

Covid-19 Evidence Update

Summarized and appraised resources

29/10/2021

The following resources are available via electronically or in print. Please follow links to access full text online, or contact the library if you have any difficulties with the links.

The resources included in this update are summaries or critically appraised articles. If you would like a more specific search conducted please email kgh-tr.library.service@nhs.net

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Royal College/Society Guidance and Point of Care Tools

Latest information and guidance

<p>NICE</p> <p>COVID-19 rapid guideline: managing COVID-19 (NG191) Published 23/03/2021 Last updated 10/08/2021</p> <p>Rapid guidelines and evidence summaries</p> <p>Speciality guides (NHS England and NHS Improvement advice has moved here)</p>	<p>NHS England and NHS Improvement Secondary care (Includes Prevention, Infection control, Assessment, Management, Discharge, Isolation, Estates and facilities, Finance, Workforce, Cancer ...)</p>
<p>Royal College of Emergency Medicine Covid-19 resources</p>	<p>Association for Palliative Medicine Covid 19 and Palliative, End of Life and Bereavement Care</p>
<p>Royal College of General Practitioners COVID-19</p>	<p>Royal College of Obstetrics & Gynaecologists Coronavirus (COVID-19), pregnancy and women's health</p>
<p>Royal College of Paediatrics and Child Health Key topics COVID 19</p>	<p>Royal College of Pathologists COVID-19 Resources Hub</p>
<p>Royal College of Psychiatrists COVID-19: Community mental health settings</p>	<p>Royal College of Surgeons COVID 19 Information Hub</p>
<p>Royal Pharmaceutical Society COVID-19</p>	<p>British Society of Echocardiography COVID-19 clinical guidance</p>
<p>British Society of Gastroenterology COVID 19 updates</p>	<p>British Society for Haematology COVID-19 Updates</p>

British Society for Rheumatology COVID-19 updates for members	Combined Intensive Care Society, Association of Anaesthetists, Royal College of Anaesthetists, Faculty of Intensive Care Medicine guidance Clinical Guidance
BMJ Best Practice Coronavirus disease 2019 (COVID-19) Management of coexisting conditions in the context of COVID-19	DynaMed Covid 19 (Novel Coronavirus) Covid-19 and Pediatric Patients Covid 19 and Special Populations Covid-19 and Patients with Cancer Covid-19 and Cardiovascular Disease Patients Covid-19 and Patients with Chronic Kidney Disease and End-stage renal Disease Covid-19 and Pregnant Patients Covid-19-associated Coagulopathy
Don't forget the bubbles An evidence summary of paediatric Covid-19 literature Covid-19 – a seslection of evidence based summaries and articles.	

New Guidance and Reports

NICE

[COVID-19 rapid guideline: managing COVID-19.](#)

National Institute for Health and Care Excellence (NICE); 2021.

<https://www.nice.org.uk/guidance/ng191>

[In October, NICE updated existing recommendations on tocilizumab and sarilumab. This guideline covers the management of COVID-19 for children, young people and adults in all care settings. It brings together our existing recommendations on managing COVID-19, and new recommendations on therapeutics, so that healthcare staff and those planning and delivering services can find and use them more easily.]

Freely available online

On **27 October**, we updated existing recommendations on tocilizumab and sarilumab.

Other

[Acute flaccid paralysis: clinical management guidance.](#)

UK Health Security Agency (UKHSA); 2021.

<https://www.gov.uk/government/publications/acute-flaccid-paralysis-clinical-management-guidance/>

[Information on the clinical management of acute flaccid paralysis (AFP) and acute flaccid myelitis (AFM), for use by healthcare professionals.]

Freely available online

[Acute flaccid paralysis: investigating and reporting a case.](#)

UK Health Security Agency (UKHSA); 2021.

<https://www.gov.uk/government/publications/acute-flaccid-paralysis-investigating-and-reporting-a-case/>

[Information on the steps required to report and investigate a case of acute flaccid paralysis (AFP) and acute flaccid

myelitis (AFM).]

Freely available online

[COVID-19 vaccination: women of childbearing age, currently pregnant or breastfeeding.](#)

UK Health Security Agency (UKHSA); 2021.

