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Question: Should Atorvastatin compared to Aspirin 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	Relative (95% CI)	Absolute (95% CI)	
All-cause mortality											
1 ¹	randomised trials	serious ^a	not serious	not serious	serious ^b	none	7/221 (3.2%)	3/221 (1.4%)	RR 2.33 (0.61 to 8.91)	18 more per 1.000 (from 5 fewer to 107 more)	⊕⊕○○ LOW
Number of patients with respiratory distress syndrome											
1 ¹	randomised trials	serious ^a	not serious	not serious	serious ^b	none	7/221 (3.2%)	3/221 (1.4%)	RR 2.33 (0.61 to 8.91)	18 more per 1.000 (from 5 fewer to 107 more)	⊕⊕○○ LOW
Number of patients with significant improvement in lung disease											
1	randomised trials	serious ^a	not serious	not serious	serious ^b	none	7/221 (3.2%)	3/221 (1.4%)	RR 2.33 (0.61 to 8.91)	18 more per 1.000 (from 5 fewer to 107 more)	⊕⊕○○ LOW

Explanations

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

b. Downgraded of one level for wide confidence interval

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>