**Material suplementario**

**Tabla 1 – Estrategia de búsqueda (última actualización de 2020)**

|  |
| --- |
| **PubMed** |
| ("Medicine, Chinese Traditional" [MeSH Terms] OR "Acupuncture" OR "herbal medicine") AND ("coronavirus" [MeSH]) OR ("coronavirus infections" [MeSH Terms]) OR ("coronavirus") [GG1] [JPP2] OR ("covid 2019") OR ("SARS2") OR ("SARS-CoV-2") OR ("SARS-CoV-19") OR ("severe acute respiratory syndrome coronavirus 2" [supplementary concept]) OR ("covid-19" [nm]) OR ("severe acute respiratory" AND "pneumonia outbreak") OR ("novel cov") OR (2019ncov) OR ("sars cov2") OR (cov2) OR (ncov) OR ("covid19") OR ("coronaviridae") OR ("corona virus") OR (corona virus [tw]) OR (nCov [tw]) |
| **Embase** |
| ("Traditional Chinese Medicine" OR "chinese herbal medicine" OR acupuncture) AND ("COVID-19" OR "SARS-CoV-2" OR "2019-nCoV" OR ("severe acute respiratory syndrome coronavirus 2")  |
| **Scopus** |
| TITLE-ABS-KEY ("Traditional Chinese Medicine" OR "chinese herbal medicine" OR acupuncture) AND TITLE-ABS-KEY ("COVID-19" OR "SARS-CoV-2" OR "2019-nCoV") |

**Tabla 2 – Número de ensayos clínicos incluidos en cada base de datos (búsqueda de 29 de mayo de 2020)**

|  |  |  |
| --- | --- | --- |
| **Nombre** | **Página web**  | **Incluidos**  |
| U.S. National Library of Medicine | clinicaltrials.gov | 0 |
| Australian New Zealand Clinical Trials Registry (ANZCTR) | anzctr.org.au | 0 |
| Brazilian Clinical Trials Registry (ReBec) | ensaiosclinicos.gov.br | 0 |
| Chinese Clinical Trial Registry (ChiCTR) | chictr.org.cn  | 93 |
| Clinical Research Information Service (CRiS), Republic of Korea. | cris.nih.go.kr  | 0 |
| Clinical Trials Registry - India (CTRI) | ctri.nic.in/Clinicaltrials/advsearch.php  | 0 |
| Cuban Public Registry of Clinical Trials (RPCEC) | registroclinico.sld.cu/en/home  | 0 |
| EU Clinical Trials Register (EU-CTR) | clinicaltrialsregister.eu | 0 |
| German Clinical Trials Register (DRKS) | drks.de/drks\_web/  | 0 |
| Iranian Registry of Clinical Trials (IRCT) | irct.ir | 0 |
| International Standard Randomised Controlled Trial Number (ISRCTN) | isrctn.com/ | 0 |
| Japan Primary Registries Network (JPRN) | rctportal.niph.go.jp/ | 0 |
| Lebanese Clinical Trials Registry (LBCTR) | http://lbctr.emro.who.int/ | 0 |
| Thai Clinical Trials Registry (TCTR) | http://www.clinicaltrials.in.th/  | 0 |
| The Netherlands National Trial Register (NTR)  | trialregister.nl/ | 0 |
| Pan African Clinical Trial Registry (PACTR) | pactr.samrc.ac.za/ | 0 |
| Peruvian Clinical Trial Registry (REPEC) | ensayosclinicos-repec.ins.gob.pe/ | 0 |
| Sri Lanka Clinical Trials Registry (SLCTR) | https://slctr.lk  | 0 |