<https://www.gov.uk/government/publications/covid-19-vaccination-women-of-childbearing-age-currently-pregnant-planning-a-pregnancy-or-breastfeeding>

[Information for all women of childbearing age, those currently pregnant or breastfeeding on coronavirus (COVID-19) vaccination. 8 October 2021: Updated 'COVID-19 vaccination: a guide on pregnancy and breastfeeding' and links to translated versions of the poster and social media cards.]

Freely available online

[Perioperative Care for People Living with Frailty Undergoing Elective and Emergency Surgery.](#)

Centre for Perioperative Care & British Geriatrics Society; 2021.

<https://www.cpop.org.uk/guidelines-resources-guidelines/perioperative-care-people-living-frailty>

[The scope of this guideline covers all aspects of perioperative care relevant to adults living with frailty undergoing elective and emergency surgery. It is written for healthcare professionals involved in delivering care throughout the pathway, as well as for patients and their carers, managers and commissioners.]

Freely available online

[Testing and procurement of transparent masks.](#)

Royal College of Speech and Language Therapists (RCSLT); 2021.

<https://www.rcslt.org/learning/covid-19/testing-and-procurement-of-transparent-masks/>

[Information on the use of transparent face masks during COVID-19, including details on the process of testing and procurement and how RCSLT members can access approved masks.]

Freely available online

[Using Tocilizumab or Sarilumab for hospitalised patients with COVID-19 who are breastfeeding.](#)

Specialist Pharmacy Service (SPS); 2021.

<https://www.sps.nhs.uk/articles/using-tocilizumab-or-sarilumab-for-hospitalised-patients-with-covid-19-who-are-breastfeeding/>

[Breastfeeding of full-term and healthy infants can continue if treatment with tocilizumab and sarilumab are required. If the infant was born prematurely, is unwell, or the mother is taking multiple medicines, the UK Drugs in Lactation Advisory Service should be contacted.]

Freely available online

[Using Tocilizumab or Sarilumab for hospitalised patients with COVID-19 who are pregnant.](#)

Specialist Pharmacy Service (SPS); 2021.

<https://www.sps.nhs.uk/articles/using-tocilizumab-or-sarilumab-for-hospitalised-patients-with-covid-19-who-are-pregnant/>

[This page signposts to current guidance on this off-label use of the two medicines from the UK Royal College of Obstetricians and Gynaecologists and UKTIS. Healthcare professionals are encouraged to contact UKTIS should they be considered for use.]

Freely available online

[Assessing the impact of COVID-19 on the clinically extremely vulnerable population.](#)

The Health Foundation; 2021.

<https://www.health.org.uk/publications/reports/assessing-the-impact-of-covid-19-on-the-clinically-extremely-vulnerable-population>

[This briefing presents analysis from the Networked Data Lab on the impact the pandemic has had on the clinically extremely vulnerable population; assesses the mental health of people identified as clinically extremely vulnerable; examines the data on access to care for clinically extremely vulnerable; assess the limitations to the use of an algorithm-driven approach to identifying the clinically extremely vulnerable population which were exacerbated by poor availability of high-quality data.]

Review articles

[Diabetes, hypertension, body mass index, smoking and COVID-19-related mortality: a systematic review and meta-analysis of observational studies.](#)

Mahamat-Saleh Y. *BMJ Open* 2021;11(10):e052777.

[Review (186 studies representing 210,447 deaths among 1,304,587 patients with COVID-19) suggests diabetes (1.54 fold), hypertension (1.42), obesity (1.45) and smoking (1.28) are associated with higher COVID-19 mortality, contributing to nearly 30% of COVID-19 deaths.]

Freely available online

[Effects of different corticosteroid therapy on severe COVID-19 patients: a meta-analysis of randomized controlled trials.](#)

Tu J. *Expert Review of Respiratory Medicine* 2021;:DOI: 10.1080/17476348.2021.1983429.

[Corticosteroid treatment did not convincingly improve survival in severe COVID-19 patients. Low-dose dexamethasone could be considered as a drug for the treatment of COVID-19 patients. More high-quality trials are needed to further verify this conclusion.]

