

Real-time systematic review and meta-analysis of non-randomised comparative treatment studies for COVID-19

First published: 07/05/2020

Last updated: 02/07/2024

Study

Ongoing

Administrative details

PURI

<https://redirect.ema.europa.eu/resource/35988>

EU PAS number

EUPAS35147

Study ID

35988

DARWIN EU® study

No

Study countries

☐ Spain

☐ United Kingdom

Study description

A real-time systematic review and meta-analysis of non-randomised studies to compare in-hospital clinical outcomes in patients managed with standard care and various treatments for COVID-19. To compare the results of treatments in non-randomised comparative studies and randomised controlled trials for in-hospital clinical outcomes in COVID-19 patients.

Study status

Ongoing

Research institutions and networks

Institutions

OXON Epidemiology

☐ Spain

☐ United Kingdom

First published: 06/12/2010

Last updated: 15/03/2024

Institution

Laboratory/Research/Testing facility

Non-Pharmaceutical company

ENCEPP partner

Contact details

Study institution contact

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Study contact

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Primary lead investigator

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Primary lead investigator

Study timelines

Date when funding contract was signed

Planned: 08/05/2020

Actual: 08/05/2020

Study start date

Planned: 08/05/2020

Actual: 20/05/2020

Date of final study report

Planned: 10/05/2021

Sources of funding

- Other
- Pharmaceutical company and other private sector

More details on funding

GSK, OXON Epidemiology

Regulatory

Was the study required by a regulatory body?

No

Is the study required by a Risk Management Plan (RMP)?

Not applicable

Methodological aspects

Study type

Study type list

Study type:

Non-interventional study

Scope of the study:

Effectiveness study (incl. comparative)

Main study objective:

To compare in-hospital clinical outcomes in patients managed with standard care and various treatments for COVID-19 in non-randomised studies. To compare the results of treatments in non-randomised comparative studies and randomised controlled trials for in-hospital clinical outcomes in COVID-19

patients.

Study Design

Non-interventional study design

Systematic review and meta-analysis

Study drug and medical condition

Study drug International non-proprietary name (INN) or common name

HYDROXYCHLOROQUINE

LOPINAVIR

RITONAVIR

AZITHROMYCIN HYDROCHLORIDE

REMDESIVIR

INTERFERON ALFA-2B

INTERFERON BETA-1A

INTERFERON BETA-1B

TOCILIZUMAB

SARILUMAB

SILTUXIMAB

SARS-COV-2 CONVALESCENT PLASMA

Medical condition to be studied

COVID-19

Population studied

Age groups

Preterm newborn infants (0 – 27 days)

Term newborn infants (0 – 27 days)

Infants and toddlers (28 days – 23 months)

Children (2 to < 12 years)

Adolescents (12 to < 18 years)

Adults (18 to < 46 years)

Adults (46 to < 65 years)

Adults (65 to < 75 years)

Adults (75 to < 85 years)

Adults (85 years and over)

Special population of interest

Hepatic impaired

Immunocompromised

Pregnant women

Renal impaired

Estimated number of subjects

0

Study design details

Outcomes

- In hospital death. - In hospital clinical scales and outcomes, mechanical ventilation, renal replacement therapy, admission to ICU, serious complications and serious adverse events.- Duration of hospitalization.- Duration of ICU stay.

Data analysis plan

PAIRWISE META-ANALYSIS OF NON-RANDOMISED COMPARISONS. Fixed or random effects meta-analysis will combine risk, odds and hazard ratios, mean difference and standardised mean differences. The I² test will assess heterogeneity. Egger's test and funnel plots for publication and reporting bias. COMPARISON OF META-ANALYSES OF RCTS AND PAIR-WISE NON-RANDOMISED COMPARISONS. Comparison of risk, odds and hazard ratios with 95% confidence interval from meta-analysis of RCTs and pair wise meta-analysis of non-randomised studies, using fixed or random effects. NETWORK META-ANALYSIS OF NON-RANDOMISED COMPARISONS. A network diagram will be made with nodes Transitivity and consistency will be assessed. Heterogeneity will be evaluated with 95% prediction intervals. Interventions will be ranked by surface under the cumulative ranking curve. Heterogeneity and incoherence will be explored. Publication and under-reporting bias will be explored with modified funnel plots.

Documents

Study publications

[Nawab Qizilbash, Stuart Pocock, Jesus Lopez Arrieta, Ignacio Mendez, Bèlène Pod...](#)

Data management

Data sources

Data sources (types)

[Other](#)

[Published literature](#)

Data sources (types), other

We will search MEDLINE (PubMed), EMBASE, Cochrane Library, and newer sources since the COVID-19 Pandemic: MedRxiv.

Use of a Common Data Model (CDM)

CDM mapping

No

Data quality specifications

Check conformance

Unknown

Check completeness

Unknown

Check stability

Unknown

Check logical consistency

Unknown

Data characterisation

Data characterisation conducted

No