**Table 3. – PRISMA Extension for Scoping reviews (PRISMA-ScR) 2018 Checklist**

| **Section** | **Item** | **PRISMA-ScR Checklist item**  | **Reported on page #** |
| --- | --- | --- | --- |
| **Title**  |
| Title | 1 | Identify the report as a scoping review | 1 |
| **Abstract**  |
| Structured summary  | 2 | Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study synthesis methods; results; limitations; conclusions and implications of key findings | 2 |
| **Introduction**  |
| Rationale  | 3 | Describe the rationale for the review in the context of what is already known. Explain why the review question/objectives lend themselves to a scoping review approach | 4-5 |
| Objectives  | 4 | Provide an explicit statement of the question and objective being addressed with reference to their key elements (e.g., population or participants, concepts and context), or other relevant key elements used to conceptualize the review questions and/or objectives) | 6 |
| **Methods**  |
| Protocol and registration  | 5 | Indicate if a review protocol exists, if and where it can be accessed (e.g., web address), and, if available, provide registration information including registration number  | 6 |
| Eligibility criteria  | 6 | Specify the characteristics of the sources of evidence (e.g., years considered, language, publication status) used as criteria for eligibility, and provide a rationale | 6-7 |
| Information sources  | 7 | Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional sources) in the search and date last searched  | 7 |
| Search  | 8 | Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated | Supplementary file 1 |
| Selection of sources of evidence  | 9 | State the process for selecting studies (i.e., screening, eligibility) included in the scoping review | 8 |
| Data charting process  | 10 | Describe the methods of charting data from the included sources of evidence (e.g. piloted forms; forms that have been tested by the team before their use, whether data charting was done independently, in duplicate) and any processes for obtaining and confirming data from investigators | 8-9 |
| Data items  | 11 | List and define all variables for which data were sought and any assumptions and simplifications made | 8-9 |
| Critical appraisal of individual sources of evidence | 12 | If done, provide a rationale for conducting a critical appraisal of included sources of evidence; describe the methods used and how this information was used in any data synthesis (if appropriate) | NA |
| Summary measures  | 13 | Not applicable for scoping reviews | NA |
| Synthesis of results  | 14 | Describe the methods of handling and summarizing the data that were charted | 9 |
| Risk of bias across studies  | 15 | Not applicable for scoping reviews | NA |
| Additional analyses  | 16 | Not applicable for scoping reviews | NA |
| **Results**  |
| Selection of sources of evidence  | 17 | Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally using a flow diagram  | Figure 1 |
| Characteristics of sources of evidence  | 18 | For each source of evidence, present characteristics for which data were charted and provide the citations | Tables 1 y 2 |
| Critical appraisal within sources of evidence  | 19 | If done, present data on critical appraisal of included sources of evidence (see item 12) | NA |
| Results of individual Sources of evidence | 20 | For each included source of evidence, present the relevant data that were charted that relate to the review Questions and objectives | Tables 1 y 2 |
| Synthesis of results | 21 | Summarize and/or present the charting results as they relate to the review questions and objectives | 9-14 |
| Risk of bias across studies  | 22 | Not applicable for scoping reviews | NA |
| Additional analysis  | 23 | Not applicable for scoping reviews | NA |
| **Discussion**  |
| Summary of evidence  | 24 | Summarize the main results (including an overview of concepts, themes, and types of evidence available), explain how they relate to the review questions and objectives, and consider the relevance to key groups | 14-15 |
| Limitations  | 25 | Discuss the limitations of the scoping review process | 16 |
| Conclusions  | 26 | Provide a general interpretation of the results with respect to the review questions and objectives, as well as potential implications and/or next steps | 17-18 |
| **Funding** |
| Funding  | 27 | Describe sources of funding for the included sources of evidence, as well as sources of funding for the scoping review. Describe the role of the funders of the scoping review | 18 |

NA: not applicable; PRISMA-ScR: Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews.

From: Tricco AC, Lillie E, Zarin W, et al. PRISMA Extension for Scoping Reviews (PRISMA-ScR): Checklist and Explanation. Ann Intern Med. 2018;169:467-73.

**Bibliografía incluida en la revisión**

1. Jin YH, Cai L, Cheng ZS, et al. A rapid advice guideline for the diagnosis and treatment of 2019 novel coronavirus (2019-nCoV) infected pneumonia (standard version). Mil Med Res. 2020;7:4.

2. Wang Z, Chen X, Lu Y, Chen F, Zhang W. Clinical characteristics and therapeutic procedure for four cases with 2019 novel coronavirus pneumonia receiving combined Chinese and Western medicine treatment. Biosci Trends. 2020;14:64‐8.

3. Ling CQ. Traditional Chinese medicine is a resource for drug discovery against 2019 novel coronavirus (SARS-CoV-2). J Integr Med. 2020;18:87‐8.

4. Zhang DH, Wu KL, Zhang X, Deng SQ, Peng B. In silico screening of Chinese herbal medicines with the potential to directly inhibit 2019 novel coronavirus. J Integr Med. 2020;18:152‐8.

5 DU HZ, Hou XY, Miao YH, Huang BS, Liu DH. Traditional Chinese Medicine: an effective treatment for 2019 novel coronavirus pneumonia (NCP). Chin J Nat Med. 2020;18:206‐10.

6. Cui HT, Li YT, Guo LY, et al. Traditional Chinese medicine for treatment of coronavirus disease 2019: a review. Tradit Med Res. 2020;5:65-73.

7. Ren JL, Zhang AH, Wang XJ. Traditional Chinese Medicine for COVID-19 treatment. Pharmacol Res. 2020. Doi: 10.1016/j.phrs.2020.104743.

8. Li SY, Li GY, Zhang HR, Li B, Hofmann HA, Ci ZH. Clinical efficacy and experiences of Lung-toxin Dispelling Formula No.1 treating patients of corona virus disease 2019 type severe/type extremely severe. Zhongguo Shi Yan Fang Ji Xue Za Zhi. 2020. Doi: https://doi.org/10.13422/j.cnki.syfjx.20200843.

9. Zhang K. Is traditional Chinese medicine useful in the treatment of COVID-19? Am J Emerg Med. 2020. Doi: 10.1016/j.ajem.2020.03.046.

10. Chan KW, Wong VT, Tang SCW. 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. Am J Chin Med. 2020;48:737‐62.

11. Yang Y, Islam MS, Wang J, Li Y, Chen X. Traditional Chinese Medicine in the Treatment of Patients Infected with 2019-New Coronavirus (SARS-CoV-2): A Review and Perspective. Int J Biol Sci. 2020;16:1708‐17.