Freely available online

[Effects of early extubation followed by noninvasive ventilation versus standard extubation on the duration of invasive mechanical ventilation in hypoxemic non-hypercapnic patients: a systematic review and individual patient data meta-analysis of randomized controlled trials.](#)

Vaschetto R. *Critical Care* 2021;:doi: 10.1186/s13054-021-03595-5.

[Usefulness of noninvasive ventilation (NIV) in weaning patients with non-hypercapnic hypoxemic acute respiratory failure (hARF) is unclear. The study aims to assess in patients with non-hypercapnic hARF, the efficacy of NIV after early extubation, compared to standard weaning.]

Freely available online

[Efficacy and safety of ivermectin for the treatment of COVID-19: a systematic review and meta-analysis.](#)

Deng J. *Quarterly Journal Of Medicine* 2021;:hcab247.

[In review of 3 observational studies and 14 RCTs, the meta-analysis of RCTs found that ivermectin did not reduce time to viral clearance, duration of hospitalisation, incidence of mortality and incidence of mechanical ventilation. Evidence quality was very low to moderate.]

Freely available online

[Mortality Risk of Antidiabetic Agents for Type 2 Diabetes With COVID-19: A Systematic Review and Meta-Analysis.](#)

Kan C. *Frontiers in Endocrinology* 2021;:doi.org/10.3389/fendo.2021.708494.

[Metformin and sulfonylurea could be associated with reduced mortality risk in patients with T2DM who have COVID-19. Furthermore, insulin use could be associated with greater mortality, while DPP-4 inhibitor use could not be. The effects of antidiabetic agents in patients with T2DM who have COVID-19 require further exploration.]

Freely available online

[Rehabilitation to enable recovery from COVID-19: a rapid systematic review.](#)

Goodwin VA. *Physiotherapy* 2021;111:4-22.

[OBJECTIVES: To establish the evidence for rehabilitation interventions tested in populations of patients admitted to ICU and critical care with severe respiratory illness, and consider whether the evidence is generalizable to patients with COVID-19.]

Freely available online

[Ruxolitinib and the Mitigation of Severe COVID-19: A Systematic Review and Meta-analysis.](#)

Quiros JR. *Infection and Chemotherapy* 2021;53(3):436-448.

[Review of 7 studies (n=168) found ruxolitinib had a higher likelihood of clinical improvement vs standard of care, but the difference was not statistically significant. Authors suggest further investigation is warranted into ruxolitinib as a treatment for severe COVID-19.]

Freely available online

[Safety and efficacy of different prophylactic anticoagulation dosing regimens in critically and non-critically ill patients with COVID-19: a systematic review and meta-analysis of randomized controlled trials.](#)

Ortega-Paz L. *European Heart Journal - Cardiovascular Pharmacotherapy* 2021;:pvab070.

[Review (7 RCTs; n=5,154) found escalated-dose prophylactic anticoagulation was associated with lower rates of VTE (2.5% vs. 4.7%; RR 0.55, 95% CI 0.41–0.74) but no benefit on other outcomes vs standard dose; and it increased risk of major bleeding (2.4% vs. 1.4%).]

Freely available online

[Use of novel antithrombotic agents for COVID-19: Systematic summary of ongoing randomized controlled trials.](#)

Talasz AH. *Journal of Thrombosis and Haemostasis : JTH* 2021;:doi: 10.1111/jth.15533.

[Some novel antithrombotic agents have pleiotropic anti-inflammatory and antiviral effects, which may help reduce the viral load or fibrosis, and improve oxygenation. Results from ongoing RCTs will elucidate their actual role in the management of patients with COVID-19.]

Freely available online

[Covid-19 Evidence Alerts from McMaster Plus](#)

COVID-19 Evidence Alerts to current best evidence for clinical care of people with threatened, suspected or confirmed COVID-19 infection. Reports are critically appraised for scientific merit, and those with acceptable scientific merit are appraised for relevance and importance by frontline clinicians. The studies listed below meet their criteria for quality. The site also lists other studies published which do not meet their criteria, or do not belong to a study category they appraise. ([More information available.](#))

