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Question: Should Monoclonal antibodies REGN-CoV2 8 g compared to REGN-CoV2 2.4 g be used for COVID-19 patients?
Setting: Outpatient

Certainty assessment							№ of patients		Effect		Certainty
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Monoclonal antibodies REGN-CoV2 8 g	Monoclonal antibodies REGN-CoV2 2.4 g	Relative (95% CI)	Absolute (95% CI)	
All-cause mortality											
1 [1]	randomised trials	serious a	not serious	not serious	serious b	none	No deaths reported				⊕⊕◯◯ LOW
Number of patients with any adverse event											
1 [1]	randomised trials	serious a	not serious	not serious	very serious c	none	2/88 (2.3%)	0/88 (0.0%)	**RR 5.00** (0.24 to 102.67)	**0 fewer per 1.000** (from 0 fewer to 0 fewer)	⊕◯◯◯ VERY LOW
Number of patients with serious adverse events											
1 [1]	randomised trials	serious a	not serious	not serious	very serious c	none	0/88 (0.0%)	1/88 (1.1%)	**RR 0.33** (0.01 to 8.07)	**8 fewer per 1.000** (from 11 fewer to 80 more)	⊕◯◯◯ VERY LOW

Explanations

a. Downgraded of one level for high risk of reporting bias and unclear risk of selection bias
b. Downgraded of one level for small sample size (<200)
c. Downgraded of two levels for small sample size and wide CI

References

1. Weinreich DM, Sivapalasingam S, Norton T, Ali S, Gao H, Bhore R, Musser BJ, et al. REGN-COV2, a Neutralizing Antibody Cocktail, in Outpatients with Covid-19. N Engl J Med. 2021 Jan 21;384(3):238-251. doi: 10.1056/NEJMoa2035002. Epub 2020 Dec 17..