Appendix 1

Case definitions

Diagnosis and Treatment Program for Novel Coronavirus Infection Pneumonia (Trial Fifth Edition, China) (1).

Case for reporting

At least one of the epidemiological histories (14 days before onset of symptoms):
(I) Travel or stay in Wuhan and surrounding cities and regions;
(II) Contact with a person diagnosed with COVID-19;
(III) Contact with a person from Wuhan and surrounding cities and regions;
(IV) Clustering occurrence.

Or at least two of the following clinical symptoms:
(I) Fever (measured or subjective) or respiratory symptoms;
(II) The total number of normal or decreased leukocytes;
(III) The total number of decreased lymphocytes.

Clinical confirmed cases

Suspected cases with radiographic evidence of pneumonia.

Confirmed cases

Clinical confirmed cases or suspected cases with at least one of following pathogenic evidence:
(I) Positive in SARS CoV-2 RT-PCR examination from respiratory tract or blood sample;
(II) High homology with SARS CoV-2 virus genomes in respiratory tract or blood sample sequencing.

Clinical classification

Two types of clinical classification were studied, including common and severe cases.

Common case:
(I) Fever (measured or subjective) or respiratory symptoms;
(II) Radiographic evidence of pneumonia

Severe case, at least one of the following symptoms:
(I) Respiratory distress, RR ≥30 times/min;
(II) Resting-state, mean oxygen saturation ≤93%;
(III) PaO_2/FiO_2 ≤300 mmHg (1 mmHg =0.133 kPa).

Additional inclusion and exclusion criteria

The full list of exclusion criteria, included:
(I) Diagnosed with COVID-19;
(II) One or more symptoms among fever, cough, and fatigue at enrollment;
(III) The time from onset to diagnosis time was not more than 48 h;

http://dx.doi.org/10.21037/apm-20-2121

(IV) ≥18 years of age.

The full list of exclusion criteria, included:
(I) Immunodeficiency, immunosuppressive drugs, or glucocorticoids within the past 3 months;
(II) Preparing for pregnancy, pregnant women, or lactating women;
(III) Allergies to more than two types of drugs or foods or allergies to ingredients of the trial drug;
(IV) Psychosis or those without self-knowledge ability;
(V) Estimated survival time less than 48 h from the start of screening;
(VI) Tracheal intubation was already done before screening;
(VII) Those who were judged by the investigators to be not suitable to participate in the trial.

The study was approved by the Ethics Committee of Tianjin University of Traditional Chinese Medicine. The study followed the GCP guidelines and the Declaration of Helsinki. Written informed consent was obtained from the patients or legal representatives. The study was registered (ChiCTR2000029589).

Amendments

We had an amendment on June 28, 2020. Secondary indicators including length of hospital stay and laboratory tests (leukocyte, lymphocyte count, neutrophil count, C-reactive protein, erythrocyte sedimentation rate, D-dimer improvement) were added to this trail research.

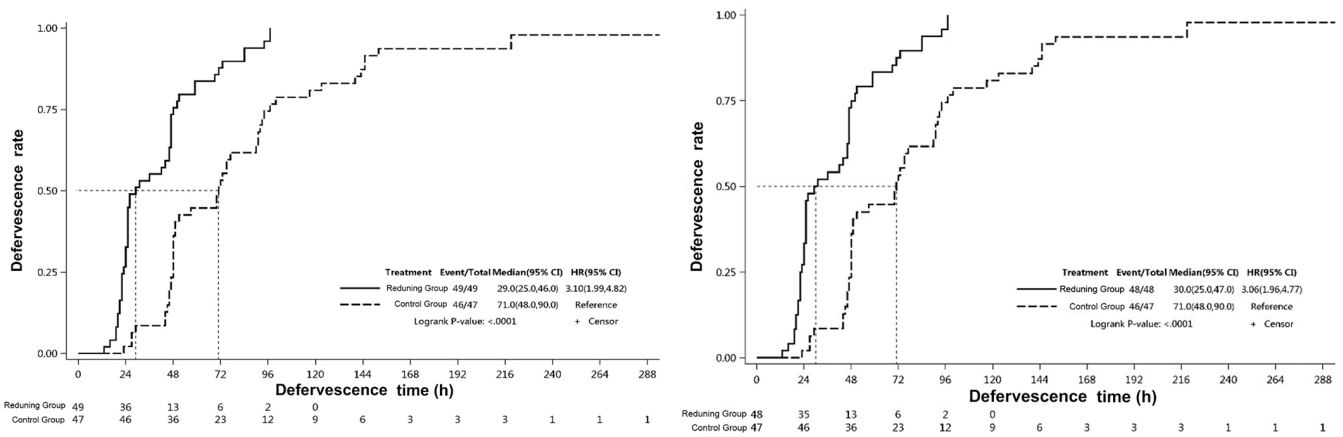

Figure S1 Time for defervescence. (A) Full-analysis set (FAS). (B) Per-protocol set (PPS). The blue line represents the control group.

Table S1 Survival rate at 28 days

Time	FAS			PPS		
	Reduning group (n=77)	Control group (n=80)	P	Reduning group (n=77)	Control group (n=79)	P
28th day, n (%)	77 (100.0)	77 (96.3)	0.2455	72 (100.0)	76 (96.2)	0.2466

FAS, full-analysis set; PPS, per-protocol set.

http://dx.doi.org/10.21037/apm-20-2121