

Demo Walkthrough: COVID-19 Antivirals

Welcome to the walkthrough of the *COVID-19: Antivirals* demo Nest (open in your original tab). In this walkthrough, we'll explain the core functionalities of Nested Knowledge through this Nest. We encourage you to work through the Nest as you follow the walkthrough. The Nest available to you is a copy of the original and may be freely modified, so roll up your sleeves and get your hands dirty!

This Nest is a copy of a previously-completed review presenting the evidence regarding the safety and efficacy of anti-virals that had randomized controlled trial (RCT) evidence reported in the treatment of COVID-19 as of January 2022.

Nest Home

The screenshot shows the 'COVID-19: Antivirals (Demo)' Nest Home page. The interface includes a top navigation bar with 'Our Team', 'Our Vision', 'Enterprise', 'AutoLit', and a user profile 'Karl'. A left sidebar menu lists modules: 'Nest Home', 'Literature Search', 'Screening', 'Tagging', 'Extraction', 'Synthesis', and 'Settings'. The main content area displays the 'About' section of the demo, which explains that it is a copy of a previously-completed review. It also shows the 'Title' (Efficacy of antiviral therapies for COVID-19: A systematic review of randomized controlled trials), the 'Study Coordinator/Corresponding Author' (Erin Sheffield), and a list of 'Team Members and Their Organizational Affiliations'. A right sidebar shows a 'Comments' section with two comments from Karl Holub and Kathryn Cowie. The bottom of the page features a rich text editor with bold, italic, and link formatting options.

You've landed on your demo Nest in AutoLit, and you're looking at the Nest Home page. This page includes a menu on the left of the page, the protocol in the center, and discussion about the Nest on the right. The menu includes links to all modules & configurations available to you in AutoLit. We'll now walk through these modules one by one. (click the title in the menu to navigate to the the corresponding module).

Literature Search

The Literature Search page allows import of studies to a nest and shows where studies were sourced. This review includes two searches - an API-based (automatic integration) search of PubMed and a file-based import from Embase. Hover and click the "History and Details" column to see greater detail about the searches, including when they were run and any query structuring available. The PubMed

search is API-based and may be run on demand. Hover the Pubmed row and click the “Run” button to update this search- you may import some new records!

The screenshot shows the NESTED KNOWLEDGE web application. The top navigation bar includes links for 'Our Team', 'Our Vision', 'Enterprise', 'AutoLit', and a user profile 'Karl'. The main header indicates the current search is 'Literature Search: COVID-19: Antivirals'. On the left, a sidebar menu lists various tools: 'Nest Home' (Dashboard), 'Literature Search' (2/2), 'Screening' (91/100), 'Tagging' (11/36), 'Extraction' (15/36), 'Synthesis', and 'Settings' (Admin). The central 'Searches' table has columns: Terms, Search Engine, Schedule, Search Now, History and Details, and Delete. It lists a search for 'Lopinavir OR Ritonavir OR Remdesivir OR Ribavirin OR Arbidol OR Favipiravir' using the 'Embase' engine, scheduled 'Never', with a 'Run' button and a 'File' download icon. Below this, another search for '["Therapeutics" OR "antiviral therapies"] AND (RCT OR "randomized contr...)' is shown using the 'PubMed' engine, also scheduled 'Never', with a 'Last Run: 2022-02-09' and 'Methods api' and 'Results 59' links.

Other Sources

Records may be imported through other means. Click the “Other Sources” menu item under “Literature Search” to view records that were individually added as expert recommendations. 19 such studies were imported into this Nest. Try importing the DOI or PMID of your favorite study using the “Add by Identifier” form on the right of the page

