**Supplementary materials**

 **Complementary and alternative medicine therapies and COVID-19 patients: A systematic review**

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1. **Supplementary Table 1. Search strategy used for searching the databases**
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Supplementary Table 1. Search strategy used for searching the databases

|  |  |
| --- | --- |
| Coronavirus  | Complementary and alternative medicine  |
| ((wuhan[All Fields] AND ("coronavirus"[MeSH Terms] OR "coronavirus"[All Fields])) AND 2019/12[PDAT] : 2030[PDAT]) OR 2019-nCoV[All Fields] OR 2019nCoV[All Fields] OR COVID-19[All Fields] OR SARS-CoV-2[All Fields] | “Complementary and alternative medicine” OR (Therapies AND Complementary) OR “Complementary Medicine” OR “Alternative Medicine” OR “Naturopathic Medicine” OR Naturopathy OR Homeopathy OR Ayurveda OR Acupuncture OR Meditation OR “Relaxation therapy” OR “Art Therapy” OR “music Therapy” OR Biofeedback OR Hypnotherapy OR “Prayer Healing” OR “Spiritual Healing” OR “Spiritual therapy” OR Yoga OR ”Dance therapy” OR “Tai chi” OR “Tai Ji” OR Taiji OR Aromatherapy OR “Herbal therapy” OR “Diet therapy” OR “Massage therapy” OR Reflexology OR Osteopathy OR Acupressure OR Chiropractic OR “Qi Gong” OR Qigong OR “Ch'i Kung” OR Reiki OR Hypnosis OR “Therapeutic Touch”  |

**Supplementary Table 2. Quality appraisal of clinical trial studies based on Jadad Scale**

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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Study | Randomization(0-2) | Withdrawals and Drop-out(0-1) | Blinding(0-2) | Jadad scale |
| Wei, N. (2020 | 2 | 1 | 1 | 4 |
| Liu, K. (2020) | 2 | 1 | 1 | 4 |
| Xiao, M (2020), China | 2 | 1 | 1 | 4 |
| Liu, K (2020), China  | 2 | 1 | 1 | 4 |

**Note:**

We used Jadad scale to assess the included studies. Points were determined as follows,

1. Random allocation: computer-generated random numbers, 2 points; not described, 1 point; inappropriate method, 0 point.
2. Allocation concealment: central randomization, sealed envelopes or similar, 2 points; not described, 1 point; inappropriate or unused, 0 point.
3. Blindness: identical placebo tablets or similar, 2 point; inadequate or not described, 1 point; inappropriate or no double blinding, 0 point.
4. Withdrawals and drop-outs: numbers and reasons are described, 1 point; not described, 0 point.

The Jadad scale score ranges from 1 to 5; higher score indicates better RCT quality.

**Supplementary Table 3 Quality appraisal of quasi-experimental studies based on JBI Quasi-Experimental Appraisal Tool**

|  |  |  |  |
| --- | --- | --- | --- |
| Items  | Zhao, J. (2020)  | Chen, J. M. (2020) | Huang, X. B. (2020)  |
| Is it clear in the study what is the ‘cause’ and what is the ‘effect’ (i.e. there is no confusion about which variable comes first)? | Y | Y | Y |
| Were the participants included in any comparisons similar? | Y | N | Y |
| Were the participants included in any comparisons receiving similar treatment/care, other than the exposure or intervention of interest? | N | Y  | N |
| Was there a control group? | Y | Y | Y |
| Were there multiple measurements of the outcome both pre and post the intervention/exposure? | Y | N | Y |
| Was follow up complete and if not, were differences between groups in terms of their follow up adequately described and analyzed? | Y | Y | Y |
| Were the outcomes of participants included in any comparisons measured in the same way? | Y | Y  | Y |
| Were outcomes measured in a reliable way? | Y | Y | Y |
| Was appropriate statistical analysis used? | Y | Y | Y |
| Overall appraisal  | Included  | Included  | Included  |