

*in vitro* antiviral potential of FDA-approved drugs, viz., ribavirin, penciclovir, nitazoxanide, nafamostat, and chloroquine, tested in comparison to remdesivir and favipiravir (broad-spectrum antiviral drugs) revealed remdesivir and chloroquine to be highly effective against SARS-CoV-2 infection *in vitro* (194). Ribavirin, penciclovir, and favipiravir might not possess noteworthy *in vivo* antiviral actions for SARS-CoV-2, since higher concentrations of these nucleoside analogs are needed *in vitro* to lessen the viral infection. Both remdesivir and chloroquine are being used in humans to treat other diseases, and such safer drugs can be explored for assessing their effectiveness in COVID-19 patients.

Several therapeutic agents, such as lopinavir/ritonavir, chloroquine, and hydroxychloroquine, have been proposed for the clinical management of COVID-19 (299). A molecular docking study, conducted in the RNA-dependent RNA polymerase (RdRp) of SARS-CoV-2 using different commercially available antiparasmodial drugs, identified that drugs such as ribavirin, remdesivir, galidesivir, tenofovir, and sofosbuvir bind RdRp tightly, indicating their potential to be used against COVID-19 (305). A broad-spectrum antiviral drug that was developed in the United States, tilorone dihydrochloride (tilorone),