INESTED
KNOWLEDGE

Other Sources: COVID-19: Antivirals

Next Home

Dashboard

Literature Search

Other Sources

Duplicate Review

Search Exploration

Query Builder

Screening

Configure Exclusion Reasons

Study Inspector

Tagging

Configure Study Tags

Study Inspector

Extraction

Study Inspector

Synthesis

Manuscript Editor

Export

Settings

Admin

Add Individual References

Bibliome

Title	Author	Source	Date Added	Added By
Efficacy and safety of favipiravir, an oral RNA-dependent RNA pol...	Zari F Ullahda	International journal of infectio...	9/7/2021	Ranita Tarchand
Clinical outcomes of using remdesivir in patients with moderate to ...	Lakshmi Mahajan	Indian J Anaesth	9/7/2021	Ranita Tarchand
Efficacy of favipiravir in COVID-19 treatment: a multi-center rando...	Hany M Dabbous	Archives of virology	9/6/2021	Ranita Tarchand
Clinical Outcomes and Plasma Concentrations of Remdesivir Marboce...	Yue Lou	European journal of pharmaceut...	9/6/2021	Ranita Tarchand
AVIFAVIR for Treatment of Patients with Moderate COVID-19: Inter...	Andrew A Hwangzhe...	Clinical infectious diseases: an o...	9/6/2021	Ranita Tarchand
Lopinavir-ritonavir in patients admitted to hospital with COVID-19 ...	Horby Peter W	Lancet (London, England)	9/6/2021	Ranita Tarchand
Remdesivir for the Treatment of Covid-19 - Final Report.	John H Beigel	The New England journal of me...	9/6/2021	Ranita Tarchand
A Novel Protein Drug, Nucleofen, as the Potential Antiviral Drug fo...	Fang Zheng		1/5/2021	Jorge Polanco
Triple combination of interferon beta-1b, lopinavir-ritonavir, and rib...	Icon Fan-Hai Hung	Lancet (London, England)	1/5/2021	Jorge Polanco
No Statistically Apparent Difference in Antiviral Effectiveness Obs...	Yie-Qu Huang	Frontiers in pharmacology	1/5/2021	Jorge Polanco
Favipiravir versus Arbidol for COVID-19: A Randomized Clinical Trial	Chong Chen		1/5/2021	Jorge Polanco
Interferon-α2b Treatment for COVID-19	Zhou Qing	Frontiers in immunology	1/5/2021	Jorge Polanco
Arbidol monotherapy is superior to lopinavir/ritonavir in treating C...	Zhen Zhi	The Journal of infection	1/5/2021	Jorge Polanco
Efficacy and Safety of Lopinavir/Ritonavir or Arbidol in Adult Patie...	Huaying Li	Med (New York, NYC)	1/5/2021	Jorge Polanco
Repurposed Antiviral Drugs for Covid-19 - Interim WHO Solidarity ...		The New England journal of me...	1/4/2021	Jorge Polanco
A Trial of Lopinavir-Ritonavir in Adults Hospitalized with Severe Co...	Bin Cao	The New England journal of me...	10/26/2020	Kevin Kallines
Effect of Remdesivir in Standard Care on Clinical Status at 10 Days L...	Christoph D Spinner	JAMA	10/26/2020	Kevin Kallines
Remdesivir in adults with severe COVID-19: a randomised, double-b...	Yeming Wang	Lancet (London, England)	10/26/2020	Kevin Kallines
Experimental Treatment with Favipiravir for COVID-19: An Open-L...	Qingxian Gai	Engineering (Beijing, China)	10/26/2020	Kevin Kallines

Add by Identifier

Add by Article ID

Published ID

DOI

Enter a single or comma separated list of identifiers. Bibliographic data will be automatically imported from PubMed or Crossref

Add Manually

Title

Author Format

First (Last, Full)

First Name

Last Name

Publication Date

min / dd / yyyy

Journal/Source

Publisher

Volume

Issue

Corporate Author

Organization

Link

URL

DOI

10.000000000

Abstract / Summary

Placeholder

Add Reference

Screening

Once studies are imported into a nest, they are “Screened” for relevance to the review in the Screening Module. Click the Screening menu header to visit this module.

INESTED
KNOWLEDGE

Screening: COVID-19: Antivirals

Next Home

Dashboard

Literature Search

Other Sources

Duplicate Review

Search Exploration

Query Builder

Screening

Configure Exclusion Reasons

Study Inspector

Tagging

Configure Study Tags

Study Inspector

Extraction

Study Inspector

Synthesis

Manuscript Editor

Export

Settings

Admin

Effect of anti-interleukin drugs in patients with COVID-19 and signs of cytokine release syndrome (COV-AID): a factorial, randomised, controlled trial.

