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1. Traditional Chinese herbal medicine for treating novel coronavirus (COVID-19) pneumonia: protocol for a systematic review and meta-analysis

Keywords: COVID-19; Coronavirus; Meta-analysis; Pneumonia; Systematic review;

Traditional Chinese herbal medicine emerging infectious diseases.

Yuxi Li¹, Xiaobo Liu², Liuxue Guo³, et al . *Syst Rev* 2020 Apr 8;9(1):75.

Abstract

Background: A new type of coronavirus, novel coronavirus (COVID-19), is causing an increasing number of cases of pneumonia and was declared a Public Health Emergency of International Concern by the World Health Organization on 30 January 2020. The virus first appeared in Wuhan, China, in late December 2019, and traditional Chinese herbal medicine is being used for its treatment. This systematic review and meta-analysis will assess studies of the effects of traditional Chinese herbal medicine in COVID-19 pneumonia.

Methods: We will search electronic databases including PubMed, Embase, the Cochrane Central Register of Controlled Trials (CENTRAL), Chinese Biomedical Literature Database (CBM), China National Knowledge Infrastructure (CNKI), Chinese Science and Technology Periodical Database (VIP), and Wanfang database using keywords related to COVID-19 and traditional Chinese herbal medicine. Reference lists of relevant trials and reviews will be searched. We will manually search gray literature, such as conference proceedings and academic degree dissertations, and trial registries. Two independent reviewers will screen studies (XL and DZ), extract data (YL and LG), and evaluate risk of bias (YL and DZ). Data analysis will be conducted using the Review Manager software (version 5.3.5) and R software (version 3.6.1). Statistical heterogeneity will be assessed using a standard chi-square test with a significance level of $P < 0.10$. Biases associated with study size (e.g., publication bias) will be investigated using funnel plots, Egger's test and Begg's test, and Trim and Fill analysis.

Discussion: This study will provide a high-quality synthesis of the effects of traditional Chinese herbal medicine for COVID-19. The use of traditional Chinese herbal medicine for treatment or prevention of these novel viral infections affecting the pneumonia will be investigated.

Systematic review registration: PROSPERO registration number: CRD42020168004.

2. COVID-19: An Update on the Epidemiological, Clinical, Preventive and Therapeutic Evidence and Guidelines of Integrative Chinese-Western Medicine for the Management of 2019 Novel Coronavirus Disease

Keywords: 2019-nCoV; COVID-19; Chinese Medicine; Guideline; Integrative Medicine; Review.

[Kam Wa Chan](#)¹, [Vivian Taam Wong](#)², [Sydney Chi Wai Tang](#)¹ *Am J Chin Med* . 2020;48(3):737-762.

Abstract

As of 22 February 2020, more than 77662 cases of confirmed COVID-19 have been documented globally with over 2360 deaths. Common presentations of confirmed cases include fever, fatigue, dry cough, upper airway congestion, sputum production, shortness of breath, myalgia/arthralgia with lymphopenia, prolonged prothrombin time, elevated C-reactive protein, and elevated lactate dehydrogenase. The reported severe/critical case ratio is approximately 7-10% and median time to intensive care admission is 9.5-10.5 days with mortality of around 1-2% varied geographically. Similar to outbreaks of other newly identified virus, there is no proven regimen from conventional medicine and most reports managed the patients with lopinavir/ritonavir, ribavirin, beta-interferon, glucocorticoid and supportive treatment with remdesivir undergoing clinical trial. In China, Chinese medicine is proposed as a treatment option by national and provincial guidelines with substantial utilization. We reviewed the latest national and provincial clinical guidelines, retrospective cohort studies, and case series regarding the treatment of COVID-19 by add-on Chinese medicine. We have also reviewed the clinical evidence generated from SARS and H1N1 management with hypothesized mechanisms and latest *in silico* findings to identify candidate Chinese medicines for the consideration of possible trials and management. Given the paucity of strongly evidence-based regimens, the available data suggest that Chinese medicine could be considered as an adjunctive therapeutic option in the management of COVID-19

3. A single arm clinical study of 86 patients with common type of coronavirus disease 2019 treated by integrated traditional Chinese and Western medicine: multicenter case observation from 7 designated hospitals in Henan Province

[Yang Xie](#)^{1,2}, [Jiajia Wang](#)^{1,2}, [Suyun Li](#)^{1,2}, et al

Zhonghua Wei Zhong Bing Ji Jiu Yi Xue 2020 Aug;32(8):922-927.

Abstract

Objective: To evaluate the clinical effect of integrated traditional Chinese and Western medicine on common type of coronavirus disease 2019 (COVID-19) in Henan Province.

