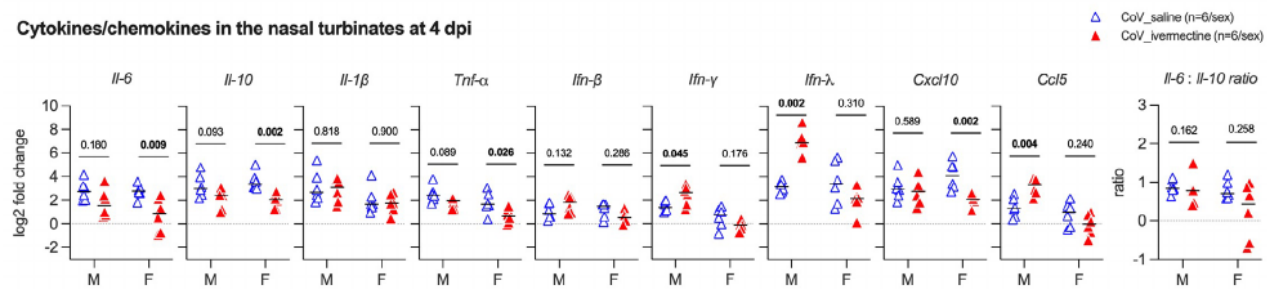


Figure 1. Clinical presentation, olfaction test, viral load and immune profile in the nasal turbinates of SARS-CoV-2-infected hamsters treated with ivermectin.

- A Clinical signs in infected hamsters. The clinical score is based on a cumulative 0–4 scale: ruffled fur; slow movements; apathy; and absent symbols indicate the median \pm interquartile range.
- B Olfactory performance in infected hamsters. The olfaction test is based on the hidden (buried) food finding test. Curves represent the per cent not find the buried food. Food finding assays were performed at 3 days post-infection (dpi). Data were obtained from three independent two independent experiments for females.
- C Viral load in the nasal turbinates and in the lungs at 4 dpi.
- D Ratio between the CPD (copy per droplets, normalized to γ -actin and *Hprt* reference gene relative expression) of structural [N, nucleocapsid protein, RNA-dependent RNA polymerase] viral gene expression determined by digital droplet PCR (ddPCR) in the nasal turbinates and in the lungs at 4 dpi.
- E Infectious viral titer in the lung at 4 dpi expressed as plaque-forming units (PFU)/g of tissue.
- F Cytokine and chemokine transcripts in the nasal turbinates at 4 dpi in male and female SARS-CoV-2-infected hamsters, treated with saline or ivermectin.

Data information: Horizontal lines indicate medians. The *P* value is indicated in bold when significant at a 0.05 threshold. Mann–Whitney test (Mantel–Cox) test (B). M: male hamsters and F: female hamsters. Data were obtained from two independent experiments for each sex. See Appendix Fig S1.

Source data are available online for this figure.

disease progression (Hoagland *et al*, 2020). Male and female adult golden Syrian hamsters were intranasally inoculated with 6×10^4 PFU of SARS-CoV-2 [BetaCoV/France/IDF00372/2020]. This inoculum size was selected as it invariably causes symptomatic infection in golden Syrian hamster, with a high incidence of anosmia and high viral loads in the upper and lower respiratory tracts within 4 days post-inoculation (dpi) (de Melo *et al*, 2021). At the time of infection, animals received a single subcutaneous injection of IVM at the anti-parasitic dose of 400 μ g/kg, commonly used in human clinical setting, and were monitored over 4 days.

Here, we show that the modulation of the host's inflammatory response using IVM as a repurposed drug strongly diminished the clinical score and severity of the disease (including anosmia) observed in these animals, although it has no impact on viral load. IVM-treated animals presented a strong modulation in several signaling pathways, including a significant reduction of the type I and III interferon response and of the *Il-6/Il-10* ratio, along with the presence of M2 macrophages in the lung. These effects were mostly compartmentalized and sex-dependent, and treated infected females exhibited better clinical outcomes.

Results and Discussion

COVID-19 clinical outcome is attenuated by ivermectin

In order to study the effects of IVM chemical therapy on clinical outcome, we assessed body weight, clinical score, and olfactory

performance in infected hamsters. The clinical score is based on a cumulative 0–4 scale: ruffled fur; slow movements; apathy; and absent symbols indicate the median \pm interquartile range. Olfactory performance in infected hamsters. The olfaction test is based on the hidden (buried) food finding test. Curves represent the per cent not find the buried food. Food finding assays were performed at 3 days post-infection (dpi). Data were obtained from three independent two independent experiments for females. Viral load in the nasal turbinates and in the lungs at 4 dpi. Ratio between the CPD (copy per droplets, normalized to γ -actin and *Hprt* reference gene relative expression) of structural [N, nucleocapsid protein, RNA-dependent RNA polymerase] viral gene expression determined by digital droplet PCR (ddPCR) in the nasal turbinates and in the lungs at 4 dpi. Infectious viral titer in the lung at 4 dpi expressed as plaque-forming units (PFU)/g of tissue. Cytokine and chemokine transcripts in the nasal turbinates at 4 dpi in male and female SARS-CoV-2-infected hamsters, treated with saline or ivermectin.