Abstract

Full Text

Supplements

PMC

Navigation

Each

Stop

Screening

Full Text Review

Upload Full Text

Search

Not an RCT of a drug of interest

Protocol or Methods article

Systematic Review or Meta-analysis

Editorial, comment, or opinion article

Not an antiviral

Not related to COVID-19

Qualitative review of existing research

Update or guideline article

Published before 2019-11-01

In vitro, in silico, or in vivo study

Basic Information

Prophylaxis Not Treatment

Retracted

Technical note

Correspondence or Letter to the Editor

Case Study

Full Text Unavailable

secondary analysis

Suspected COVID

Not Published in English

BACKGROUND Infections with SARS-CoV-2 continue to cause significant morbidity and mortality. Interleukin (IL)-1 and IL-6 blockade have been proposed as therapeutic strategies in COVID-19, but study outcomes have been conflicting. We sought to study whether blockade of the IL-6 or IL-1 pathway shortened the time to clinical improvement in patients with COVID-19, hypoxic respiratory failure, and signs of systemic cytokine release syndrome. METHODS We did a prospective, multicentre, open-label, randomised, controlled trial, in hospitalised patients with COVID-19, hypoxia, and signs of a cytokine release syndrome across 16 hospitals in Belgium. Eligible patients had a proven diagnosis of COVID-19 with symptoms between 6 and 16 days, a ratio of the partial pressure of oxygen to the fraction of inspired oxygen (PaO2/FiO2) of less than 350 mm Hg on room air or less than 280 mm Hg on supplemental oxygen, and signs of a cytokine release syndrome in their serum (either a single ferritin measurement of more than 2000 µg/L and immediately requiring high flow oxygen or mechanical ventilation, or a ferritin concentration of more than 1000 µg/L, which had been increasing over the previous 24 h, or lymphopenia below 800/mL, with two of the following criteria: an increasing fibrinogen concentration of more than 700 µg/L, an increasing lactate dehydrogenase concentration of more than 300 international units per L, an increasing C-reactive protein concentration of more than 70 mg/L, or an increasing D-dimers concentration of more than 1000 ng/mL). The COV-AID trial has a 2 × 2 factorial design to evaluate IL-1 blockade versus no IL-1 blockade and IL-6 blockade versus no IL-6 blockade. Patients were randomly assigned by means of permuted block randomisation with varying block size and stratification by centre. In a first randomisation step, patients were allocated to receive a single dose of siltuximab (11 mg/kg) intravenously, or a single dose of tocilizumab (8 mg/kg) intravenously, or to receive no IL-1 blockade (1:1). The primary outcome was the time to clinical improvement, defined as time from randomisation to an increase of at least two points on a 6-category ordinal scale or to discharge from hospital alive. The primary and supportive efficacy endpoints were assessed in the intention-to-treat population. Safety was assessed in the safety population. This study is registered online with ClinicalTrials.gov (NCT04330438) and [BioRxiv](#) (2020-07500-40) and is complete. FINDINGS Between April 4, and Dec 8, 2020, 342 patients were randomly assigned to IL-1 blockade (n=172) or no IL-1 blockade (n=170) and simultaneously randomly assigned to IL-6 blockade (n=227; 114 for tocilizumab and 113 for siltuximab) or no IL-6 blockade (n=115). Most patients were male (265 [77%] of 342), median age was 65 years (IQR 54-73), and median Systemic Organ Failure Assessment (SOFA) score at randomisation was 3 (2-4). All 342 patients were included in the primary intention-to-treat analysis. The estimated median time to clinical improvement was 12 days (95% CI 10-16) in the IL-1 blockade group versus 12 days (10-15) in the no IL-1 blockade group (hazard ratio [HR] 0.94 [95% CI 0.73-1.21]). For the IL-6 blockade group, the estimated median time to clinical improvement was 11 days (95% CI 10-16) versus 12 days (11-16) in the no IL-6 blockade group (HR 1.00 [0.78-1.29]). 55 patients died during the study, but no evidence for differences in mortality between treatment groups was found. The incidence of serious adverse events and serious infections was similar across study groups. INTERPRETATION Drugs targeting IL-1 or IL-6 did not shorten the time to clinical improvement in this sample of patients with COVID-19, hypoxic respiratory failure, low SOFA score, and low baseline mortality risk. FUNDING Belgian Health Care Knowledge Center and VIB Grand Challenges program.

Population/Problem

Intervention

Outcome

User Keywords

Keywords

Bibliographic fields

6/8

This screening module displays studies that have yet to be screened, allowing you to decide to include or exclude from the rest of your review and analysis. So far in our review, 91 studies have been screened and 16 included. Try including a reference by clicking the include button. Exclude a reference by selecting an exclusion reason from the drop-down menu and then clicking the exclude button. You may also skip studies you aren't yet sure about, or jump to a prior study, using the

buttons under the Navigation menu.

Abstract Highlighting

Why are study abstracts so colorful? We perform ML-based PICO annotation of abstracts using a model derived from [RobotReviewer](#). To turn off PICO highlighting, toggle off the slide button in the legend just beneath the abstract text.

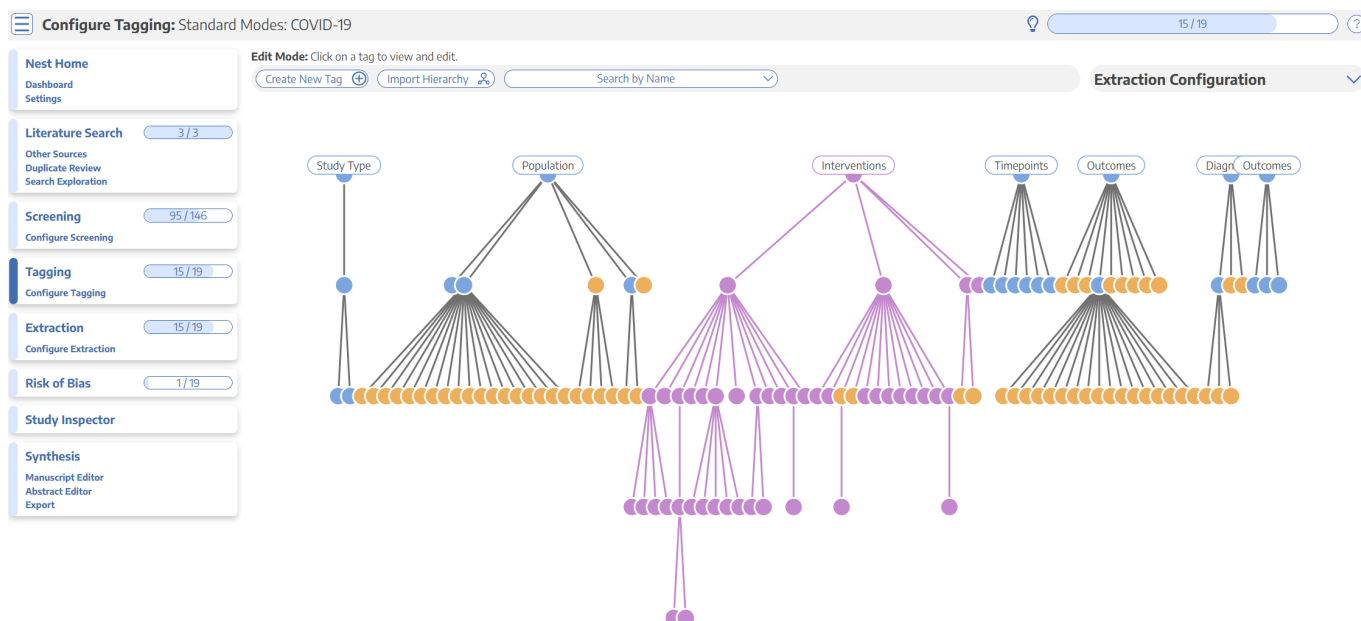
Abstract text may also be underlined with User Keywords, which are configured under the Settings menu item.

