Confirmed Cases | Deaths Global Confirmed Cases: 334,005,099 US 28-Day: 15,395,651 | 42,143 Global deaths: 5,554,646 Totals: 67.589.830 | 853.955 France 28-Day: 5,538,762 | 5,552 Data as at 19 January 2022 (09.33 local time) -Totals: 14,284,535 | 128,629 Johns Hopkins University live-tracking; United Kingdom 28-Day: 3,888,961 | 4,854 Totals: 15,501,850 | 153,017 www.arcgis.com/apps/opsdashboard/index.html# Italy 28-Day: 3,384,942 | 5,613 /bda7594740fd40299423467b48e9ecf6 DATA Totals: 9,018,425 | 141,825 Spain 28-Day: 2,889,272 | 2,200 Totals: 8,518,975 | 91,277 India 28-Day: 2,866,107 | 8,754 Totals: 37,804,933 | 487,065 Argentina 28-Day: 1,802,279 | 1,301 Totals: 7,318,305 | 118,420 Australia 28-Day: 1,611,188 | 619 Totals: 1,954,977 | 2,843 Number of Confirmed Cases: 10,201,488 Number of Deaths: 232,770 **AFRICA** Number of Recoveries: 9,089,637 Source: Africa CDC WHO recommends two new drugs to treat patients with COVID-19 The World Health Organization (WHO) recommended on Thursday two new drugs to treat patients with COVID-19, one for patients with critical diseaseand one for non-severe cases. The first drug, baricitinib, is a Janus kinase (JAK) inhibitor- a class of drugs used to treat autoimmune conditions, blood and bone marrow cancers, and rheumatoid arthritis. According to the WHO Guideline Development Group, it is "strongly recommended" for patients with severe or critical disease in combination with corticosteroids. The group of international experts based their recommendation on "moderate certainty UN evidence" that it improves survival and reduces the need for ventilation. There was no observed increase in adverse effects. The experts note that it has a similar effectas other arthritis drugs called interleukin-6 (IL-6) inhibitors. Because of that, when both drugs are available, they suggest choosing the best option based on cost, availability, and clinician experience. It is not recommended to use both drugs at the same time. The experts also advise against the use of two other JAK inhibitors (ruxolitinib and tofacitinib) for patients with severe or critical cases of COVID-19 infection.

According to them, trials undergone using these drugs failed to show any benefits arising using either drug, and suggested a possible increase in serious side effects with tofacitinib.

In the same update, WHO makes a conditional recommendation for the use of a monoclonal antibody known as sotrovimab in patients with non-severe cases.

According to them, the drug should only be administered to patients at the highest risk of hospitalisation. In those at lower risk, it only showed "trivial benefits".

A similar recommendation has been made previously, for another monoclonal antibody drug, casirivimab-imdevimab, and the experts say there is insufficient data to recommend one over the other.

For both, the effectiveness against new variants, like Omicron, is still uncertain.

https://news.un.org/en/story/2022/01/1109722