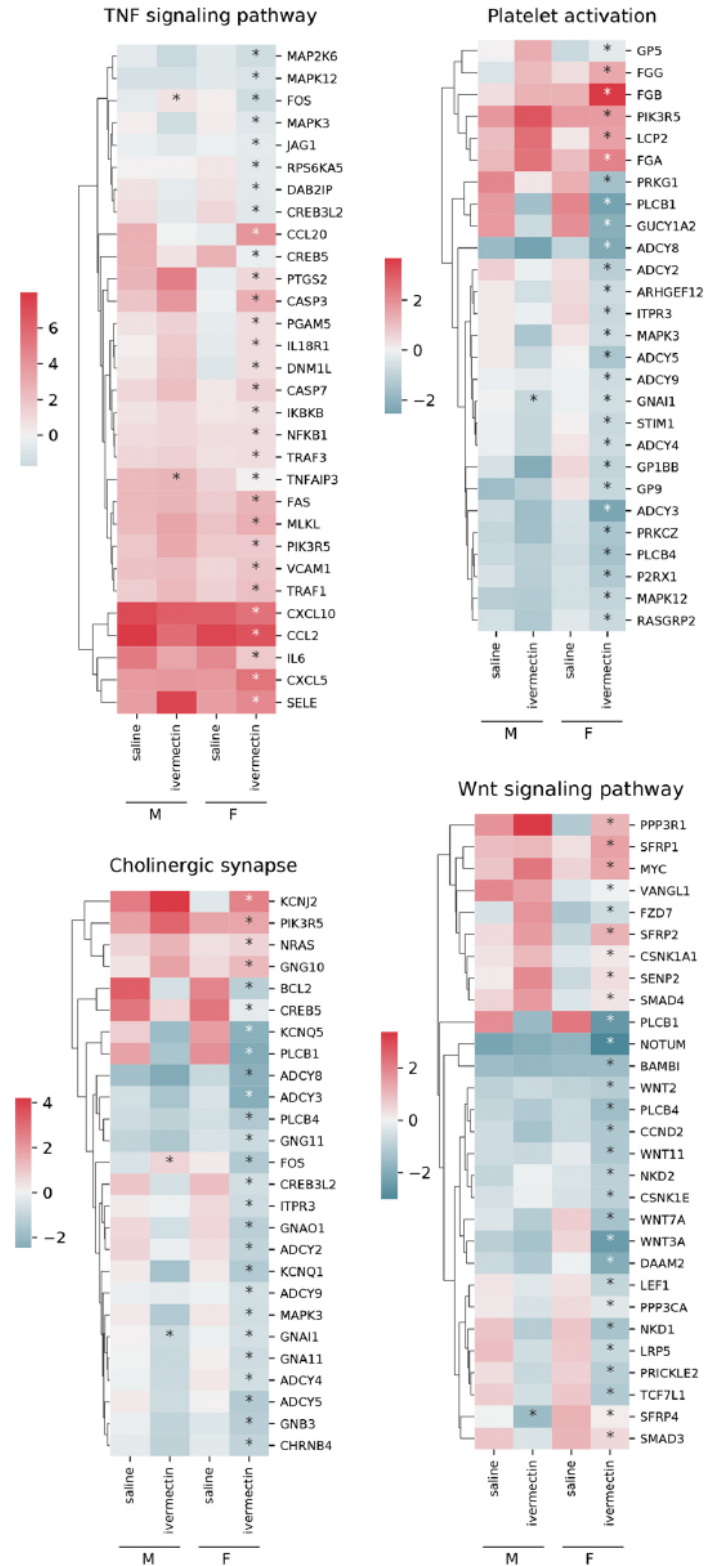
significantly reduced clinical score, and it in infected females (Fig 1A). Remarkably the olfactory deficit in infected animals 66.7% (12/18) of the saline-treated infected hamsters presented with signs of hyposmia/anosmia, whereas only 22.2% (5/22) of the IVM-treated infected hamsters presented with signs of hyposmia/anosmia. The olfactory deficit was not significantly affected by sex: 83.3% (10/12) of the saline-treated infected males presented with hyposmia/anosmia, against 33.3% (2/6) of saline-treated infected females (0/6; Figs 1B and 1C).

Since males presented a higher incidence of olfactory deficit, we subsequently performed a dose-response study of IVM on the clinical presentation in infected males: Lower doses of IVM (100 μ g/kg) resulted in similar clinical outcomes as the anti-parasitic dose (400 μ g/kg) (Fig EV2). As expected, no signs of olfactory deficit were observed in mock-infected hamsters (Fig EV1B–D).

Ivermectin treatment does not influence respiratory tract of infected hamsters

To evaluate the effect of IVM treatment on the respiratory tract, we tested the nasal turbinate of infected hamsters using both classical RT–qPCR and a more sensitive technique of digital droplet PCR (ddPCR) (Appendix Fig S1). Consistently, the viral load