Tagging

The Tagging module allows included studies to be categorized according to their characteristics, such as design, population, outcomes, etc. Nested Knowledge uses hierarchical tags to describe characteristics.

Tag Hierarchy

Click the “Configure Study Tags” menu item to get started. Tag hierarchies consist of tags (visualized as points) and relationships between them (visualized as connecting lines). The tag hierarchy in this review includes 7 “root” tags - the highest level categories we're considering in the review. Hierarchies should be created and read as a series of “is a” relationships. For example, “Adverse Event” is a “Outcome”, “Septic Shock” is a “Adverse Event”. Hover around the hierarchy to explore tags and read off the “is a” relationships as you go.



Tagging Module

Inside the Tagging module, tags may be applied to studies, indicating that a concept is relevant to a study.

The screenshot shows the 'Tagging' module in the Nested Knowledge interface. The main window displays a research article titled "Effect of Remdesivir vs Standard Care on Clinical Status at 11 Days in Patients With Moderate COVID-19: A Randomized Clinical Trial". The article text is visible, including the abstract and introduction. On the right side, there is a 'Tagging' panel with a table of tags and their corresponding text excerpts. The table has columns for 'Tag' and 'Text'. The 'Tag' column lists various medical conditions and treatments, and the 'Text' column shows excerpts from the article. A dropdown menu is open, showing a list of tags including 'Cardiovascular Disease', 'Diabetes Mellitus', 'Hypertension', and 'Mortality'. The 'Text' column for 'Cardiovascular Disease' shows an excerpt: "Patients in the 3 groups were balanced in demographic and disease characteristics (Table 1). Overall, 54% of patients had cardiovascular disease, 42% had hypertension, 40% had diabetes, and 14% had asthma." Below the table, there are buttons for 'Cancel' and 'Update Tag'.

In the Tagging form, select any tag from the dropdown menu, then click Apply Tag; it should now appear in the Tagging Table.

Click a row in the Tagging table that has a non-empty excerpt column to view past applied tags and their “excerpts”, which user-entered pieces of text, typically extracted from the manuscript, supporting the tag.

Study Inspector

Study Inspector is the tool in AutoLit for reviewing and searching your past extracted data. Each row in Study Inspector is a study, and columns may be user-selected in the upper left dropdown menu. Studies may be searched into the table by creating Filters. Filters may be created using the Add Filter dropdown menu, but oftentimes the typeahead search bar is fastest. In the below example, we are filtering to studies with a full text uploaded and using the typeahead menu to find all studies tagged with Mortality. Try out the title/abstract (TIAB) filter by typing “Lopinavir” into the search bar.

INESTED
KNOWLEDGE

Study Inspector: COVID-19: Antivirals

Next Home
Dashboard

Literature Search
2/2

Screening
91/935

Tagging
16/16

Extraction
75/75

Synthesis
Manuscript Editor
Export

Settings
Admin

Columns

Full Text Uploads More

Study Inspector

Save Filter Sets Bulk Actions Download Clear Filters

Title	Publication Year	%	Screening Status
A Trial of Lopinavir–Ritonavir in Adults Hospitalized with Moderate-to-Severe Coronavirus Disease 2019 (COVID-19)	2020		Included
A Novel Protein Drug, Novoforon, as the Potential Antiviral Dr...	2020		Excluded: Not an antiviral
Sofosbuvir and dactarasin for the treatment of COVID-19 outp...	2020		Included
Efficacy and Safety of Lopinavir/Ritonavir or Arbidol in Adult P...	2020		Included
Remdesivir in adults with severe COVID-19: a randomised, dou...	2020		Included
Sofosbuvir and dactarasin compared with standard of care in t...	2020		Included
Effect of Remdesivir vs Standard Care on Clinical Status at 11 D...	2020		Included
Treatment of COVID-19 pneumonia with glucocorticoids [CORT...	2021		Excluded: Protocol or Methods article
Favipiravir and Hydroxychloroquine Combination Therapy in P...	2021		Included
Hydroxychloroquine with or without azithromycin for treatme...	2021		Excluded: Not an RCT of a drug of interest
Clinical outcomes of using remdesivir in patients with moderat...	2021		Included
Efficacy and Safety of Triazolin Therapy for Coronavirus Dise...	2020		Excluded: Not an RCT of a drug of interest
Antibiral Combination Clinically Better Than Standard Therapy ...	2021		Excluded: Biased Subpopulation
Evaluation of the effectiveness and safety of adding Isentrop...	2021		Excluded: Not an antiviral
Remdesivir for the Treatment of Covid-19 – Final Report	2020		Included
Efficacy and safety of favipiravir, an oral RNA-dependent RNA...	2021		Included
Efficacy and safety of sofosbuvir plus dactarasin or neivdesvir L...	2021		Included
Favipiravir versus Arbidol for COVID-19: A Randomized Clinical ...	2020		Included
Efficacy of Favipiravir in COVID-19 treatment: a multi-center ra...	2021		Included
Efficacy and Safety of Favipiravir in Moderate COVID-19 Patie...	2021		Included
Clinical Outcomes and Plasma Concentrations of Baloxavir Mar...	2020		Included
Triple combination of interferon beta-1b, lopinavir–ritonavir, an...	2020		Excluded: Not an antiviral
Lopinavir–ritonavir in patients admitted to hospital with COVID...	2020		Included

