

## Global spotlight 14.2: Key additions for the second half of February 2022



There are two newly added syntheses and one update to a living evidence synthesis that is already included in the public-health measures parts of the COVID-END inventory of ‘best’ evidence syntheses\*, one newly added synthesis and 18 updates to living evidence syntheses that are already included in the clinical management parts of the inventory, one update to a living evidence synthesis that is already included in the health-system arrangement part of the inventory, and two updates to living evidence syntheses that are already included in the economic and social responses 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	<a href="#">In adolescents aged 12 to 15, one or two doses of the Pfizer vaccine may prevent infection, including against the Delta variant of concern; two doses of the Pfizer vaccine may also prevent ICU admissions and MIS-C from the Delta variant of concern</a>	Newly added living rapid review	2022-01-31	5/9	Yes
Public-health measures	<a href="#">Vaccine protection against hospitalization and death from a full two-dose schedule appears stable up to seven months, which seems to be consistent in response to the Delta variant; vaccine protection against COVID-19 infection appears to decrease at seven months after a full two-dose schedule [Review of studies of moderate quality and important heterogeneity among some of their findings]</a>	Newly added living rapid review	2021-11-19	6/10	No
Public-health measures	<a href="#">A full dose of AstraZeneca, Pfizer, Moderna, or Johnson&amp;Johnson vaccines may prevent household transmission after 14 days of vaccination, and that they may significantly reduce asymptomatic transmission and viral load [Review of experimental and observational studies of variable quality]</a>	Update to living rapid review	2021-08-23	6/9	No
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">Inconsistent estimates of the impact of the COVID-19 pandemic on suicide rates have been reported across studies and across low-and-middle income countries [Review of studies of mainly low quality]</a>	Newly added living review	2021-08-04	7/10	No
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">Among patients hospitalized with COVID-19, intravenous immunoglobulin may importantly reduce disease progression and it may slightly increase adverse events; the effects on other outcomes are uncertain</a>	Update to living review	2022-02-18	10/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Anakinra] In hospitalized COVID-19 patients, anakinra may slightly reduce mortality, while it probably slightly reduce disease progression and clinical improvement; it may not increase serious adverse events</a>	Update to living review	2022-02-18	10/11	Yes
Clinical management of COVID-19 and	<a href="#">[Auxora] The effects of using Auxora in hospitalized COVID-19 patients are currently</a>	Update to living review	2022-02-18	10/11	Yes

<p>pandemic-related health issues</p>	<p><a href="#">uncertain, while it may not increase severe adverse events</a></p>				
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">[Bamlanivimab] In hospitalized COVID-19 patients, bamlanivimab may make little or no difference in mortality and disease progression, and it probably does not increase clinical improvement; it may not increase the risk of serious adverse events for outpatients and hospitalized patients, while its effects on other outcomes for outpatients are uncertain</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>10/11</p>	<p>Yes</p>
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">[Colchicine] In hospitalized patients, colchicine probably makes little or no difference in mortality at 28 days and clinical improvement, while it may reduce disease progression and it may increase adverse events; in outpatients, it may make little or no different in mortality and hospitalization or death, while it probably does not increase serious adverse events</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>10/11</p>	<p>Yes</p>
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">[Dexamethasone vs tocilizumab] The effects of using either tocilizumab or dexamethasone to treat hospitalized COVID-19 patients are currently uncertain</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>10/11</p>	<p>Yes</p>
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">[Discontinuing ARB/ACEI treatments among hospitalized COVID-19 patients may increase clinical improvement, compared to continuing ARB/ACEI treatment; its effects on other outcomes are uncertain</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>10/11</p>	<p>Yes</p>
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">[Favipiravir] In COVID-19 hospitalized patients, favipiravir may make little or no difference in mortality, clinical improvement and disease progression; its safety outcomes and effects on outpatients are uncertain</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>10/11</p>	<p>Yes</p>
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">[Fluvoxamine] Using fluvoxamine among COVID-19 outpatients may slightly reduce mortality; its effects on other outcomes are uncertain</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>6/9</p>	<p>Yes</p>
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">In hospitalized patients, adding convalescent plasma to standard care may not have an effect on mortality at 28 days and disease progression, while it probably does not have an effect on clinical improvement, and it probably increases serious adverse events; in outpatients, convalescent plasma may slightly reduce hospitalization or death and may not increase adverse events, while its effects on other outcomes are uncertain</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>10/11</p>	<p>Yes</p>
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">[Levamisole] The effects of using levamisole to treat COVID-19 outpatients are currently uncertain</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>10/11</p>	<p>Yes</p>
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">[Nafamostat] In COVID-19 hospitalized patients, nafamostat may slightly reduce mortality and it may increase adverse events; its effects on other outcomes are uncertain</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>10/11</p>	<p>Yes</p>
<p>Clinical management of COVID-19 and pandemic-related health issues</p>	<p><a href="#">[REGEN-COV2] In hospitalized COVID-19 patients, REGEN-COV2 (casirimab + imdevimab) may slightly reduce mortality, it probably slightly reduce disease progression, and it may increase clinical improvement; in outpatients, it may slightly reduce hospitalization or death and</a></p>	<p>Update to living review</p>	<p>2022-02-18</p>	<p>10/11</p>	<p>Yes</p>

	<a href="#">it may not increase serious adverse events, while its effects on other outcomes are uncertain</a>				
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Remdesivir] In hospitalized COVID-19 patients, remdesivir probably makes little or no difference in mortality at 28 days, it may slightly increase clinical improvement and it may reduce disease progression; it may not increase the incidence of any adverse event</a>	Update to living review	2022-02-18	10/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Sarilumab] Using sarilumab for hospitalized COVID-19 patients may slightly reduce mortality, it may make little or no difference in clinical improvement and may not have an effect on disease progression; it may also slightly increase adverse events</a>	Update to living review	2022-02-18	10/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Sofosbuvir/daclatasvir] Among hospitalized COVID-19 patients, using sofosbuvir/daclatasvir may produce little or no difference in the incidence of clinical improvement, and may not increase the adverse events; its effects on other outcomes are uncertain</a>	Update to living review	2022-02-18	10/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Tocilizumab vs dexamethasone] See comparison under corticosteroids/ dexamethasone vs tocilizumab</a>	Update to living review	2022-02-18	10/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Umifenovir] The benefits of adding umifenovir to standard care are uncertain, while it may slightly increase adverse events</a>	Update to living review	2022-02-18	10/11	Yes
Health-system arrangements	<a href="#">Twenty international care models have been found to treat long COVID-19 symptoms, with the five most common principles being multidisciplinary teams, integrated care, continuity or coordination of care, self-management and evidence-based care; no evidence on the impact or costs of these models have been found</a>	Update to living review	2021-10-07	6/9	No
Economic and social responses	<a href="#">The risk of transmission of COVID-19 within post-secondary institutions and the effects of strategies to mitigate on-campus outbreaks are currently uncertain, while variable reports have been found for test positivity among students and/or faculty and staff</a>	Update to living rapid review	2022-01-03	8/10	No
Economic and social responses	<a href="#">Insufficient evidence was found on the risks of COVID-19 transmission in schools, but some indication that there is a lower infection attack rate among students compared to school staff, although the infection attack rate among students has increased compared to the previous update [Review of observational studies with important heterogeneity among some of their outcomes]</a>	Update to living review	2021-03-05	9/11	No