A Selected KEGG pathways



B Target validation

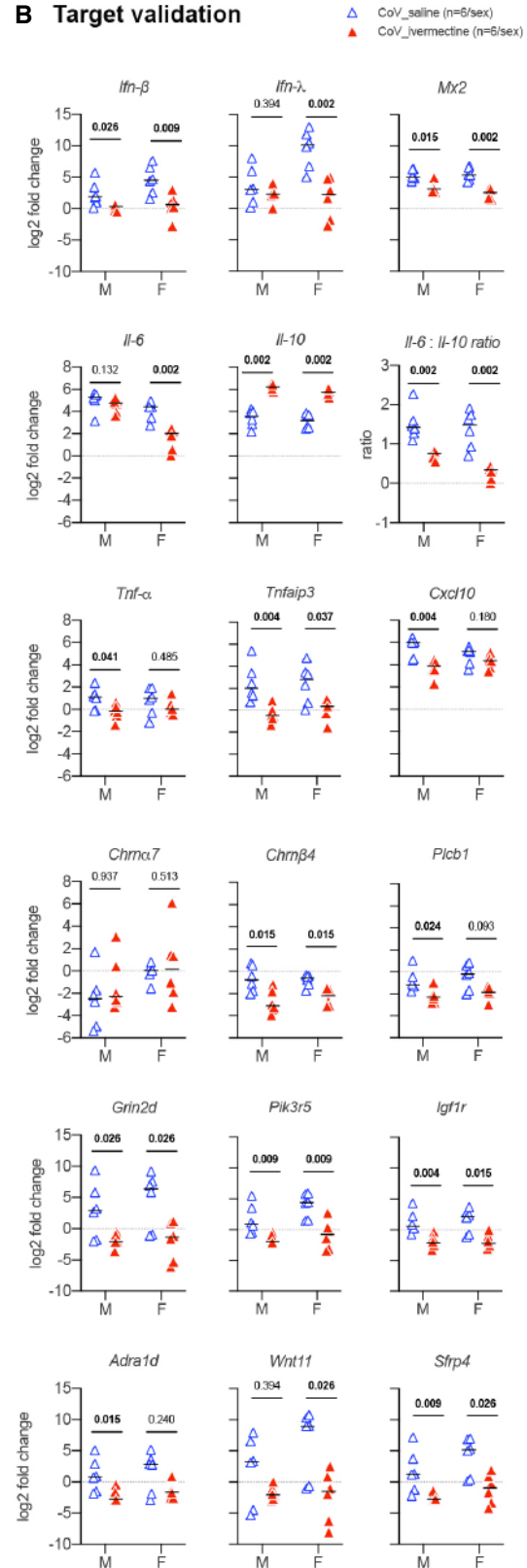


Figure 2. Transcriptomic profile in the lung of SARS-CoV-2-infected hamsters with and without ivermectin treatment at 4 days

A Heatmaps showing the differentially expressed genes according to the selected KEGG pathways calculated in comparison with mock-infected hamsters. Benjamini–Hochberg-adjusted P -value < 0.05 in the comparison between saline and ivermectin within the same sex. Color gradient represents fold change comparing infected and mock-infected. Complete analyses are listed in Dataset EV1.

B Validation targets in the lung at 4 dpi. Horizontal lines indicate medians. The P value is indicated in bold when significant at a 0.05 threshold.

Data information: M: male hamsters and F: female hamsters. Data were obtained from two independent experiments for each sex. See Figs 1 and 2. Source data are available online for this figure.

Ivermectin therapy modulates local immune responses in infected hamsters' nasal turbinates

Anosmia is a typical symptom of COVID-19 in humans, with some sex-dependent differences (Han *et al*, 2020; Qiu *et al*, 2020; Xydakis *et al*, 2020). Inflammation in the nasal cavity, following olfactory sensory neurons infection and deciliation, has been shown to be an underlying factor for smell loss during SARS-CoV-2 infection (de Melo *et al*, 2021), and the chemokine *Cxcl10* could be directly implicated due to its neurotoxic potential (Oliviero *et al*, 2020). We therefore tested a possible modulation by IVM of the local inflammatory response in hamsters and in particular in the nasal turbinates, the primary target tissue of SARS-CoV-2 infection (de Melo *et al*, 2021), that could correlate its effect on the olfactory score. To this aim, a panel of cytokines (*Il-6*, *Il-10*, *Il-1 β* , *Tnf- α* , *Ifn- β* , *Ifn- γ* , and *Ifn- λ*) and chemokines (*Cxcl10* and *Ccl5*) were used to assess the impact of IVM treatment on immune responses in the nasal turbinates of SARS-CoV-2-infected hamsters at 4 dpi. Upon treatment with IVM, females presented a significant downregulation of *Il-6*, *Il-10*, and *Tnf- α* , which are key inflammatory mediators of prognostic value in COVID-19 patients (McElvaney *et al*, 2020a), and of *Cxcl10* (Fig 1F), in line with their better olfactory performance observed in the food finding tests (Fig 1B). The differences between sex groups are illustrated by the increase in three pro-inflammatory mediators (*Ifn- γ* , *Ifn- λ* , and *Ccl5*) only in males (Fig 1F). No difference for the *Il-6/Il-10* ratio was observed in the nasal turbinates.

Lung immunometabolism is affected by SARS-CoV-2 infection and modulated by ivermectin

IVM attenuates lung pathology and inflammation pathways, including cholinergic synapse-related genes

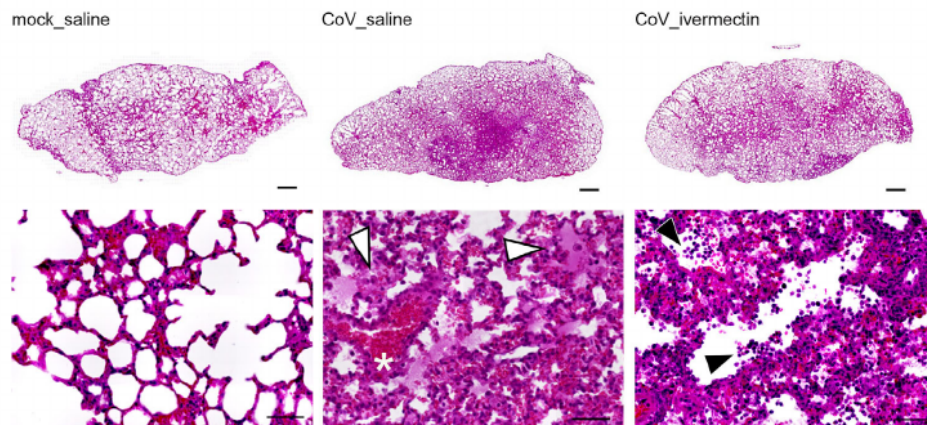
In order to further study the mode of action of IVM on clinical signs, we performed at 4 dpi a comparative agnostic transcriptomic approach using RNA-seq in the lower respiratory tract in hamsters treated or not with IVM. In SARS-CoV-2-infected lungs, males and

only 36 downregulated and 51 upregulated genes were identified in the lungs of IVM-treated males. This sex difference was confirmed by KEGG and GO enrichments representative of the observed changes.