Details Explore

Displaying 23 matching records Load All

Extraction

Please see our [Extraction Documentation](#) page to review how Extraction was configured for this Nest. Click the Extraction menu item to view and perform Extraction for this review.

INESTED
KNOWLEDGE

Data Extractions: COVID-19: Antivirals

Next Home
Dashboard

Literature Search
2/2

Screening
91/935

Tagging
16/16

Extraction
75/75

Synthesis
Manuscript Editor
Export

Settings
Admin

Abstract Full Text Supplements PMC

Navigation

Study Design

Extracted Data

Effect of Remdesivir vs Standard Care on Clinical Status at 11 Days in Patients With Moderate COVID-19: A Randomized Clinical Trial.

Research

1 of 10

90%

Back

Save Complete

Arms

Status	Intervention	Arm Size	%
✓	Control/Standard of Care	200	X
✓	5-day course of Remdesivir	199	X
✓	10-day course of Remdesivir	197	X

Measurement Points

Status	Timepoint	Value	Units	%
✓	Baseline	0	days	X
✓	Outcome	11	days	X

Extracted Data

Filter Data Elements

Hypertension

Status	Arm	Events	Total
✓	Control/Std.	81	200
✓	5-day rem.	82	199
✓	10-day rem.	85	197

Hypertension

Mortality

Status	Arm	Events	Total
✓	Control/Std.	4	200
✓	5-day rem.	7	199
✓	10-day rem.	8	197

Mortality

Nausea

Status	Arm	Events	Total
✓	Control/Std.	4	200
✓	5-day rem.	19	199
✓	10-day rem.	16	197

Nausea

Length of hospital stay

Status	Arm	Median	IQR Lower	IQR Upper	%
✓	Control/Std.				200
✓	5-day rem.				199
✓	10-day rem.				197

Length of hospital stay

Age Mean

Status	Arm	Mean	SD	N
✓	Control/Std.			200
✓	5-day rem.			199

The Study Design form specifies intervention arms in the study (Standard of care and 2 different Remdesivir dosages, in this case) as well as outcome measurement timepoints in the study (0 and 11 days).

https://wiki.nested-knowledge.com/

Printed on 2023/10/06 19:26

The Extracted Data form contains means, medians, dichotomous rates, and categorical counts corresponding to baseline characteristics and outcomes for the study. Modify some of the data points, which will be auto-saved. If you enter incomplete or invalid data (e.g. a negative value for N), the leading Status column of the table will show a red X. Hover to view the error message.

Synthesis

At this point, we've reviewed all the evidence gathered in AutoLit for the *COVID-19 Antivirals* Nest. Now let's navigate to Synthesis Home to draw some conclusions from our evidence, by clicking the Synthesis menu heading.

Contributors

Karl Helbig

COVID-19: Antivirals

This nest displays a network meta-analysis of all studies reporting patient outcomes from randomized controlled trials (RCTs) for antivirals used to treat COVID-19. We report over 8,000 patients treated in 16 RCTs of 6 anti-virals compared against each other or against standard of care (SOC). Though variation in study size meant there is insufficient evidence for some therapies, we found a wide range in reported rates of ventilation at follow-up (from 1.8% to 18.4% compared to 9.5% for SOC) and mortality (from 1.2% to 10.7%), though SOC had the highest mortality rate at 13.5%. The dataset had high heterogeneity of data reported and also in patient populations; most notably, rate of severe COVID-19 infection at baseline ranged from 9.8% to 86.5%. Our findings indicate a pressing need for improved data harmonization in COVID-19 research to enable more effective cross-trial comparisons of therapies.

AutoLit

Construct or edit your living systematic review. You can also invite collaborators, share your work, or write a report.

Qualitative Synthesis

Browse common concepts discussed in studies of interest. You can interact with the tag diagram to find studies that address your research goals.

Most Frequent Tags

Tag	Frequency
Control/Standard of Care	17
Mortality	17
Diabetes Mellitus	16
Total Patient Population/Number of Patients	14

Quantitative Synthesis

Examine summary data and statistical analysis. You can compare therapies across outcomes of interest or review evidence from the underlying studies.