Methods: A prospective single arm clinical study was performed. Patients with common type of COVID-19 admitted to seven designated hospitals for COVID-19 in Henan Province from January 25th to February 26th, 2020 were enrolled, and treated with integrated traditional Chinese and Western medicine. The negative transformation of 2019 novel coronavirus (2019-nCoV) nucleic acid, disease outcome, hospital stay, clinical symptoms and signs scores, and chest imaging performance were observed.

Results: Totally 86 cases were included in the analysis, including 48 males (55.8%), aged 43.5 (35.0, 53.3) years old, 24 patients (27.9%) with previous medical history. Fifty-eight patients were primarily diagnosed COVID-19 and 28 patients were transferred. The 2019-nCoV nucleic acid of 86 cases (100%) turned negative, and the median time of turning negative was 10 (7, 14) days. Eighty-six cases (100%) were discharged from hospital, and none turned into the severe type; the average length of hospital stay was (13.8±5.6) days. The scores of fever, cough, chest tightness, shortness of breath, and fatigue decreased with the treatment time, and the scores of 7 days and 14 days after treatment were significantly lower than those before treatment [fever (points): 0 (0, 0), 0 (0, 0) vs. 1 (0, 1); cough (points): 1 (0, 1), 0 (0, 1) vs. 1 (0, 2); chest tightness (points): 0 (0, 0), 0 (0, 0) vs. 0 (0, 1); shortness of breath (points): 0 (0, 0), 0 (0, 0) vs. 0 (0, 1); fatigue (points): 0 (0, 1), 0 (0, 1) vs. 1 (0, 1); all $P < 0.05$]. The improvement rate of X ray and CT image was 42.9% (12/28) and 81.0% (64/79), respectively.

Conclusions: The treatment with integrated traditional Chinese and Western medicine has good curative effect on common type of COVID-19 in 7 designated hospitals of Henan Province. It can improve the clinical symptoms, promote the absorption of pulmonary inflammation, and to some extent control the progress of disease and shorten the time of turning negative of virus nucleic acid and hospital stay.

4. Clinical characteristics of coronavirus disease 2019 in Gansu province, China

Keywords: Coronavirus disease 2019 (COVID-19); Gansu province; severe acute respiratory syndrome coronavirus 2 (SARSCoV-2).

Hongmei Yue¹, Xue Bai², Jitao Wang³, et al *Ann Palliat Med* 2020 Jul;9(4):1404-1412.

Abstract

Background: The novel coronavirus, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), has outbreak in the world. Little is known about the clinical characteristics of patients with SARS-CoV-2 infection in the high-altitude region of China. We reported the clinical characteristics of patients with coronavirus disease 2019 (COVID-19) in Gansu province, China.

Methods: In this retrospective study, patients with laboratory-confirmed SARS-CoV-2 infection were consecutively enrolled from January 21, 2020 to February 11, 2020. The information on the epidemiological, clinical characteristics, laboratory tests, radiological features on admission, treatment and outcome were obtained with the final follow-up of March 13, 2020. On the basis of the median length of hospital stay, patients were further analyzed in two groups (long- vs. short-hospital stay).

Results: Of the 86 patients of COVID-19 in 11 cities of Gansu Province, the median hospital stay was 14.0 days (interquartile rang, 11.0-19.0 days). In the overall cohort, the median age was 41.0 years (interquartile rang, 31.0-54.3 years), and 48 (55.8%) patients were female. Forty (46.5%) had a history of exposure to epidemic regions, but none exposed to the Huanan seafood market in Wuhan. Common symptoms included fever (41, 47.7%), and cough (37, 43.0%). On admission, 30 (34.9%) and 58 (67.4%) patients had leukopenia and lymphopenia. According to chest CT scans, 53 (66.3%) of 80 patients showed bilateral pneumonia, and 19 (23.8%) of 80 patients showed unilateral pneumonia. Of the 15 asymptomatic cases, 10 (66.6%) cases were found CT findings of pneumonia. Besides, there were 65 (75.6%) patients with mild and moderate type of COVID-19. All 86 patients received antiviral and traditional Chinese medicine therapy, 53 (61.6%) received antibacterial therapy, and 3 (3.5%) patients received invasive ventilator mechanical ventilation. The proportion of patients received antibiotic treatment in long-hospital stay group was significantly higher than that in the short-hospital stay group (P=0.045). As of March 13, 2020, 84 (97.7%) patients were discharged, and two (2.3%) cases died.

Conclusions: In the Gansu province cohort of 86 patients of COVID-19, most patients were with mild or moderate type, and most asymptomatic cases showed CT imaging findings of SARS-CoV-2 related pneumonia.

5. Clinical characteristics and drug therapies in patients with the common-type coronavirus disease 2019 in Hunan, China

Keywords: COVID-19; Clinical characteristics; Infection; Pharmacotherapy.

Qiong Huang · Xuanyu Deng · Yongzhong Li · et al. *Int J Clin Pharm* 2020 Jun;42(3):837-845.

