

## Global spotlight 19.1: Key additions for the first half of July 2022



There are one new living evidence synthesis (addressing three different molecules) and one non-living evidence synthesis included in the clinical management part of the COVID-END inventory of ‘best’ evidence syntheses\*. Additionally, there are two updates to living evidence syntheses that are already included in the clinical management 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
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">Evidence shows a high prevalence of postpartum depression in women during the COVID-19 pandemic [Review of studies of unknown quality and high heterogeneity among its findings]</a>	Newly added full review	2021-08-31	6/11	No
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Bamlanivimab] Using bamlanivimab in people with undefined or potential exposure to SARS-CoV-2 probably decreases infection within 30 days, and it may make little or no difference in mortality; it may slightly increase the frequency of serious adverse events</a>	Newly added living review	2022-04-27	11/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Casirivimab + imdevimab] Using casirivimab-imdevimab in people with undefined or potential exposure to SARS-CoV-2 may substantially decrease infection, and the development of symptoms within 6 months, while it may increase the frequency of all-grade adverse events; used as post-exposure prophylaxis, casirivimab + imdevimab decreases infection and the development of symptoms, while it may make little or no difference in mortality and hospital admissions</a>	Newly added living review	2022-04-27	11/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Cilgavimab + tixagevimab] Using tixagevimab-cilgavimab in people with undefined or potential exposure to SARS-CoV-2 probably decrease infection, and it decreases the development of symptoms within 6 months, while it may make little or no difference in mortality; it may not increase serious adverse events</a>	Newly added living review	2022-04-27	11/11	Yes
Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Sarilumab] Using sarilumab for hospitalized COVID-19 patients may make little or no difference in mortality and clinical improvement, while it may slightly increase adverse events</a>	Update to living review	2022-07-08	10/11	Yes

Clinical management of COVID-19 and pandemic-related health issues	<a href="#">[Tocilizumab] Among hospitalized patients, tocilizumab reduces mortality at 28 days, slightly increases the incidence of clinical improvement, and may slightly reduce disease progression; it probably makes little or no difference in the incidence of adverse events</a>	Update to living review	2022-07-08	10/11	Yes
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