Update to living systematic review on drug treatments for covid-19

This living systematic review by Siemieniuk and colleagues (BMJ 2020;370:m2980) has been updated. For the latest update, visit doi:. In this update, 463 trials enrolling 166 581 patients were included; 267 (57.7%) trials and 89 814 (53.9%) patients are new from the previous iteration. Compared with standard care, three drugs reduced mortality in patients with mostly severe disease with at least moderate certainty: systemic corticosteroids, interleukin-6 receptor antagonists when given with corticosteroids, and Janus kinase inhibitors. Compared with standard care, two drugs probably reduce hospital admission in patients with non-severe disease: nirmatrelvir/ritonavir and molnupiravir. Remdesivir may reduce hospital admission. Only molnupiravir had at least moderate quality evidence of a reduction in time to symptom resolution; several others showed a possible benefit. Several drugs may increase the risk of adverse effects leading to drug discontinuation; hydroxychloroquine probably increases the risk of mechanical ventilation (moderate certainty).