Abstract

Background Clinical characteristics of patients with the coronavirus disease 2019 (COVID-19) may present differently within and outside the epicenter of Wuhan, China. More clinical investigations are needed. **Objective** The study was aimed to describe the clinical characteristics, laboratory parameters, and therapeutic methods of COVID-19 patients in Hunan, China. **Setting** The First Hospital of Changsha, First People's Hospital of Huaihua, and the Central Hospital of Loudi, Hunan province, China. **Methods** This was a retrospective multi-center case-series analysis. Patients with confirmed COVID-19 diagnosis hospitalized at the study centers from January 17 to February 10, 2020, were included. The following data were obtained from electronic medical records: demographics, medical history, exposure history, underlying comorbidities, symptoms, signs, laboratory findings, computer tomography scans, and treatment measures. **Main outcome measure** Epidemiological, clinical, laboratory, and radiological characteristics and treatments. **Results** A total of 54 patients were included (51 had the common-type COVID-19, three had the severe-type), the median age was 41, and 52% of them were men. The median time from the first symptoms to hospital admission was seven days. Among patients with the common-type COVID-19, the median length of stay was nine days, and 21 days among patients with severe COVID-19. The most common symptoms at the onset of illness were fever (74.5%), cough (56.9%), and fatigue (43.1%) among patients in the common-type group. Fourteen patients (37.8%) had a reduced WBC count, 23 (62.2%) had reduced eosinophil ratio, and 21 (56.76%) had decreased eosinophil count. The most common patterns on chest-computed tomography were ground-glass opacity (52.2%) and patchy bilateral shadowing (73.9%). Pharmacotherapy included recombinant human interferon α 2b, lopinavir/ritonavir, novaferon, antibiotics, systematic corticosteroids and traditional Chinese medicine prescription. The outcome of treatment indicated that in patients with the common-type COVID-19, interferon- α 2b, but not novaferon, had some benefits, antibiotics treatment was not needed, and corticosteroids should be used cautiously. **Conclusion** As of February 10, 2020, the symptoms of COVID-19 patients in Hunan province were relatively mild comparing to patients in Wuhan, the epicenter. We observed some treatment benefits with interferon- α 2b and corticosteroid therapies but not with novaferon and antibiotic treatment in our study population.

6. COVID-19: An Update on the Epidemiological, Clinical, Preventive and Therapeutic Evidence and Guidelines of Integrative Chinese-Western Medicine for the Management of 2019 Novel Coronavirus Disease

Keywords: 2019-nCoV; COVID-19; Chinese Medicine; Guideline; Integrative Medicine; Review.

Kam Wa Chan¹, Vivian Taam Wong², Sydney Chi Wai Tang⁴ *Am J Chin Med* 2020;48(3):737-762.

Abstract

As of 22 February 2020, more than 77662 cases of confirmed COVID-19 have been documented globally with over 2360 deaths. Common presentations of confirmed cases include fever, fatigue, dry cough, upper airway congestion, sputum production, shortness of breath, myalgia/arthralgia with lymphopenia, prolonged prothrombin time, elevated C-reactive protein, and elevated lactate dehydrogenase. The reported severe/critical case ratio is approximately 7-10% and median time to intensive care admission is 9.5-10.5 days with mortality of around 1-2% varied geographically. Similar to outbreaks of other newly identified virus, there is no proven regimen from conventional medicine and most reports managed the patients with lopinavir/ritonavir, ribavirin, beta-interferon, glucocorticoid and supportive treatment with remdesivir undergoing clinical trial. In China, Chinese medicine is proposed as a treatment option by national and provincial guidelines with substantial utilization. We reviewed the latest national and provincial clinical guidelines, retrospective cohort studies, and case series regarding the treatment of COVID-19 by add-on Chinese medicine. We have also reviewed the clinical evidence generated from SARS and H1N1 management with hypothesized mechanisms and latest *in silico* findings to identify candidate Chinese medicines for the consideration of possible trials and management. Given the paucity of strongly evidence-based regimens, the available data suggest that Chinese medicine could be considered as an adjunctive therapeutic option in the management of COVID-19.

7. Current treatment of COVID-19 in renal patients: hope or hype?

Keywords: Antiviral therapy; COVID-19 treatment; Chronic kidney disease; Nephrology.

Palumbo Roberto¹, Londrino Francesco¹, Cordova Emanuela¹, et al. *Intern Emerg Med.* 2020 Sep 28;1-10.

