

Global spotlight 26.1: Key additions for February 2023



There is one newly added evidence syntheses and one update to a living evidence synthesis already included in the public-health measures part of the COVID-END inventory of ‘best’ evidence syntheses*, eight updates to living evidence syntheses already included in the clinical management parts of the inventory, and one newly added evidence syntheses to the health-systems arrangements part of the inventory.

**COVID-END assigns ‘best’ status to evidence syntheses based on an assessment of how up-to-date they are (i.e., the date of the last search, with priority given to living reviews), quality (using the AMSTAR tool), and whether there is an evidence profile available (e.g., GRADE).*

Taxonomy section	Title	Type of synthesis	Criteria for best evidence synthesis		
			Date of last search	Quality (AMSTAR) rating	Evidence profile (e.g., GRADE) available
Public-health measures	While patients with HIV were found to have lower seroconversion rates after COVID-19 vaccination, the impact of underlying HIV infection in the immune response against COVID-19 is uncertain [Review of studies with important heterogeneity among its findings]	Newly added full review	2022-03-31	7/11	No
Public-health measures	[Moderna vaccine against variants of concern] Two doses of Moderna [mRNA-1723] vaccine may not reach the threshold for protection against infection from the Omicron variant of concern in children aged 0 to 4 years and adolescents aged 12 to 17 years	Update to living rapid review	2023-02-20	8/9	Yes
Clinical management of COVID-19 and pandemic-related health issues	[Bromhexine hydrochloride] Using bromhexine in individuals that have been exposed to COVID-19 may reduce symptomatic infections, while its effects on other outcomes are currently uncertain	Update to living rapid review	2023-01-30	7/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	[Corticosteroids] Low- or moderate-dose treatment with corticosteroids reduces mortality and probably reduces the need for invasive mechanical ventilation in severe COVID-19 patients, while higher-doses are probably not more effective than standard-dose schemes; they may not increase the risk of severe adverse events	Update to living rapid review	2023-01-30	7/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	[Fluvoxamine] Among COVID-19 patients with mild disease, fluvoxamine probably does not have an effect on hospitalizations and symptom resolution, while it may not increase adverse events	Update to living rapid review	2023-01-30	7/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	[Hydroxychloroquine] Hydroxychloroquine may not have an effect on reducing the risk of infection and hospitalizations in individuals exposed to COVID-19	Update to living rapid review	2023-01-30	7/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	[Hydroxychloroquine] Using hydroxychloroquine probably increases mortality, and it probably does not have an effect on invasive mechanical ventilation and time to symptom resolution among COVID-19 patients	Update to living rapid review	2023-01-30	7/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	[Oral remdesivir (vv116) vs nirmatrelvir/ritonavir] Oral remdesivir has similar effects to nirmatrelvir/ritonavir in symptom resolution, while its effects on other outcomes are currently uncertain	Update to living rapid review	2023-01-30	7/11	Yes

Clinical management of COVID-19 and pandemic-related health issues	[Spirulin] The effects of using spirulin to treat COVID-19 patients are currently uncertain	Update to living rapid review	2023-01-30	7/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	Convalescent plasma does not reduce mortality and has little or no difference in clinical improvement in patients with moderate to severe COVID-19, whereas it probably does not increase the incidence of serious adverse events; in mild COVID-19 patients, it may not have an effect on symptom resolution and hospitalization	Update to living review	2022-03-03	11/11	Yes
Health-system arrangements	Using telerehabilitation in patients who have COVID-19 or who have recovered from an infection may be effective in reducing dyspnea, recovering muscle strength, increasing ambulation capacity and reducing depression, while it may not have effects in long-term outcomes [Review of studies of mainly low quality and important heterogeneity in some of its outcomes]	Newly added living review	2022-04-30	8/11	No