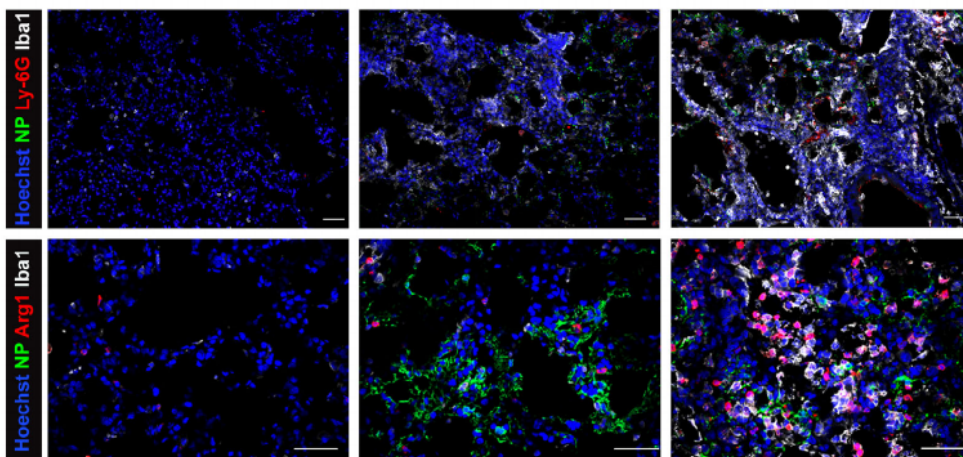
Several KEGG pathways were significantly enriched in IVM-treated females: “TNF signaling pathway”, in line with the activation of vagus nerve inflammatory pathway (CAP) (Pavlov & Tracey, 2012; Di Giovanni, 2020), and “platelet activation pathway” (Zhang *et al*, 2020b; Chen & Wang, 2020). We also observed a modulation of “vascular smooth muscle contraction” KEGG pathway in the IVM-treated females, which is shown to correlate with lung homeostasis (Lee & Yoon, 2020), obesity, type-2 diabetes, and metabolic syndrome (Aamir *et al*, 2020) (Figs 2A and E). Several KEGG pathways in IVM-treated female hamsters were related to “vascular smooth muscle contraction”, an important pathway in cardiomyocytes which could be related to hypertension and therefore attenuation of lung function (Potus *et al*, 2020; Vaduganathan *et al*, 2020). Other related pathways include metabolism and insulin resistance, which were observed in RNA-seq analyses of the lung in IVM-treated females with SARS-CoV-2 infection, linked to hypertension and metabolic syndrome, and impairments in the immune system, what is observed in COVID-19 in humans (Gianchandani *et al*, 2020). In IVM-treated female hamsters, the term “insulin resistance” was significantly enriched in KEGG enrichment, and the insulin secretory pathway was also enriched. Several other related pathways such as inflammation, and lung pathology were also enriched in IVM-treated females (Rap1, AGE-RAGE, and cGMP-PKG signaling pathway) (Oczypok *et al*, 2017; Pei *et al*, 2020). In IVM-treated males, significant modulated KEGG and GO enrichments were related to epithelial cells (Fig EV4).

Additionally, the GO enrichment in IVM-treated females was related to pathways including

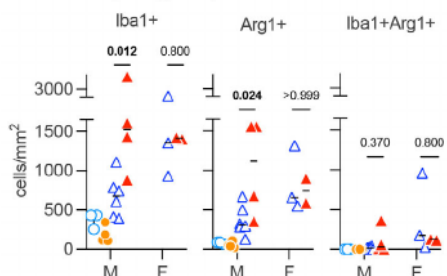
A Histopathological findings



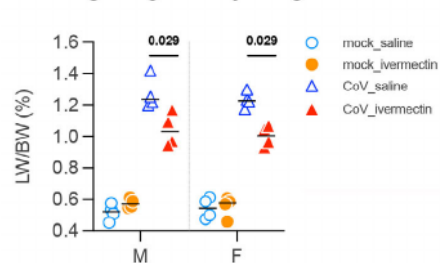
B Myeloid cells identification



C Macrophages quantification



Lung weight/body weight ratio



D Macrophage polarization genes

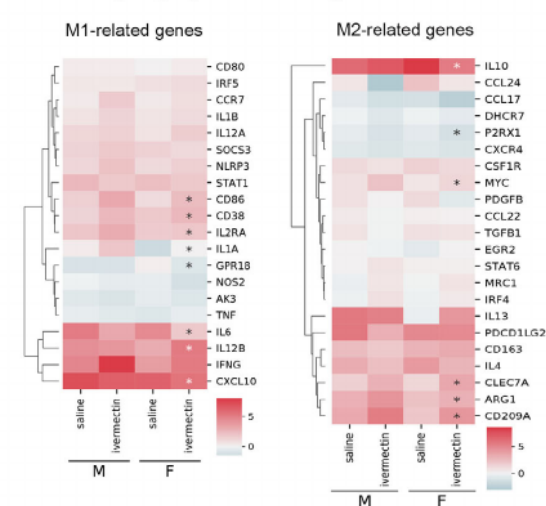


Figure 3. Identification of macrophages in the lung of SARS-CoV-2-infected hamsters with and without ivermectin treatment and a transcriptomic profile related to M1/M2 polarization.