Diagnosis
<u>Diagnostic performances of common nucleic acid tests for SARS-CoV-2 in hospitals and clinics: a systematic review and meta-analysis.</u> <i>Au WY, Cheung PPH Lancet Microbe</i>
<u>SARS-CoV-2 rapid antigen test in comparison to RT-PCR targeting different genes: a real-life evaluation among unselected patients in a regional hospital of Italy.</u> <i>Treggiari D, Piubelli C, Caldrea S, et al. J Med Virol</i>
<u>Evaluation of the Elecsys SARS-CoV-2 antigen assay for the detection of SARS-CoV-2 in nasopharyngeal swabs.</u> <i>Ben Abdelhanin M, Mvumbi DM, Agathine A, et al. J Clin Virol</i>
<u>Evaluation of the clinical performance of a magnetic force-assisted electrochemical immunoassay for the detection of SARS-CoV-2 antigens.</u> <i>Jo SJ, Shin SH, Kim J, et al. PLoS One</i>
<u>Natural spring water gargle and direct RT-PCR for the diagnosis of COVID-19 (COVID-SPRING study).</u> <i>Dumaresq J, Coutlee F, Dufresne PJ, et al. J Clin Virol</i>
Clinical Prediction Guide
<u>Rapid evaluation of Coronavirus Illness Severity (RECOILS) in intensive care: Development and validation of a prognostic tool for in-hospital mortality.</u> <i>Plecko D, Bennett N, Martensson J, et al. Acta Anaesthesiol Scand</i>
<u>Endothelial Activation and Stress Index (EASIX) as an Early Predictor for Mortality and Overall Survival in Hematological and Non-Hematological Patients with COVID-19: Multicenter Cohort Study.</u> <i>Kalincinska E, Biernat M, Rybka J, et al. J Clin Med</i>
<u>mNUTRIC tool is capable to predict nutritional needs and mortality early in patients suffering from severe pneumonia.</u> <i>Acehan S, Gulen M, Isikber C, et al. Clin Nutr ESPEN</i>
Etiology
Primary Prevention
<u>Effectiveness of COVID-19 vaccines against SARS-CoV-2 infection with the Delta (B.1.617.2) variant: second interim results of a living systematic review and meta-analysis, 1 January to 25 August 2021.</u> <i>Harder T, Kulper-Schiek W, Reda S, et al. Euro Surveill</i>

