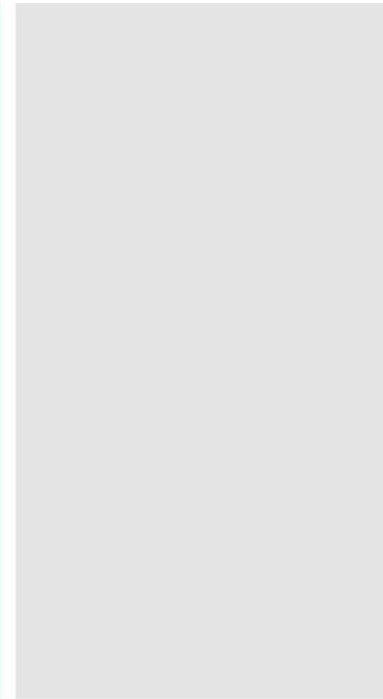


Systematic review, 5.1.2e
5.1.2e & editorial and the WHO
GDG advice on masks



Letter to Lancet

5.1.2e

- Analysis of a subgroup of observational studies. Certainty of effect (Grade) as low. → We would argue it is lower still, as the authors appear to have misclassified several studies with regard to mask type.

Editorial by 5.1.2e and 5.1.2e: the real push

- Their statement disregards the important limitations of observational studies (e.g., recall bias and limited ability to control for additional exposures), analytical shortcomings, and that the mask difference was statistically significant only when accounting for aerosol-generating procedures, (consistent with current guidelines)
- Also ignored are systematic reviews of RT of N95s versus surgical masks that consistently found no significant differences in risk
- MacIntyre and Wang's push, based on low certainty findings, highly susceptible to bias, and that contradicts higher quality evidence is scientifically unjustified

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WILEY

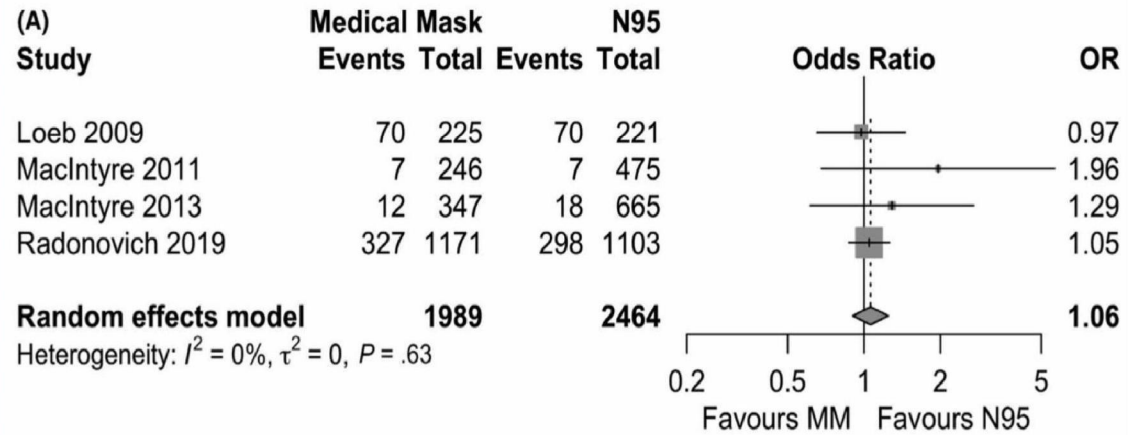
**FORMAL SYSTEMATIC REVIEW (COMMISSIONED
OR NON-COMMISSIONED)**

Medical masks vs N95 respirators for preventing COVID-19 in healthcare workers: A systematic review and meta-analysis of randomized trials



5.1.2e

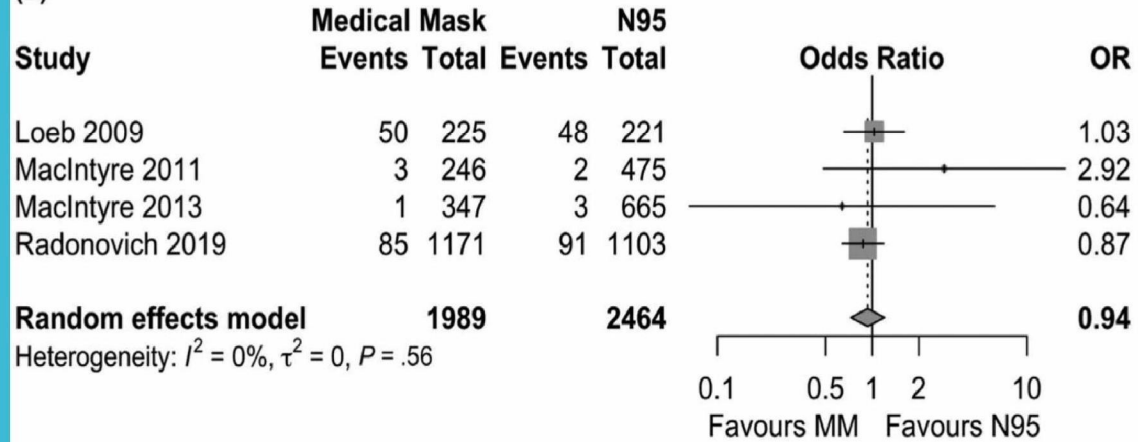
Laboratory confirmed viral respiratory infection



5.1.2e

Laboratory-confirmed influenza infection

(B)



WHO advice based on community transmission

- Countries/area/territories experiencing larger outbreaks of local transmission defined through an assessment of factors including, but not limited to:
 - Large numbers of cases not linkable to transmission chains
 - Large numbers of cases from sentinel lab surveillance
 - Multiple unrelated clusters in several areas of the country
- Source: <https://www.who.int/publications-detail/global-surveillance-for-covid-19-caused-by-human-infection-with-covid-19-virus-interim-guidance>