- A Representative histopathology photomicrographies of lungs according to the different groups: mock_saline, CoV_saline, and CoV_ivermectin sections. Bottom panels: high magnification. CoV_saline section exhibits important congestion (*), edema associated with few mononuclear cells. Note the thickening of the alveolar walls. CoV_ivermectin section exhibits important amounts of mononuclear cells (black arrowheads) a congestion or edema. Hematoxylin and eosin. Scale bars = 1 mm (top panels) and 20 μ m (bottom panels).
- B Representative immunofluorescence photomicrographies of neutrophils (Ly-6G), monocytes/macrophages (Iba1), M2 macrophages (Arg1), lung. Scale bars = 50 μ m.
- C Quantification of Iba1⁺ cells, Arg1⁺ cells, and Iba1⁺Arg1⁺ cells in the lungs. mock_saline $n = 3$ (males), mock_ivermectin $n = 4$ (males), CoV_saline $n = 6$ (4 males and 2 females), and CoV_ivermectin $n = 6$ (4 males and 2 females).
- D Heatmaps showing the differentially expressed genes related to the M1/M2 polarization in comparison with mock-infected hamsters. *in Hochberg-adjusted P -value < 0.05 in the comparison between saline and ivermectin within the same sex. Color gradient represents the t comparing infected and mock-infected. Complete analyses are listed in Dataset EV1.
- E Lung weight-to-body weight ratio in the different groups ($n = 4$ /sex/group).

Data information: M: male hamsters and F: female hamsters. Horizontal lines indicate medians. The P value is indicated in bold when significant by Mann-Whitney test (C, E).

Source data are available online for this figure.

pathways that were highly regulated in IVM-treated females and we compared by RT-qPCR their respective transcription levels in the lungs of the different groups of animals. Among these genes, several were also significantly modulated between IVM- and saline-treated infected males including *Tnfrsf10b*, *Sfrp4*, *Epha2*, *Gnai1*, *Hgf*, and *Fos*. Others presented a similar regulation in males compared to females (from KEGG and GO enrichments) although their modulation was not invariably significant: *Casp3*, *Plcb1*, *Chrna7*, *Chrn4*, *Adra1d*, *Grin2d/Nmdar2d*, *Grid1*, *Gabbr1*, *Pik3r5*, *Igf1r*, *Wnt11*, *Wnt3a*, *Il-2*, *Il-2ra*, *Prkg1*, *Krt4*, *Creb5*, and *Ager*. The modulation of these targets, together with other genes from relevant inflammatory mediators taken from the literature (Boudewijns et al, 2020; Hoagland et al, 2020) (*Il-6*, *Il-10*, *Il-1 β* , *Tnf- α* , *Ifn- β* , *Ifn- λ* , *Ifn- γ* , *Tgf- β* , *Cxcl10*, *Ccl5*, and *Mx2*), was confirmed by RT-qPCR (Figs 2B and EV5).

IVM limited the expression of *Ifn- β* (males and females), *Ifn- λ* (females), and IFN-stimulated gene *Mx2* (males and females) in the lung of infected and IVM-treated hamsters compared to infected and saline-treated hamsters. In contrast, saline-treated hamsters presented an increased expression of *Ifn- β* , *Ifn- λ* , and *Mx2* compared to non-infected hamsters (males and females). This is expected as type I and III IFN signaling pathways have already been shown to correlate with lung pathology severity in SARS-CoV-2-infected hamsters, possibly resulting from a STAT2-dependent response (Boudewijns et al, 2020). In contrast, type I and III IFNs are differently expressed in the nasal turbinates, where *Ifn- λ* is upregulated in treated males (Fig 1F). This difference between upper and lower airways may be explained by two factors: (i) the specificity of *Ifn- λ* in the nasal cavity and (ii) the response of the nasal cavity to SARS-CoV-2 infection (Okamoto et al, 2021).

effect may be related to a modulation of *Tnf- α* in the lung (downregulation of *Tnf- α* in sexes, and *Il-6* in females) associated with *Tnf- α* reduction and better clinical presentation features caused by the IVM treatment in avirus infection, where mice were infected (McElvaney et al, 2021). Additionally, differently from the *Il-6/Il-10* ratio in the lung of IVM-treated hamsters than in non-treated animals (Fig 2B), we comparatively better clinical presentation. *Il-6/Il-10* ratios were detected in hamsters who did not require intensive care (McElvaney et al, 2020b).

IVM increases the infiltration of monocytes and promotes M2 polarization in the lung of SARS-CoV-2-infected hamsters

To assess directly lung pathology in infected hamsters, we performed histopathological analyses. The lungs of saline-treated hamsters exhibited substantial pathology including edema, congestion, microhemorrhages, alveolar septal thickening, and hyaline membranes, in line with previous reports (Chan et al, 2020). In contrast, the lungs of SARS-CoV-2-infected hamsters exhibited reduced degrees of pathology, yet with greater amounts of mononuclear cells (Fig 3A). SARS-CoV-2 infection caused a shift in the macrophage population towards M2 polarization in the lung of IVM-treated hamsters, this

treated animals, along with the reduction of key M1 pro-inflammatory mediators, such as *Il-6*, *Tnf- α* , and *Cxcl10* (Fig 2B), in similar ways as observed in other viral infections (Sang *et al.*, 2015).