<p>Efficacy of a Nasal Spray Containing Iota-Carrageenan in the Postexposure Prophylaxis of COVID-19 in Hospital Personnel Dedicated to Patients Care with COVID-19 Disease. <i>Figueroa JM, Lombardo ME, Dogliotti A, et al. Int J Gen Med</i></p>
<p>Pharmacological interventions to prevent Covid-19 disease: A rapid review. <i>Cardwell K, O Murchu E, Byrne P, et al. Rev Med Virol</i></p>
<p>Prognosis</p>
<p>SARS-COV-2 infection during pregnancy and risk of preeclampsia: a systematic review and meta-analysis. <i>Conde-Agudelo A, Romero R Am J Obstet Gynecol</i></p>
<p>Timing of venous thromboembolism diagnosis in hospitalized and non-hospitalized patients with COVID-19. <i>Pasha AK, McBane RD, Chaudhary R, et al. Thromb Res</i></p>
<p>Association of pre-existing comorbidities with mortality and disease severity among 167,500 individuals with COVID-19 in Canada: A population-based cohort study. <i>Ge E, Li Y, Wu S, et al. PLoS One</i></p>
<p>Assessing relative COVID-19 mortality during the second wave: a prospective Swiss population-based study. <i>Siegfried S, Bopp M, Gunthard H, et al. BMJ Open</i></p>
<p>COVID-19 Incidence and Mortality Among Long-Term Care Facility Residents and Staff in South Carolina. <i>Resciniti NV, Fuller M, Sellner J, et al. J Am Med Dir Assoc</i></p>
<p>Incidence and Outcomes of COVID-19 in People With CKD: A Systematic Review and Meta-analysis. <i>Chung EY, Palmer SC, Natale P, et al. Am J Kidney Dis</i></p>
<p>Treatment</p>
<p>Efficacy of interferon beta-1a plus remdesivir compared with remdesivir alone in hospitalised adults with COVID-19: a double-blind, randomised, placebo-controlled, phase 3 trial. <i>Kalil AC, Mehta AK, Patterson TF, et al. Lancet Respir Med</i></p>
<p>Colchicine in patients admitted to hospital with COVID-19 (RECOVERY): a randomised, controlled, open-label, platform trial. Lancet Respir Med</p>
<p>Antibiotics for the treatment of COVID-19. <i>Popp M, Stegemann M, Riemer M, et al. Cochrane Database Syst R</i></p>
<p>Effect of 12 mg vs 6 mg of Dexamethasone on the Number of Days Alive Without Life Support in Adults With COVID-19 and Severe Hypoxemia: The COVID STEROID 2 Randomized Trial. <i>Munch MW, Myatra SN, Vijayaraghavan BKT, et al. JAMA</i></p>
<p>Vitamins, supplements and COVID-19: a review of currently available evidence. <i>Speakman LL, Michienzi SM, Badowski ME Drugs Context</i></p>
<p>Efficacy of a Probiotic Consisting of Lactocaseibacillus rhamnosus PDV 1705, Bifidobacterium bifidum PDV 0903, Bifidobacterium longum subsp. infantis PDV 1911, and Bifidobacterium longum subsp. longum PDV 2301 in the Treatment of Hospitalized Patients with COVID-19: a Randomized Controlled Trial. <i>Ivashkin V, Fomin V, Moiseev S, et al. Probiotics Antimicrob Proteins</i></p>
<p>Efficacy and Safety of Sarilumab in patients with COVID19 Pneumonia: A Randomized, Phase III Clinical Trial (SARTRE Study). <i>Sancho-Lopez A, Caballero-Bermejo AF, Ruiz-Antoran B, et al. Infect Dis Ther</i></p>
<p>Remdesivir Efficacy in COVID-19 Treatment: A Randomized Controlled Trial. <i>Abd-Elsalam S, Ahmed OA, Mansour NO, et al. Am J Trop Med Hyg</i></p>
<p>Honeybee products for the treatment and recovery from viral respiratory infections including SARS-COV-2: A rapid systematic review. <i>Arentz S, Hunter J, Khamba B, et al. Integr Med Res</i></p>
<p>Results of the CAPSID randomized trial for high-dose convalescent plasma in severe COVID-19 patients. <i>Korper S, Weiss M, Zickler D, et al. J Clin Invest</i></p>
<p>Colchicine for the treatment of COVID-19. <i>Mikolajewska A, Fischer AL, Piechotta V, et al. Cochrane Database Syst Rev</i></p>