Meta-Analysis

Outcomes	Interventions
Mechanical Ventilation	Control/Standard of Care
Supplemental Oxygen	Favipiravir
Mortality	Lopinavir/Ritonavir
Diarrhea	Sofosbuvir/Vaccines

Manuscript

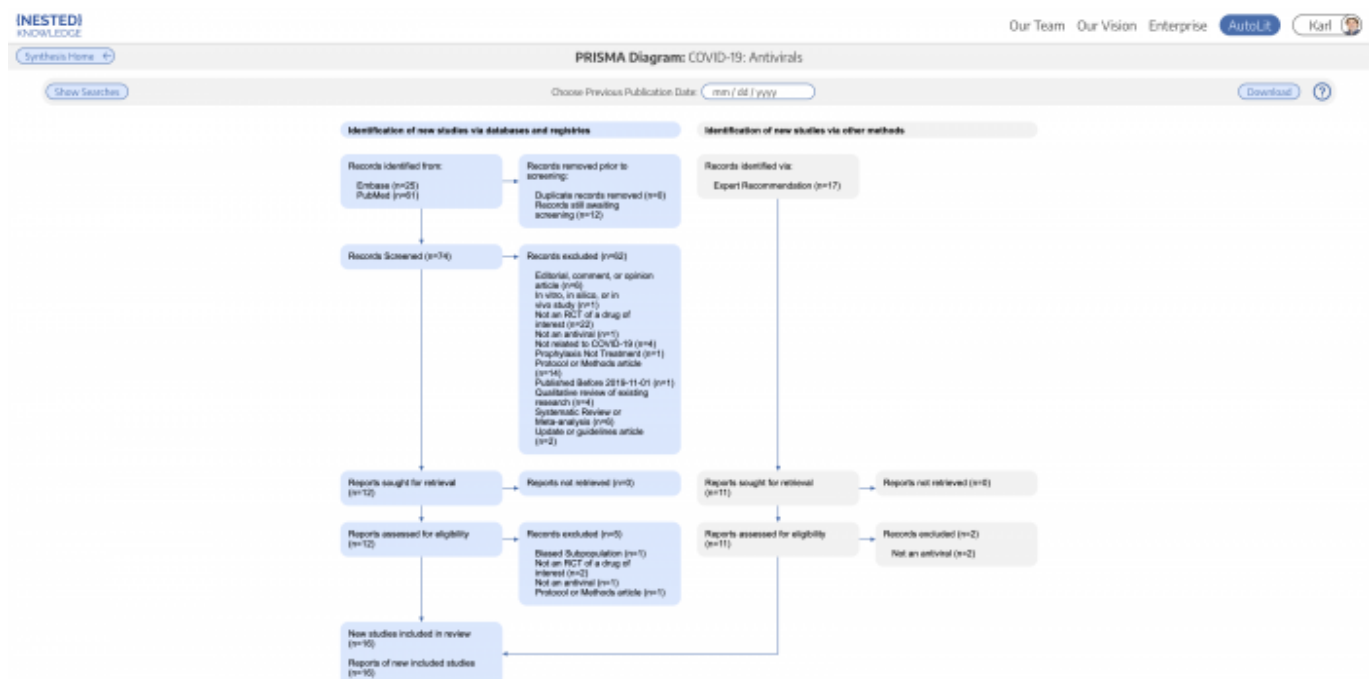
Read the authors' report of key findings and conclusions. You can also view updated methods, figures, and sources for this review.