Whereas few Iba1⁺ cells were observed in mock-infected animals, most likely resident interstitial and alveolar macrophages, we observed a large number of Iba1⁺ myeloid cells in the lungs of IVM-treated animals (Fig 3B). No distinguishable differences were observed in neutrophils population (Ly-6G⁺) between saline-treated and IVM-treated animals (Fig 3B). Part of these Iba1⁺ cells were also Arg1⁺ cells (Fig 3B), a marker of M2-polarized macrophages. IVM treatment was associated with an increase of both Iba1⁺ and Arg1⁺ cells in the lungs of SARS-CoV-2-infected male hamsters (Fig 3C). In contrast, in females, while infection promoted an increase of both Iba1⁺ and Arg1⁺ cells (Fig 3C), IVM had no impact on the recruitment of these cells. Additionally, RNA-seq analyses in the lung identified the upregulation of key M2-related genes (*Arg1*, *Cd209a/DC-SIGN*, *Clec7a/Dectin-1*, and *Myc/c-Myc*) along with classical M1 markers (*Cd86* and *Cd38*; Fig 3D), giving additional support to the M2 polarization tendency caused by the IVM treatment.

Conclusions

Our results demonstrate that IVM improves clinical outcome in SARS-CoV-2-infected animals and is associated with a reduced inflammatory status, but with no impact of SARS-CoV-2 loads in the upper and lower respiratory tracts. Thus, in hamsters, as in humans (preprint: Cereda *et al.*, 2020; Hasanoglu *et al.*, 2021), symptomatology and therefore the severity of SARS-CoV-2 infection is not strictly correlated with viral load. The main effect of IVM in the lungs is on type I and III IFN responses and other related signaling pathways including phospholipases, kinases, and adenylate cyclases, which are important therapeutic targets (Melotti *et al.*, 2014; Raker *et al.*, 2016; Hu *et al.*, 2020; Li *et al.*, 2020; preprint: Masood *et al.*, 2020; Isidori *et al.*, 2021), and this translates clinically into an improved clinical score.

The results presented herein are consistent with a role of type I and III IFN responses in the pathogenesis of SARS-CoV-2-associated lung disease in hamsters. They show that IVM administration limits IFN response and lung inflammation, even though defects in the type I IFN pathways have been associated with severe COVID-19 (Bastard *et al.*, 2020; Zhang *et al.*, 2020a). This result may suggest that while IFN signaling is crucial to control viral replication and prevent severe disease, in infected hamsters, which only develop a moderate disease, IFN signaling may actually increase tissue damage and associated signs such as anorexia. This is consistent

with our previous findings (Zhang *et al.*, 2020b; Zhang *et al.*, 2021) and to be potentially beneficial on patients. Along the same line, we noticed that IVM treatment increased the gene *Nfe2l2* in the lungs of female hamster (Dataset EV1), which gives additional evidence of upstream activity of IVM during SARS-CoV-2 infection. Our data show that these effects are comparable in the upper and lower respiratory tracts of hamsters treated with IVM.

Considerable sex differences are observed in the presentation, inflammatory profile, and treatment response in the lungs of hamsters, as seen in COVID-19 in humans (men tend to develop more severe disease (Zhou *et al.*, 2020; Takahashi *et al.*, 2020), possibly involving estrogen signaling (vom Steeg & Klein, 2019; Samuelsen *et al.*, 2020). Interestingly, sex steroids, here females, influence both the course of COVID-19 in humans and the effect of IVM, possibly due to the potentiation of females, such as nAChRs (Krause *et al.*, 2019) and GlyRs (Van Den Eynden *et al.*, 2009; Cerda *et al.*, 2020). IVM is a positive allosteric modulator.

Moreover, the data presented herein are consistent with those reported in human clinical trials with IVM. In humans, IVM is widely used as anti-helminth at therapeutic doses (150–400 $\mu\text{g}/\text{kg}$) (Guzzetti *et al.*, 2020), in the range of those used in our hamster experimental model. In clinical trials on COVID-19 using IVM, IVM has been associated with reduction of symptoms and disease severity (preprint: Hill *et al.*, 2020). Interestingly, in a long-term care facility, hamsters received IVM to control a scabies outbreak. In humans, COVID-19 was observed (Bernigaud *et al.*, 2020). IVM has been administered to hospitalized COVID-19 patients, with the following outcomes: one study related no efficacy of IVM (8–18 days after symptom onset) in patients treated in combination with other drugs (azithromycin, tocilizumab, steroids) (Zhang *et al.*, 2020b) whereas another study reported lower mortality in COVID-19 patients treated with IVM in addition to standard care (hydroxychloroquine, azithromycin, or both) (Zhang *et al.*, 2020a). Importantly, in a study that administered IVM after symptom onset, the authors noticed an improvement in anosmia/hyposmia in the IVM group with respect to the placebo group (positivity between IVM and placebo group).

The presently available data support the use of IVM in COVID-19 patients, suggesting that IVM is a potential

(Lifschitz *et al*, 2000), simulations using a minimal physiologically based pharmacokinetic (mPBPK) model revealed that the lungs would be exposed to IVM concentrations 2.7× greater than those found in the plasma (Jermain *et al*, 2020). Yet, this dose did not suffice to achieve the range of antiviral concentrations reported *in vitro* (Caly *et al*, 2020).

Consequently, considering the results observed in the golden hamster model, IVM may be considered as a therapeutic agent against COVID-19, which would not strongly affect SARS-CoV-2 replication but limit the pathophysiological consequences of the infection *in vivo*, potentially mediated by type I and III IFN responses and several other related signaling pathways, and a favorable M1/M2 myeloid cells ratio in the lungs. A characteristic modulation of the immune response in the lower airways was observed in IVM-treated hamsters characterized by a transcriptomic profile similar to that observed in humans exhibiting less severe symptoms and a better prognosis (preprint: Masood *et al*, 2020; McElvaney *et al*, 2020b). Our data are consistent with the hypothesis that this effect is mediated by the cholinergic anti-inflammatory action of IVM on the vagus nerve reflex (Changeux *et al*, 2020; Tizabi *et al*, 2020), that should be addressed experimentally. In particular, the precise contribution of the nAChR in IVM action should be elucidated in comparison with that of other possible IVM targets (Zemkova *et al*, 2014). Altogether, this study brings the proof of concept that an IVM-based immunomodulatory therapy improves the clinical condition of SARS-CoV-2-infected hamsters, and in clinical trials, it alleviates symptoms of COVID-19 in humans and possibly limits post-COVID-19 syndrome (also known as long COVID) via an anti-inflammatory action.