<p>Update to living WHO guideline on drugs for covid-19.</p> <p>BMJ</p>
<p>Efficacy of COVID-19 Treatments: A Bayesian Network Meta-Analysis of Randomized Controlled Trials.</p> <p>Zhang C, Jin H, Wen YF, et al. Front Public Health</p>
<p>Association between glucocorticoids treatment and viral clearance delay in patients with COVID-19: a systematic review and meta-analysis.</p> <p>Li J, Liao X, Zhou Y, et al. BMC Infect Dis</p>
<p>Dexamethasone for treating SARS-CoV-2 infection: a systematic review and meta-analysis.</p> <p>Ferreto LED, Bortoloti DS, Fortes PCN, et al. Sao Paulo Med J</p>
<p>The Effect of Anakinra in Hospitalized Patients with COVID-19: An Updated Systematic Review and Meta-Analysis.</p> <p>Kyriakoulis KG, Kollias A, Poulakou G, et al. J Clin Med</p>
<p>A multicenter randomized open-label clinical trial for convalescent plasma in patients hospitalized with COVID-19 pneumonia.</p> <p>Avendano-Sola C, Ramos-Martinez A, Munez-Rubio E, et al. J Clin Invest</p>
<p>Effectiveness of therapeutic heparin versus prophylactic heparin on death, mechanical ventilation, or intensive care unit admission in moderately ill patients with covid-19 admitted to hospital: RAPID randomised clinical trial.</p> <p>Sholzberg M, Tang GH, Rahhal H, et al. BMJ</p>
<p>Effects of different corticosteroid therapy on severe COVID-19 patients: a meta-analysis of randomized controlled trials.</p> <p>Tu J, Mo X, Zhang X, et al. Expert Rev Respir Med</p>
<p>Add-On Effect of Honeysuckle in the Treatment of Coronavirus Disease 2019: A Systematic Review and Meta-Analysis.</p> <p>Du XQ, Shi LP, Cao WF, et al. Front Pharmacol</p>
<p>Use of Airway Pressure Release Ventilation in Patients With Acute Respiratory Failure Due to Coronavirus Disease 2019: Results of a Single-Center Randomized Controlled Trial.</p> <p>Ibarra-Estrada MA, Garcia-Salas Y, Mireles-Cabodevila E, et al. Crit Care Med</p>
<p>Effect of Antithrombotic Therapy on Clinical Outcomes in Outpatients With Clinically Stable Symptomatic COVID-19: The ACTIV-4B Randomized Clinical Trial.</p> <p>Connors JM, Brooks MM, Scieurba FC, et al. JAMA</p>
<p>Hemoperfusion and blood purification strategies in patients with COVID-19: A systematic review.</p> <p>Sanfilippo F, Martucci G, La Via L, et al. Artif Organs</p>
<p>Ruxolitinib and the Mitigation of Severe COVID-19: A Systematic Review and Meta-analysis.</p> <p>Quiros JR, Ross-Comptis J, Hathaway D 3rd, et al. Infect Chemother</p>
<p>Beneficial effects of a mouthwash containing an antiviral phthalocyanine derivative on the length of hospital stay for COVID-19: randomised trial.</p> <p>da Silva Santos PS, da Fonseca Orcina B, Machado RRG, et al. Sci Rep</p>
<p>Tocilizumab and remdesivir in hospitalized patients with severe COVID-19 pneumonia: a randomized clinical trial.</p> <p>Rosas IO, Diaz G, Gottlieb RL, et al. Intensive Care Med</p>
<p>Efficacy and safety of ivermectin for the treatment of COVID-19: A systematic review and meta-analysis.</p> <p>Deng J, Zhou F, Ali S, et al. QJM</p>
<p>Efficacy and Safety of Therapeutic-Dose Heparin vs Standard Prophylactic or Intermediate-Dose Heparins for Thromboprophylaxis in High-risk Hospitalized Patients With COVID-19: The HEP-COVID Randomized Clinical Trial.</p> <p>Spyropoulos AC, Goldin M, Giannis D, et al. JAMA Intern Med</p>
<p>Safety and efficacy of different prophylactic anticoagulation dosing regimens in critically and non-critically ill patients with COVID-19: A systematic review and meta-analysis of randomized controlled trials.</p> <p>Ortega-Paz L, Galli M, Capodanno D, et al. Eur Heart J Cardiovasc Pharmacother</p>

Effect of Convalescent Plasma on Organ Support-Free Days in Critically Ill Patients With COVID-19: A Randomized Clinical Trial. <i>Estcourt LJ, Turgeon AF, McQuilten ZK, et al. JAMA</i>
Tocilizumab administration for the treatment of hospitalized patients with COVID-19: A systematic review and meta-analysis. <i>Kyriakopoulos C, Ntritsos G, Gogali A, et al. Respiriology</i>
Hydroxychloroquine plus azithromycin early treatment of mild COVID-19 in outpatient setting: a randomized, double-blinded, placebo-controlled clinical trial evaluating viral clearance. <i>Rodrigues C, Freitas-Santos RS, Levi JE, et al. Int J Antimicrob Agents</i>
Should we supplement zinc in COVID-19 patients? Evidence from meta-analysis. <i>Szarpak L, Pruc M, Gasecka A, et al. Pol Arch Intern Med</i>
Beneficial and Harmful Outcomes of Tocilizumab in Severe COVID-19: A Systematic Review and Meta-Analysis. <i>Rubio-Rivas M, Forero CG, Mora-Lujan JM, et al. Pharmacotherapy</i>
Mortality Risk of Antidiabetic Agents for Type 2 Diabetes With COVID-19: A Systematic Review and Meta-Analysis. <i>Kan C, Zhang Y, Han F, et al. Front Endocrinol (Lausanne)</i>

Cochrane Systematic Reviews

[Cochrane Evidence on COVID-19: a roundup](#)

[Antibiotics for the treatment of COVID-19](#)

Popp, M et al (Oct 2021)

Implications for practice

Based on the current moderate- to high-certainty evidence, we are certain that patients in the inpatient setting with moderate and severe disease do not benefit from azithromycin used as antiviral or anti-inflammatory treatment for COVID-19. For the outpatient setting, there is currently low-certainty evidence that azithromycin has no beneficial effect for COVID-19 individuals. However, results from inpatients studies may be to some extent transferable to the outpatient setting as inpatient COVID-19 participants had only minor need for respiratory support, and thus the study populations were fairly similar.