Abstract

To date the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), known as COVID-19, is for clinicians the most difficult global therapeutic problem. In this landscape, the management of patients with chronic kidney disease, acute kidney injury or patients undergoing immunosuppressant therapies for kidney transplant or glomerular diseases, represent a clinical challenge for nephrologists, especially in patients with severe acute lung involvement. Therefore in this setting, due to the lack of anti-COVID treatment schedules, tailored management is mandatory to reduce the side effects, as consequence of impaired renal function and drugs interactions. We report the main treatment actually used against SARS-CoV-2, underlining its possible use in the nephropatic patients and the central role of nephrologists to improve the clinical outcome.

8. The efficacy of acupuncture for improving the side effects of COVID-19 western medicine treatments: A protocol for a systematic review and meta-analysis

Kuei-Yu Huang^{1,2}, Ching-Hao Chang³, Chung-Hua Hsu^{1,4} *Medicine (Baltimore)*, 2020 Jul 10;99(28):e21185.

Abstract

Background: Coronavirus disease 2019 (COVID-19) is an acute respiratory infectious disease, which is pandemic, infectious, and high mortality. Many commonly discussed medications being used to treat COVID-19 are not without potentially harmful side effects such as heart, liver, kidney problems, or other clinical symptoms. Acupuncture is a nonpharmacological method. When a needle is inserted into an acupuncture point, traumatic physical stimulation occurs, and then the neuroendocrine immune regulation network is activated. This study aimed to evaluate the efficacy of acupuncture for improving the side effects of COVID-19 western medicine treatments.

Methods: From their inception to December 10, 2020, the following electronic databases will be searched to identify relevant studies: MEDLINE, PubMed, EMBASE, the Cochrane Library, Chinese National Knowledge Infrastructure (CNKI), and the Chinese Biomedical Literature Database (CBM), without any language restrictions. Randomized controlled trials and credible clinical observations without randomization include patients diagnosed with COVID-19, and receiving western medicine treatments or acupuncture, with no restrictions on disease stage, age, sex, or ethnicity. Primary outcomes would be used to evaluate the mortality rate, C-reactive protein (CRP), creatine, troponin, liver enzymes (aspartate aminotransferase and alanine aminotransferase), blood pressure, clinical symptoms (including fever, fatigue, myalgia, cough, skin rash, nausea, vomiting, and diarrhea), and serum cytokine levels. Secondary outcome would be used to evaluate the adverse events of acupuncture. Risk of bias will be assessed by 2 review authors independently according to the guidelines set out in the Cochrane Handbook for Systematic Reviews of Interventions.

Discussion: This is the first to evaluate the efficacy of acupuncture for improving the side effects of COVID-19 western medicine treatments. A longer follow-up should be considered in future studies.

Conclusion: This systematic review and meta-analysis would provide evidence of acupuncture specifically focused on its effectiveness and safety for patients with COVID-19 western medications adverse effects.

9. Acupuncture for breathlessness in COVID-19: A protocol for systematic review and meta-analysis
Baozhen Zhang , Kai Zhang , Qilin Tang *Medicine (Baltimore)* 2020 Jul 2;99(27):e20701.

Abstract

Background: At present, accumulative attention has been paid to coronavirus disease 2019 (COVID-19) due to its global prevalence. Acupuncture may play a beneficial role in patients with breathlessness

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in COVID-19. This study is designed to determine the efficacy and safety of acupuncture for breathlessness in COVID-19.

Methods: Randomized controlled trials (RCT) will be searched from 7 electronic databases, with the last search update being 30 June 2020. Studies by registers of clinical trials will be additionally searched. Two investigators will independently select studies, extract data and evaluate study quality. Finally, a meta-analysis will be used to evaluate the pooled intervention effect if possible.

Results: Our present findings will indicate the application of acupuncture as an adjunctive treatment for dyspnea in COVID-19, which will be published in a peer-reviewed journal.

Conclusion: Our study will provide a reference foundation for clinical optimization of treatment.

10. **Understanding of guidance for acupuncture and moxibustion interventions on COVID-19 (Second edition) issued by CAAM**

Keywords: Acupuncture; COVID-19; External therapy; Moxibustion; Non-pharmaceutic measures.

Wei-Hong Liu^{1,2}, Sheng-Nan Guo¹, Fang Wang¹, Yang Hao¹ *World J Acupunct Moxibustion* 2020 Mar;30(1):1-4.

Abstract

At present, the situation of global fight against COVID-19 is serious. WHO (World Health Organization)-China Joint Mission fully confirms the success of "China's model" against COVID-19 in the report. In fact, one particular power in "China's model" is acupuncture and moxibustion of traditional Chinese medicine. To better apply "non-pharmaceutic measures"-the external technique of traditional Chinese medicine, in the article, the main content of *Guidance for acupuncture and moxibustion interventions on COVID-19* (Second edition) issued by China Association of Acupuncture-Moxibustion is introduced and the discussion is stressed on the selection of moxibustion device and the duration of its exertion.

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In the COVID-19 period, all members of ATCM. Please pay an attention to safety ; and please protect yourselves and your families!



