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elsewhere. Immunomodulatory agents. SARS-CoV-2 triggers a strong immune response which may cause cytokine storm syndrome "". Thus, immunomodulatory agents that inhibit the excessive inflammatory response may be a potential adjunctive therapy for COVID-19. Dexamethasone is a corticosteroid often used in a wide range of conditions to relieve inflammation through its anti-inflammatory and immunosuppressant effects. Recently, the RECOVERY trial found dexamethasone reduced mortality by about one third in hospitalized patients with COVID-19 who received invasive mechan- ical ventilation and by one fifth in patients receiving oxygen. By contrast, no benefit was found in patients without respiratory support"". Tocilizumab and sarilumab, two types of interleukin-6 (IL-6) receptor-specific antibodies previously used to reat various types of arthritis, including rheumatoid arthritis, and cytokine release syndrome, showed effec- iveness in the treatment of severe COVID-19 by atten- uating the cytokine storm in a small uncontrolled trial". Bevacizumab is an anti-vascular endothelial growth 'actor (VEGF) medication that could potentially reduce pulmonary oedema in patients with severe COVID-19. Eculizumab is a specific monoclonal antibody that inhibits the proinflammatory complement protein C5. Preliminary results showed that it induced a drop of inflammatory markers and C-reactive protein levels, suggesting its potential to be an option for the treatment of severe COVID-19 (REF. "").