As the emergence and spread of antimicrobial resistance has been considered as a global threat already before the pandemic, and the ongoing COVID-19 pandemic may further contribute, a prudent use of antibiotics is of utmost importance. Macrolide use during the pandemic is being discussed as a relevant contributor to the spread of antimicrobial resistance ([WHO 2020d](#)). In this context, the currently reliable evidence does not support the use of azithromycin for COVID-19 treatment outside well-designed randomized trials.

There is no evidence available from the study pool supporting or opposing the use of other antibiotics for treatment of COVID-19. With accordance to the living approach of this review, we will continually update our search and include eligible trials to fill this evidence gap. However, in relation to the evidence for azithromycin and in the context of antimicrobial resistance, other antibiotics should also not be used for treatment of COVID-19 outside well-designed randomized trials.

Given this review's focus, we cannot draw any conclusions on the use of antibiotics as prophylaxis or preemptive therapy of co-bacterial infections in patients also infected with SARS-CoV-2.

[Colchicine for the treatment of COVID-19](#)

Mikolajewska, A et al (Oct 2021)

Implications for practice

Based on the current evidence, in people with moderate to severe coronavirus disease 2019 (COVID-19) the use of colchicine plus standard care in comparison to standard care (plus/minus placebo) probably results in little to no difference on mortality or clinical progression. We do not know whether colchicine has any impact on (serious) adverse events, as these results were reported too heterogeneously. No studies assessed quality of life.

We are uncertain about the evidence of the effect of colchicine on all-cause mortality for people with asymptomatic infection or mild disease. However, colchicine probably results in a slight reduction of admissions to hospital or death within 28 days and serious adverse events. No studies assessed quality of life.

Evidence Aid

<https://evidenceaid.org/evidence/coronavirus-covid-19/>

This evidence collection contains plain-language summaries of high-quality research which are available in English, and translated into French, Spanish, Portuguese, Arabic and Chinese (simplified and traditional).

The collection includes summaries of systematic reviews that might be relevant to the direct impact of COVID-19 (including reviews of emerging research, as well as existing reviews of relevant interventions) on health and other outcomes, the impact of the COVID-19 response on other conditions, and issues to consider for the recovery period after COVID-19.

Nothing added since the last bulletin.

Dynamed - [COVID-19 \(Novel Coronavirus\)](#)

Latest updates

Evidence Updated 27 Oct 2021

common neurologic manifestations reported in children and adults hospitalized with laboratory-confirmed COVID-19 include taste impairment (21%), myalgia (20%), smell impairment (19%), headache (13%), acute confusion or delirium (11%), and dizziness (7%) (Neurology 2021 Oct 11 early online)

[View in topic](#)

Evidence Updated 27 Oct 2021

infection with Delta and N501Y-positive (Alpha, Beta, and Gamma) SARS-CoV-2 variants each associated with increased risk of death, ICU admission, and hospitalization compared to non-Delta/non-N501Y variant (CMAJ 2021 Oct 25)

[View in topic](#)

Evidence Updated 25 Oct 2021

in persons ≥ 16 years old in Israel, risk of myocarditis after vaccination with BNT162b2 (Pfizer-BioNTech) vaccine may be higher after second dose (compared to first dose) and highest in male recipients aged 16-19 years (N Engl J Med 2021 Oct 6 early online)

[View in topic](#)

Evidence Updated 25 Oct 2021

in persons ≥ 12 years old in California, BNT162b2 (Pfizer-BioNTech) vaccine may be 93% effective against B.1.617.2 (Delta) variant-specific hospitalizations, with effectiveness against overall COVID-19-related hospitalizations remaining high up to 5 months after vaccination, though overall and B.1.617.2 (Delta) variant-specific effectiveness to prevent SARS-CoV-2 infection reported to be reduced during this time frame (Lancet 2021 Oct 4 early online)

