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Question: Should Monoclonal antibodies 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	Monoclonal antibodies	Standard treatment	Relative (95% CI)	Absolute (95% CI)	
All-cause mortality											
18 [1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18]	randomised trials	serious [a]	not serious	not serious	not serious	none	1013/4873 (20.8%)	1093/4421 (24.7%)	**RR 0.88** (0.80 to 0.97)	**30 fewer per 1.000** (from 49 fewer to 7 fewer)	⊕⊕⊕◯ MODERATE
Number of patients with any adverse event											
13 [1,2,3,5,6,7,8,10,11,14,15,17,19]	randomised trials	not serious	serious [b]	not serious	not serious	none	1035/2101 (49.3%)	762/1721 (44.3%)	**RR 1.03** (0.93 to 1.15)	**13 more per 1.000** (from 31 fewer to 66 more)	⊕⊕⊕◯ MODERATE
Number of patients with serious adverse events											
15 [2,6,7,8,9,10,11,12,13,14,15,16,17,18,19]	randomised trials	serious [c]	not serious	not serious	not serious	none	501/2467 (20.3%)	375/1926 (19.5%)	**RR 0.94** (0.84 to 1.05)	**12 fewer per 1.000** (from 31 fewer to 10 more)	⊕⊕⊕◯ MODERATE
SARS-CoV-2 clearance											
1 [6]	randomised trials	not serious	not serious	not serious	not serious	none	93/101 (92.1%)	86/103 (83.5%)	**RR 1.10** (0.99 to 1.22)	**83 more per 1.000** (from 8 fewer to 184 more)	⊕⊕⊕⊕ HIGH
Number of patients discharged											
4 [4,11,12,16]	randomised trials	serious [d]	very serious [e]	not serious	not serious	none	1435/2412 (59.5%)	1254/2395 (52.4%)	**RR 1.04** (0.94 to 1.15)	**21 more per 1.000** (from 31 fewer to 79 more)	⊕◯◯◯ VERY LOW
Duration of hospitalization in intensive care											

Certainty assessment							№ of patients		Effect		Certainty
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Monoclonal antibodies	Standard treatment	Relative (95% CI)	Absolute (95% CI)	
1 [9]	randomised trials	serious [f]	not serious	not serious	not serious	none	The study reports the length of hospitalization expressed as time to discharge: HR 1.42 [95% CI (1.18; 1.71) in favour of tolicuzumab HR: 1.64 [95% CI (1.2; 2.45)] in favour of sarilumab				⊕⊕⊕◯ MODERATE
Length of stay in hospital											
3 [9,14,15]	randomised trials	not serious	not serious	not serious	not serious	none	The studies report a length of hospitalization expressed as time to discharge as follows: Tocilizumab cumulatively HR: 1.32 (95% CI [1.16 - 1.50]), thus reported in the studies REMAP-CAP HR: 1.41 (95% CI [1.18 - 1.68]) Rosas et al 2020 HR: 1.35 (95% CI [1.02 - 1.79]) Salama et al 2020 HR: 1.16 (95% CI [0.91 - 1.48]) Sarilumab REMAP-CAP HR: 1.60 (95% CI [1.17 - 2.19])				⊕⊕⊕⊕ HIGH
Number of patients with progression / exacerbation of disease											
8 [4,5,6,8,12,14,16,17]	randomised trials	serious [g]	not serious	not serious	not serious	none	335/2591 (12.9%)	391/2472 (15.8%)	**RR 0.79** (0.69 to 0.91)	**33 fewer per 1.000** (from 49 fewer to 14 fewer)	⊕⊕⊕◯ MODERATE
Length of stay in hospital (mean days)											
1 [10]	randomised trials	serious [h]	not serious	not serious	serious [i]	none	65	64	-	SMD **0.42 lower** (0.77 lower to 0.07 lower)	⊕⊕◯◯ LOW
Number of patients with respiratory failure and respiratory distress syndrome											
2 [5,8]	randomised trials	serious [j]	not serious	not serious	not serious	none	23/265 (8.7%)	21/268 (7.8%)	**RR 1.12** (0.63 to 1.96)	**9 more per 1.000** (from 29 fewer to 75 more)	⊕⊕⊕◯ MODERATE

Explanations

a. Downgraded of one level for unclear risk of selection bias in 7 studies, performance bias at high risk in 7 studies and unclear in 4 studies, 5 studies at unclear risk of detection bias, one study at high risk and 5 at unclear risk of attrition bias, 3 studies at unclear risk of reporting bias
b. Downgraded of one level for heterogeneity I^2=47%
c. Downgraded of one level for high risk of performance bias in 6 studies, for attrition bias one study at high risk and 5 at unclear risk
d. Downgraded of one level for performance bias at high risk in 2 studies and at unclear risk in one study, one study at unclear risk of selection bias
e. Downgraded of two levels for high heterogeneity I^2=80%
f. Downgraded of one level for high risk of performance bias
g. Downgraded of one level for 3 studies at unclear risk of selection bias, performance bias at high risk in 3 studies and at unclear risk in 3 studies, 2 studies at unclear risk of detection bias, attrition bias at high risk in one study and at unclear risk in 2 studies, and 2 studies at unclear risk of reporting bias
h. Downgraded of one level for high risk of performance bias and unclear risk of detection bias
i. Downgraded of one level for small sample size
j. High risk of performance bias in one study and one study at unclear risk for all considered bias

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