PRISMA 2020

Risk of Bias

PRISMA

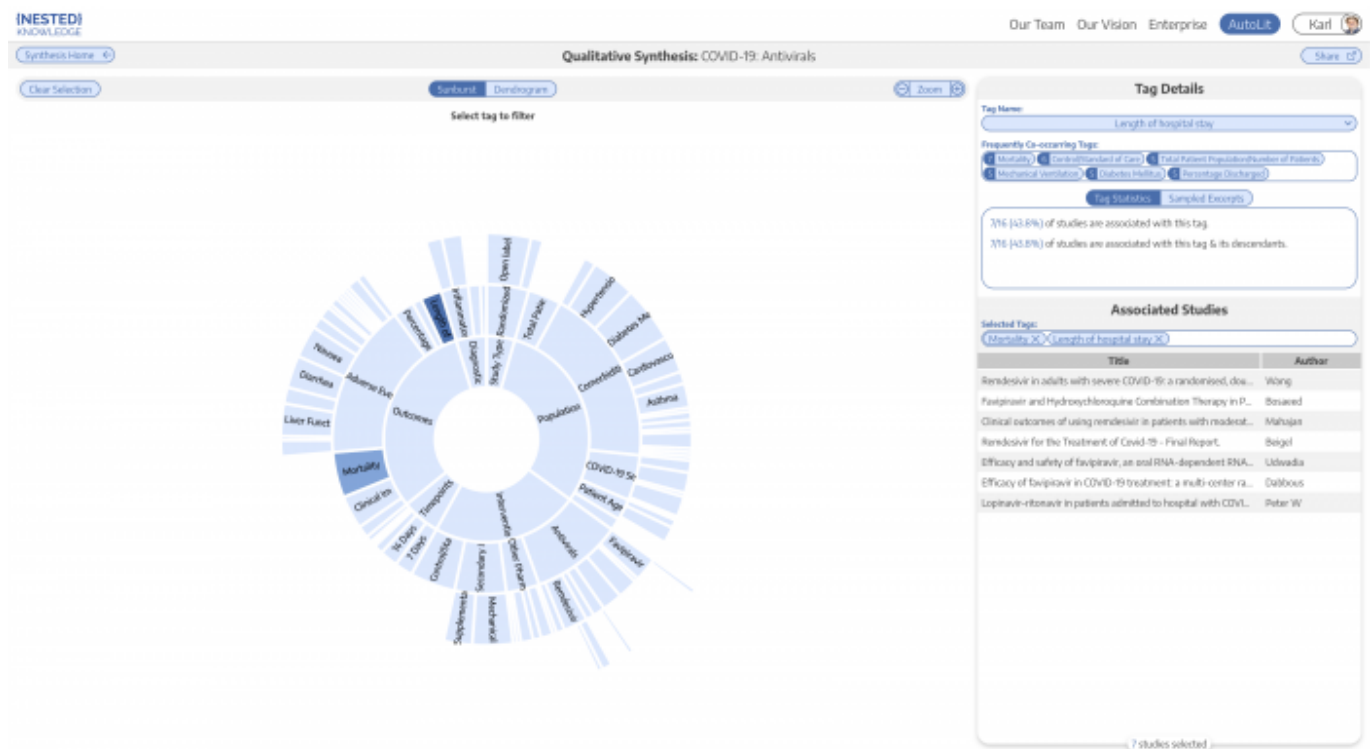
Click the PRISMA button in the bottom left of the page to view a PRISMA 2020 flow diagram. The diagram is auto-populated based on searches imported and studies screened in AutoLit.



We can see that the 2 searches and 17 (19 - 2 duplicated records already imported in search) expert recommendations are displayed in the diagram. The diagram may be right clicked and saved as an arbitrary resolution SVG or exported in a variety of formats.

Qualitative Synthesis

Navigate back to Synthesis Home and click the Qualitative Synthesis box. Qualitative Synthesis (QLS) displays data gathered in the Tagging Module. Each slice in the sunburst diagram is a tag. Its width corresponds to how frequently it was applied. Its distance from the center corresponds to its depth in the hierarchy (how many "is a" relationships are between it and its root tag). Click a slice to filter studies displayed to those where the tag was applied. Clicking multiple slices filters to studies with all the selected tags applied. The rightmost bar shows relevant studies (bottom) and some data about the tag (top), like its frequency, excerpts, and tags that were commonly applied with the selected tag.



In this tag selection, we see that Mortality and Length of Stay were reported as outcomes in 7 of 16 included studies. Click the rows of the study table to take a deep dive into the extracted data.

Quantitative Synthesis

Navigate back to Synthesis Home and click the Quantitative Synthesis box. Quantitative Synthesis (QNS) displays data gathered in the Extraction Module. QNS contains 3 different analyses automatically computed from extracted data.

The Summary tab contains pooled estimates of outcomes, broken out by interventions. Interventions may be expanded to different levels of precision, while outcomes analyzed may be selected from the dropdown menus. In the below example, we find a 7.3% mortality rate among all antivirals, against an 11.6% mortality rate for control/standard of care; Arbidol suggests a lower rate but is only supported by a single study.

INESTED

KNOWLEDGE

Our Team

Our Vision

Enterprise

AutoLit

Karl

Synthesis Home

Quantitative Synthesis: COVID-19: Antivirals

?