[View in topic](#)

Guideline Summary Updated 21 Oct 2021

World Health Organization (WHO) clinical case definition of post COVID-19 condition (WHO 2021 Oct 6)

[View in topic](#)

Evidence Updated 19 Oct 2021

among adults hospitalized with COVID-19, Black adults may have higher in-hospital mortality compared to White adults due to higher burden of comorbidities, and Hispanic adults may have lower in-hospital mortality compared to non-Hispanic adults (PLoS One 2021)

[View in topic](#)

Evidence Updated 19 Oct 2021

Black race associated with similar all-cause in-hospital mortality compared to White race among adults hospitalized with COVID-19 in the United States between February 2020 and May 2020 (JAMA Netw Open 2020 Aug 3)

[View in topic](#)

Evidence Updated 19 Oct 2021

Black race and living in area of high population density each associated with increased risk of positive testing for SARS-CoV-2 and COVID-19-related hospitalization among patients tested for SARS-CoV-2 in Michigan (JAMA Netw Open 2020 Oct 1)

[View in topic](#)

Evidence Updated 14 Oct 2021

myocarditis incidence reported to be 4.12 per 100,000 males and 0.23 per 100,000 females after ≥ 1 dose of BNT162b2 (Pfizer-BioNTech) vaccine in persons ≥ 16 years old in Israel (N Engl J Med 2021 Oct 6 early online)

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Evidence Updated 14 Oct 2021

6 months after second dose, effectiveness of BNT162b2 (Pfizer-BioNTech) vaccine against SARS-CoV-2 infection may reduce to 17.5% but effectiveness against hospitalization or death may remain high at 89% in persons in Qatar (N Engl J Med 2021 Oct 6 early online)

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Evidence Updated 14 Oct 2021

male sex, age ≥ 65 years, and immunosuppression each associated with lower neutralizing antibody response 6 months after second dose of BNT162b2 (Pfizer-BioNTech) vaccine in adult healthcare providers in Israel (N Engl J Med 2021 Oct 6 early online)

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Guideline Summary Updated 13 Oct 2021

Centers for Disease Control and Prevention (CDC) SARS-CoV-2 variant classifications and definitions (CDC 2021 Oct 4)

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Guideline Summary Updated 13 Oct 2021

World Health Organization (WHO) tracking of SARS-CoV-2 variants (WHO 2021 Oct 12)

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BMJ Best Practice

14 Oct 2021

What's new at this update

Casirivimab/ imdevimab recommended for treatment of COVID-19

- The World Health Organization (WHO) has updated its living therapeutics guideline to include new recommendations for the use of casirivimab/imdevimab. The WHO recommends the treatment for patients with non-severe disease who are at highest risk of hospitalisation, and those with severe disease and a seronegative status.
- The UK National Institute for Health and Care Excellence has also updated its living guideline to recommend casirivimab/imdevimab for hospitalised patients with a seronegative status, provided they meet certain eligibility criteria.
- US guidelines currently recommend casirivimab/imdevimab for both treatment and post-exposure prophylaxis.
- See the Emerging section for more information.

Application for authorisation of first oral antiviral for COVID-19 submitted to FDA

- The manufacturer of molnupiravir, an experimental oral antiviral, has submitted an emergency-use authorisation application to the US Food and Drug Administration for the treatment of mild to moderate disease in at-risk adults. If authorised, it will be the first oral antiviral available for COVID-19.
- See the Emerging section for more information.

WHO scientific brief summarises current knowledge about infection and transmission in children

- Infections among children and adolescents typically cause less severe disease and fewer deaths compared with adults. While a less severe disease course is a positive outcome, milder symptoms may have resulted in less testing and fewer identified cases. Therefore, children and adolescents who are asymptomatic or have mild symptoms may transmit the disease and contribute to transmission in the community. This understanding is important for developing, adapting, and improving control measures for COVID-19, especially since vaccination is not currently available or authorised for those under 12 years.
- See the Epidemiology section for more information.

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