uses with the occurrence of respiratory and

cardiovascular adverse effects. Hence, as a

cautionary approach, it is better to recommend the

use of NSAIDs as the first-line option for managing

COVID-19 symptoms (302). The use of

corticosteroids in COVID-19 patients is still a matter

of controversy and requires further systematic

clinical studies. The guidelines that were put forward

to manage critically ill adults suggest the use of

systemic corticosteroids in mechanically ventilated

adults with ARDS (303). The generalized use of

corticosteroids is not indicated in COVID-19, since

there are some concerns associated with the use of

corticosteroids in viral pneumonia. Stem cell therapy

using mesenchymal stem cells (MSCs) is another

hopeful strategy that can be used in clinical cases of

COVID-19 owing to its potential

immunomodulatory capacity. It may have a

beneficial role in attenuating the cytokine storm that

is observed in severe cases of SARS-CoV-2

infection, thereby reducing mortality. Among the

different types of MSCs, expanded umbilical cord

MSCs can be considered a potential therapeutic

agent that requires further validation for managing

critically ill COVID-19 patients (304).

Repurposed broad-spectrum antiviral drugs