12. Deng CX. The global battle against SARS-CoV-2 and COVID-19. Int J Biol Sci. 2020;16:1676‐7.

13. Yi Y, Lagniton PNP, Ye S, Li E, Xu RH. COVID-19: what has been learned and to be learned about the novel coronavirus disease. Int J Biol Sci. 2020;16:1753-66.

14. Luo H, Tang QL, Shang YX, et al. Can Chinese Medicine Be Used for Prevention of Corona Virus Disease 2019 (COVID-19)? A Review of Historical Classics, Research Evidence and Current Prevention Programs. Chin J Integr Med. 2020;26:243‐50.

15. Liu WH, Guo SN, Wang F, Hao Y. Understanding of *guidance for acupuncture and moxibustion interventions on COVID-19* (Second edition) issued by CAAM. World J Acupunct Moxibustion. 2020;30:1‐4.

16. Runfeng L, Yunlong H, Jicheng H, et al. Lianhuaqingwen exerts anti-viral and anti-inflammatory activity against novel coronavirus (SARS-CoV-2). Pharmacol Res. 2020;156:104761.

17. Li T, Lu H, Zhang W. Clinical observation and management of COVID-19 patients. Emerg Microbes Infect. 2020;9:687-90.

18. Liu CX. Pay attention to situation of SARS-CoV-2 and TCM advantages in treatment of novel coronavirus infection. Chin Herb Med. 2020;12:97-103.

19. Liu L. Traditional Chinese medicine contributes to the treatment of COVID-19 patients. Chin Herb Med. 2020;12:95-6.

20. Xu J, Zhang Y. Traditional Chinese Medicine treatment of COVID-19. Complement Ther Clin Pract. 2020;39:101165.

21. Ho LTF, Chan KKH, Chung VCH, Leung TH. Highlights of traditional Chinese medicine frontline expert advice in the China national guideline for COVID-19. Eur J Integr Med. 2020;36:101116.

22. Gray PE, Belessis Y. The use of Traditional Chinese Medicines to treat SARS-CoV-2 may cause more harm than good. Pharmacol Res. 2020;156:104776.

23. Zhang AH, Ren JL, Wang XJ. Reply to “The use of traditional Chinese medicines to treat SARS-CoV-2 may cause more harm than good”. Pharmacol Res. 2020;157:104775.

24. Md Insiat Islam Rabby. Current Drugs with Potential for Treatment of COVID-19: A Literature Review. J Pharm Pharm Sci. 2020;23:58-64.

25. Grupo de expertos de la Asociación China de Acupuntura-Moxibustión. Guía sobre el uso de acupuntura y moxibustión para tratar COVID-19 (segunda edición). Rev Int Acupuntura. 2020;14:16-6.

26. Li Y, Liu X, Guo L, et al. Traditional Chinese herbal medicine for treating novel coronavirus (COVID-19) pneumonia: protocol for a systematic review and meta-analysis. Syst Rev. 2020;9:75.

27. Zhang ZJ, Wu WY, Hou JJ, et al. Active constituents and mechanisms of Respiratory Detox Shot, a traditional Chinese medicine prescription, for COVID-19 control and prevention: Network-molecular docking-LC-MSE analysis. J Integr Med. 2020;18:229-41.

28. Luo E, Zhang D, Luo H, et al. Treatment efficacy analysis of traditional Chinese medicine for novel coronavirus pneumonia (COVID-19): an empirical study from Wuhan, Hubei Province, China. Chin Med. 2020;15:34.

29. Cao P, Wu S, Wu T, et al. The important role of polysaccharides from a traditional Chinese medicine-Lung Cleansing and Detoxifying Decoction against the COVID-19 pandemic. Carbohydr Polym. 2020;240:116346.

30. Zhang L, Yu J, Zhou Y, Shen M, Sun L. Becoming a Faithful Defender: Traditional Chinese Medicine against Coronavirus Disease 2019 (COVID-19). Am J Chin Med. 2020;48:763-77.

31. Antonelli M, Donelli D, Maggini V, Firenzuoli F. Phytotherapic compounds against coronaviruses: Possible streams for future research. Phytother Res. 2020;34:1469-70.

32. Wang Y, Zeng X, Zhao Y, Chen W, Chen YZ. The pros and cons of traditional Chinese medicines in the treatment of COVID-19. Pharmacol Res. 2020;157:104873.

33. Ren X, Shao XX, Li XX, et al. Identifying potential treatments of COVID-19 from Traditional Chinese Medicine (TCM) by using a data-driven approach. J Ethnopharmacol. 2020;258:112932.

34. Zhang D, Zhang B, Lv JT, Sa RN, Zhang XM, Lin ZJ. The clinical benefits of Chinese patent medicines against COVID-19 based on current evidence. Pharmacol Res. 2020;157:104882.

35. Sinha SK, Shakya A, Prasad SK, et al. An in-silico evaluation of different Saikosaponins for their potency against SARS-CoV-2 using NSP15 and fusion spike glycoprotein as targets. J Biomol Struct Dyn. 2020;1-12.