Materials and Methods

Ethics

All animal experiments were performed according to the French legislation and in compliance with the European Communities Council Directives (2010/63/UE, French Law 2013–118, February 6, 2013) and according to the regulations of Pasteur Institute Animal Care Committees. The Animal Experimentation Ethics Committee (CETEA 89) of the Institut Pasteur approved this study (200023; APAFIS#25326-2020050617114340 v2) before experiments were initiated. Hamsters were housed by groups of 4 animals in isolators and manipulated in class III safety cabinets in the Pasteur Institute animal facilities accredited by the French Ministry of Agriculture for

SARS-CoV-2 model and ivermectin treatm

Male and female Syrian hamsters (*Mesocricetus auratus*) of 5–6 weeks of age (average purchased from Janvier Laboratories and maintained under pathogen-free conditions. The animals were housed in isolators in a Biosafety level-3 facility with access to water and food. Before manipulation, animals underwent an acclimation period of 1 week.

Animals were anesthetized with an intraperitoneal injection of 200 mg/kg ketamine (Imalgene 1000, Merck) and received one single intraperitoneal injection of 200 µl of freshly diluted ivermectin (Ivermectin 1885, classical anti-parasitic dose of 400 µg/kg) or 100–200 µg/kg for the dose–response study. Control animals received one single subcutaneous injection of physiological solution. 100 µl of physiological solution containing 6×10^4 PFU of SARS-CoV-2 was then administered to each animal (50 µl/nostril). Mock-infected animals received physiological solution only.

Infected and mock-infected animals were housed in isolators, and all hamsters were followed up daily. The clinical score which the body weight and the clinical score was based on a cumulative score of movements, apathy, and absence of exploration.

At day 3 post-infection (dpi), animals were tested to assess olfaction as previously described (de Melo *et al*, 2021). Briefly, 24 h before the test, animals were fasted and then individually placed into a cage (20 × 20 cm) with clean standard bedding for 10 min. Then, 20 g of cereals were hidden in 1.5 cm bedding in the cage. The tested hamsters were then placed in the cage and the latency to find the food (defined as the time from the start of digging) was recorded using a chronometer. The test was carried out during a 15-min period. As soon as the hamsters were removed from the cage. Olfaction was performed the same test but with visible food placed on the bedding. The tests were performed in a Biosafety level-3 facility that were specially designed for this purpose.

At 4 dpi, animals were euthanized with a lethal dose of ketamine and xylazine and exsanguinated. Samples of nasal turbinates and lungs were collected and immediately frozen at -80°C . Fragments of lung tissue were fixed in 10% neutral buffered formalin.

(QuantStudio 6 Flex, Applied Biosystems). Briefly, 2.5 μ l of cDNA (12.5 ng) was added to 7.5 μ l of a master mix containing 5 μ l of Power SYBR Green Mix (4367659, Applied Biosystems) and 2.5 μ l of nuclease-free water with nCoV_IP2 primers (nCoV_IP2-12669Fw: 5'-ATGAGCTTAGTCCTGTTG-3'; nCoV_IP2-12759Rv: 5'-CTCCCTTTGT TGTGTTGT-3') at a final concentration of 1 μ M (WHO, 2020). The amplification conditions were as follows: 95°C for 10 min, 45 cycles of 95°C for 15 s and 60°C for 1 min; followed by a melt curve, from 60 to 95°C. Viral load quantification of hamster tissues was assessed by linear regression using a standard curve of eight known quantities of plasmids containing the *RdRp* sequence (ranging from 10⁷ to 10⁰ copies). The threshold of detection was established as 200 viral copies/ μ g of RNA. The Golden hamster gene targets were selected for quantifying host inflammatory mediator transcripts in the tissues using the *Hprt* (hypoxanthine phosphoribosyltransferase), the γ -actin, and/or the actinB genes as reference (Appendix Table S1). Variations in gene expression were calculated as the *n*-fold change in expression in the tissues from the infected hamsters compared with the tissues of the uninfected ones using the 2^{- $\Delta\Delta$ C_t} method (Pfaffl, 2001).

Droplet digital PCR (ddPCR)

Reverse transcription

200 ng of RNA was reverse-transcribed using iScript Advanced cDNA Synthesis kit for RT-qPCR (1702537, Bio-Rad) according to the manufacturer's specifications.

Quantitative PCR for γ -actin and *Hprt* reference genes

Real-time PCR was performed in a CFX96 qPCR machine (Bio-Rad). All samples were measured in duplicate. The 10 μ l PCR included 0.8 ng of cDNA, 1 \times PowerUp PCR master mix (A25742, Applied Biosystems), and 0.5 μ M of each primer (Appendix Table S1). The reactions were incubated in a 96-well optical plate at 95°C for 2 min, followed by 40 cycles of 95°C for 15 s and 60°C for 1 min.

