## Supplement

**Title:** Immunomodulators for immunocompromised patients hospitalized for COVID-19: A meta-analysis of randomized controlled trials

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eTable 1. World Health Organization ordinal scale utilized in the meta-analysis							
1	Not hospitalized, no limitations on activities						
2	Not hospitalized, limitation on activities and/or requiring home oxygen						
3	Hospitalized, not requiring supplemental oxygen – no longer requires ongoing medical care						
4	Hospitalized, not requiring supplemental oxygen – requiring ongoing medical care						
5	Hospitalized, requiring supplemental oxygen						
6	Hospitalized, on high-flow nasal oxygen therapy or non-invasive mechanical ventilation						
7	Hospitalized, on mechanical ventilation or extracorporeal membrane oxygenation						
8	Death						

eTable 2. Grading of Recommendations	Assessment, Development,	and Evaluation (GRADE) assessment.
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Certainty assessment					No. of patients		Effect					
No. of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Immunomodulators	Control	Relative (95% CI)	Absolute (95% CI)	Certainty	Importance

## 28-day mortality

11	randomized	not	not serious	not serious	very serious <sup>a</sup>	none	30/182 (16.5%)	41/215	RR 0.93	13 fewer	$\oplus \oplus \bigcirc \bigcirc$	CRITICAL
	trials	serious						(19.1%)	(0.61 to 1.41)	per 1.000	Low	
										(from 74		
										fewer to 78		
										more)		

No.: number; CI: confidence interval; RR: risk ratio

Imprecision was downgraded by 2 levels because the 95% of the relative risk (RR) was sufficiently wide that the estimate could either include appreciable harm or benefit of the intervention (thresholds: 0.61 and 1.41), and the optimal information size criterion is not met.