

C1 esterase kallikrein inhibitor vs Standard Treatment for COVID-19

Author(s): Cruciani F, De Crescenzo F, Vecchi S, Saulle R, Mitrova Z, Amato L, Davoli M.

Question: Should C1 esterase / kallikrein inhibitor compared to Standard Treatment be used for COVID-19?

Setting: Inpatient

Certainty assessment							№ of patients		Effect		Certainty
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	C1 esterase / kallikrein inhibitor	Standard treatment	Relative (95% CI)	Absolute (95% CI)	
All-cause mortality											
1 ¹	randomised trials	serious ^a	not serious	not serious	very serious ^b	none	1/10 (10.0%)	1/10 (10.0%)	RR 1.00 (0.07 to 13.87)	0 fewer per 1.000 (from 93 fewer to 1.000 more)	⊕○○○ VERY LOW
Length of stay in hospital											
1 ¹	randomised trials	serious ^a	not serious	not serious	very serious ^b	none	10	10	-	SMD 0.39 higher (0.5 lower to 1.27 higher)	⊕○○○ VERY LOW
Duration of hospitalization in intensive care											
1 ¹	randomised trials	serious ^a	not serious	not serious	very serious ^b	none	10	10	-	SMD 0.38 higher (0.51 lower to 1.26 higher)	⊕○○○ VERY LOW

Explanations

a. Downgraded of one level for high risk of performance bias and unclear risk of reporting bias

b. Downgraded of two levels for very small sample size

References

1. Mansour E, Palma AC, Ulaf RG, Ribeiro LC, Bernardes AF, Nunes TA, et al. Pharmacological inhibition of the kinin-kallikrein system in severe COVID-19 A proof-of-concept study. medRxiv. 2020:2020.08.11.20167353.