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Question: Should Baricitinib 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	Baricitinib	Standard treatment	Relative (95% CI)	Absolute (95% CI)	
All-cause mortality											
1 [1]	randomised trials	very serious [a]	not serious	not serious	not serious	none	62/764 (8.1%)	100/761 (13.1%)	**RR 0.62** (0.46 to 0.83)	**50 fewer per 1.000** (from 71 fewer to 22 fewer)	⊕⊕◯◯ LOW
Number of patients with any adverse event											
1 [1]	randomised trials	very serious [a]	not serious	not serious	not serious	none	223/750 (29.7%)	204/752 (27.1%)	**RR 1.10** (0.93 to 1.29)	**27 more per 1.000** (from 19 fewer to 79 more)	⊕⊕◯◯ LOW
Number of patients with serious adverse events											
1 [1]	randomised trials	very serious [a]	not serious	not serious	not serious	none	110/750 (14.7%)	135/752 (18.0%)	**RR 0.82** (0.65 to 1.03)	**32 fewer per 1.000** (from 63 fewer to 5 more)	⊕⊕◯◯ LOW

Explanations
a. Downgraded of two levels for high risk of performance bias and unclear risk of selection, attrition and reporting bias

References
1. Marconi VC, Ramanan AV, de Bono S, Kartman CE, Krishnan V, Liao R, et al. Baricitinib plus Standard of Care for Hospitalized Adults with COVID-19. medRxiv. 2021:2021.04.30.21255934.