Droplet digital PCR

ddPCRs were performed on the QX200 Droplet Digital PCR system according to the manufacturer's instructions (Bio-Rad). Briefly, reaction mixture consisted in 10 μ l ddPCR Supermix for probe no dUTP (1863023, Bio-Rad), 0.25–1 ng of cDNA, primers and probes for E/IP4 and N/nsp13 duplex reactions used at concentration listed in Appendix Table S2 in a final volume of 20 μ l. PCR amplification was conducted in a iCycler PCR instrument (Bio-Rad) with the following condition: 95°C for 10 min, 40 cycles of 94°C for 30 s with a ramping

(15140148, Thermo Fisher) in Lysing (116923050-CF, MP Biomedicals) using (MP Biomedicals) and the following scheme: 4°C during 20 s, incubation at 4°C during 20 s, nization at 4.0 m/s during 20 s. The tube was centrifuged at 10,000 g during 1 min at 4°C, and the supernatant was used to infect Vero-E6 cells by classical plaque assays (Avicel, RC581-NFDR080I, DuPont) (Baer

Transcriptomics analysis in golden hamster

RNA preparation was used to construct cDNA libraries according to the manufacturer's instructions using the Illumina Stranded mRNA sample prep kit. The Illumina HiSeq 2500 sequencer was used to sequence libraries. The analysis was performed with the Sequana framework (https://github.com/sequana/sequana_rnaseq). We used the RNA-seq pipeline (v0.9.16), with Snakemake 5.8.1 (Köster & Rahmann, 2012) from adapters using Cutadapt 2.10 (Martin, 2011) to the golden hamster MesAur1.0 genome using STAR 2.7.3a (Dobin *et al*, 2012). FeatureCounts (Liao *et al*, 2014) was used to produce the count matrix. Quality control statistics were performed using MultiQC 1.8 (Ewels *et al*, 2016). Differential expression analysis was performed using DESeq2 (Love *et al*, 2014) scripts based on SARToolbox (Love *et al*, 2014) indicating the significance (Benjamini–Hochberg false discovery rate FDR < 0.05) and the effect size (Cohen's d) for each comparison. Finally, enrichment analysis was performed using modules from Sequana, first by converting IDs to gene names and then using human and KEGG pathways. The GO enrichment analysis was performed using GSEApy (Mi *et al*, 2019) and QuickGO (Huntley *et al*, 2000). KEGG pathways enrichment uses gseapy (Huntley *et al*, 2019), EnrichR (Chen *et al*, 2013), and BioMart services. All programming and web services were performed via BioService

Histopathology

incubating sections for 20min in citrate buffer pH 6.0 (C-9999, Sigma-Aldrich) at 96°C for 20 min. Sections were then blocked in PBS supplemented with 10% goat serum, 4% fetal calf serum, and 0.4% Triton X-100 for 2 h at room temperature, followed by overnight incubation at 4°C with primary antibodies: rat anti-Ly6G (1/100, 551459, BD-Biosciences), chicken anti-Iba1 (1/500, 234006, Synaptic Systems), rabbit anti-Arg1 (1/250, PA5-29645, Invitrogen), and rabbit anti-SARS-CoV nucleoprotein (1/500, provided by Dr Nicolas Escriou, Institut Pasteur, Paris). After rinsing, slides were incubated with the appropriate secondary antibodies (1/500: goat anti-rat Alexa Fluor 546, A11081, Invitrogen; goat anti-rabbit Alexa Fluor 488, A11034, Invitrogen; goat anti-chicken Alexa Fluor 647, A32933, Invitrogen) for 2 h at room temperature. All sections were then counterstained with Hoechst (H3570, Invitrogen), rinsed thoroughly in PBS, and mounted in Fluoromount-G (15586276, Invitrogen) before observation with a Zeiss LM 710 inverted confocal microscope through a Plan Aplanachromat 20x/0.8 Ph2 M27 lens. Cell quantification was performed in an automated manner using ImageJ. Single-channel images were extracted, thresholded, and converted to binary images. Cells were then counted using the *Particles Analyzer* ImageJ plug-in.

Statistics

Statistical analysis was performed using Prism software (GraphPad, version 9.0.0, San Diego, USA), with $P < 0.05$ considered significant. Quantitative data were compared across groups using log-rank test or two-tailed Mann–Whitney test. Randomization and blinding were not possible due to pre-defined housing conditions (separated isolators between infected and non-infected animals). *Ex vivo* analysis was blinded (coded samples). All animals were included, and data were provided from 2 replications, except food finding in males, that were replicated 3 times.

Data availability

The datasets produced in this study are available in the following databases: RNA-seq: ArrayExpress E-MTAB-10128 (<https://www.ebi.ac.uk/arrayexpress/experiments/E-MTAB-10128/>).

Expanded View for this article is available online.

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The paper explained

Problem

The current pandemic of COVID-19 has caused deaths and more than 150 million laborator wide since December 2019 (as of May 20: SARS-CoV-2, commonly brings about upper symptoms and in severe cases can lead to death. Different therapeutic approaches have this disease but comprehensive therapeutic s

Results

We report that ivermectin, used at the standard 400 µg/kg, protects infected hamsters from and from losing the sense of smell during : treated animals exhibited a specific inflammation: a reduced type I/III interferon stimulation and intracellular signaling pathways, with an increased *Il-6/Il-10* ratio and promoting M2 polarization recruited to the lung. These effects are similar with treated females exhibiting the best outcome. Ivermectin treatment did not limit viral replication: treated animals presented similar amounts of cavity and in the lungs.

Impact

The results of this study establish that irreversible symptoms and severity of COVID-19 highlighted by host inflammatory response in COVID-19 that reduced type I/III interferon and *Il-6/Il-1* macrophages might account for a more favorable outcome, contributing to a better understanding of the disease. Ivermectin might then be considered an agent against COVID-19 with no impact on but alleviating inflammation and ensuing symptoms.

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Author contributions

JPC and HB conceived the experimental hypothesis and designed the experiments. GDM, FLaz, FLar, LF, LK performed the experiments. GDM, FLaz, FLar, LF, EK, SL, AM, and JPC analyzed the data. GDM, J-PC, and HB wrote the manuscript.

Conflict of interests

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