Summary

Comparison

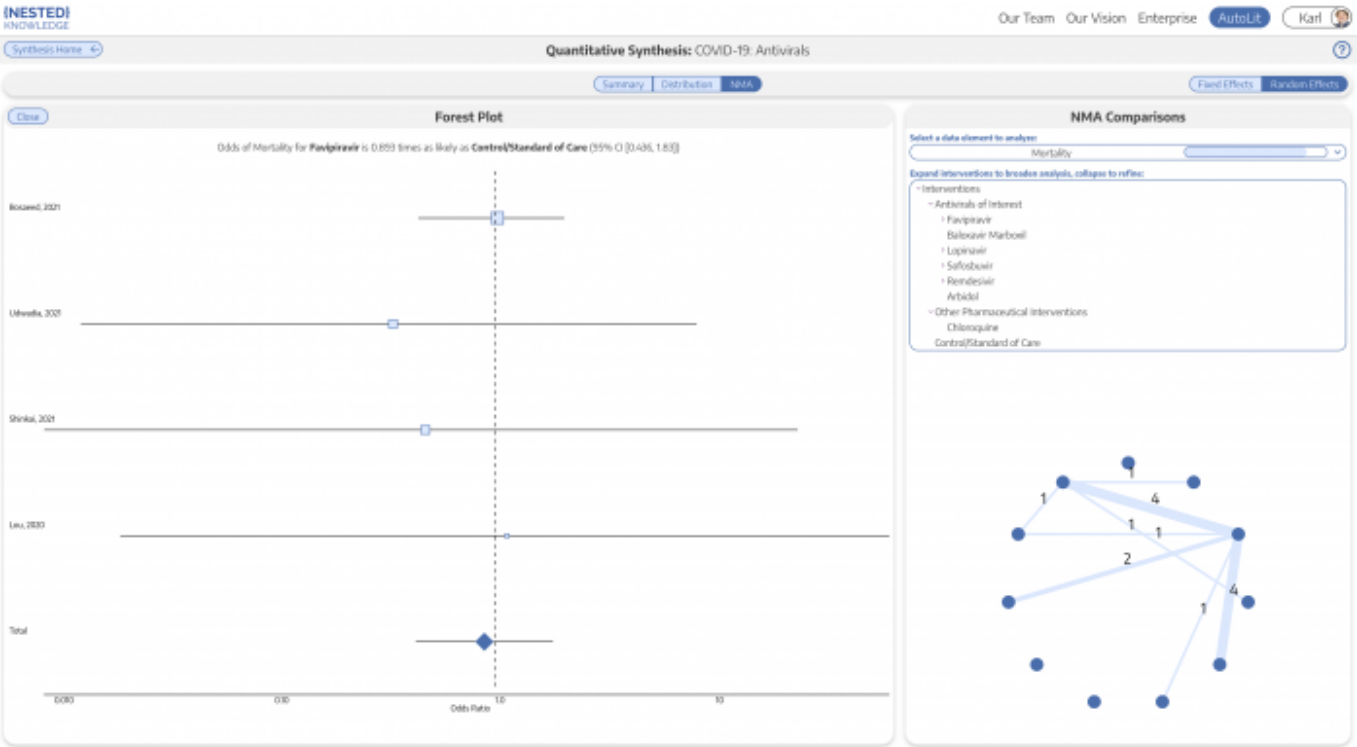
NMA

Fixed Effects

Random Effects

Intervention	Outcome: Mortality			Outcome: Diarrhea			Outcome: Mechanical Ventilation		
	(n/N)	%	[CI]	(n/N)	%	[CI]	(n/N)	%	[CI]
Interventions	94238297	9.8%	[7.7%, 12.3%]	1052725	6.7%	[4.4%, 10.1%]	8527591	8.4%	[6.0%, 11.7%]
Antivirals of Interest	5842555	7.3%	[4.8%, 11.0%]	861143	8.5%	[5.2%, 13.4%]	3703443	7.7%	[4.9%, 11.8%]
Favipiravir	162476	2.7%	[0.5%, 8.0%]	210294	9.0%	[3.1%, 26.0%]	421294	15.3%	[9.4%, 23.8%]
Baloxavir Marboxil	0/10	4.5%	[0.3%, 44.8%]	1/10	10.0%	[1.4%, 46.7%]	1/10	10.0%	[1.4%, 46.7%]
Lopinavir	3931715	22.9%	[21.0%, 25.0%]	19133	11.2%	[5.5%, 50.8%]	1921715	9.3%	[8.0%, 10.8%]
Rilastavir									
Atazanavir									
Sofosbuvir	16153	10.4%	[6.4%, 16.0%]				6153	5.3%	[2.5%, 10.9%]
Dactinavir									
Remdesivir	591621	6.6%	[3.2%, 13.1%]	2159	5.0%	[3.5%, 7.2%]	1941621	1.7%	[0.2%, 5.4%]
Ribavirin									
Arbital	0/120	0.4%	[0.0%, 6.3%]	18165	11.7%	[7.5%, 17.8%]	23120	22.5%	[15.9%, 30.8%]
Li et al.				3/5	8.6%	[2.8%, 23.4%]			
Chen et al.	0/100	0.4%	[0.0%, 6.3%]	15120	12.5%	[7.3%, 19.7%]	23120	22.5%	[15.9%, 30.8%]
Nucleosides									
Acetaminophen									
Other Pharmaceutical Interventions	2/48	4.2%	[1.0%, 15.2%]	2/48	4.2%	[1.0%, 15.2%]	4/48	8.3%	[3.2%, 20.2%]
Secondary Interventions									
Control/Standard of Care	9204654	11.8%	[7.9%, 16.6%]	11534	3.3%	[1.3%, 8.2%]	4784530	9.2%	[4.7%, 17.5%]

The NMA tab computes a Network Meta-Analysis, which estimates effect sizes between pairwise comparisons of interventions on an outcome. The NMA comes with a network diagram (showing how commonly interventions were compared with one another), an effect size matrix, and forest plots (accessed by clicking on a cell in the effects matrix). Use the intervention expansion menu on the right of the page to refine interventions analyzed.



Closing Remarks

You've now seen how a review may be completed & shared with the Nested Knowledge platform. We encourage you to head back to AutoLit and explore the variety of configuration options, and ever-growing feature set we didn't get to cover here. If you're feeling ambitious, start your own Nest from

scratch!

Use this documentation to guide you through more complex topics, and as always, please reach out to our support team via email and make requests on [Nolt](#).

From:

<https://wiki.nested-knowledge.com/> - **Nested Knowledge**

Permanent link:

<https://wiki.nested-knowledge.com/doku.php?id=wiki:start:demo:covid19>

Last update: **2023/06/27 21:51**