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Question: Should Atorvastatin +Aspirin compared to Standard treatment be used for COVID-19 patients?
Setting: Inpatient

Certainty assessment							№ of patients		Effect		Certainty
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Atorvastatin+Aspirin	Standard treatment	Relative (95% CI)	Absolute (95% CI)	
All-cause mortality											
1 [1]	randomised trials	serious [a]	not serious	not serious	not serious	none	8/221 (3.6%)	7/219 (3.2%)	**RR 1.13** (0.42 to 3.07)	**4 more per 1.000** (from 19 fewer to 66 more)	⊕⊕⊕◯ MODERATE
Number of patients with respiratory distress syndrome											
1 [1]	randomised trials	serious [a]	not serious	not serious	not serious	none	8/221 (3.6%)	6/219 (2.7%)	**RR 1.32** (0.47 to 3.75)	**9 more per 1.000** (from 15 fewer to 75 more)	⊕⊕⊕◯ MODERATE
Number of patients with significant improvement in lung disease											
1 [1]	randomised trials	serious [a]	not serious	not serious	not serious	none	8/221 (3.6%)	7/219 (3.2%)	**RR 1.13** (0.42 to 3.07)	**4 more per 1.000** (from 19 fewer to 66 more)	⊕⊕⊕◯ MODERATE

Explanations
Downgraded of one level for unclear risk of performance, detection, attrition and reporting bias

References

1. Ghati N, Roy A, Bhatnagar S, Bhati S, Bhushan S, Mahendran M, et al. Atorvastatin and Aspirin as Adjuvant Therapy in Patients with SARS-CoV-2 Infection: A structured summary of a study protocol for a randomised controlled trial. Trials 21, 902 (2020). https://doi.org/10.1186/s13063-020-04840-y