Appendix 6. General population results

Table 1. Long COVID prevalence and or incidence in the general population.

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
Ayoubkhani et al. ⁽⁴³⁾	Symptoms persisting for at least four weeks from confirmed or suspected SARS-CoV-2 infection that could not be explained by another health condition.	6729 (23.7%) at least once during follow up	N/A
Bernas et al. ⁽⁵³⁾	Long COVID summarises symptoms that present later than four weeks after SARS-CoV-2infection. Post-COVID-19 condition was defined by the WHO in October 2021 as typical symptoms present later than 12 weeks after infection, lasting for at least two months, not explained by an alternative diagnosis "which generally have an impact on every day functioning".	Individual symptom prevalence reported – see Appendix 6 General population, Table 2	N/A
Donnachie et al. ⁽⁶⁰⁾	 U07.4 and U09.9 (ICD codes for long COVID). Specific complaints related to long COVID were also investigated using: dyspnoea (ICD-10-GM code: U06.0) disturbances of smell and taste (R43) pulmonary embolism (I26) chronic fatigue syndrome (G93.3) fatigue recorded as a symptom (R53) myalgia (M79.1) mild cognitive impairment (F06.7) anxiety (F41) affective disorders (F30–F39) stress disorders (F41) 	N/A	COVID-19 Incidence (95% CI) - Post-COVID One quarter or more: 14.2 (14.0 to 14.5) Two quarters or more: 6.7 (6.5 to 6.9) Other respiratory infection Incidence 95% CI - Post-COVID One quarter or more: 0.0 (0.0 to 0.0) Two quarters or more: 0.0 (0.0 to 0.0) Control Incidence 95% CI - Post-COVID One quarter or more: 0.0 (0.0 to 0.0) Two quarters or more: 0.0 (0.0 to 0.0) Two quarters or more: 0.0 (0.0 to 0.0) Incidence stratified by age-group COVID-19 Group Incidence (95% CI) Outcome: Post-COVID 0-11: 2.57 (2.1 to 3.1) 12-17: 8.6 (7.5 to 9.8) 18-39: 12.1 (11.7 to 12.5)

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
			40-59: 19.0 (18.6 to 19.5) 60+: 14.4 (13.9 to 14.9)
			Other respiratory infection Incidence 95% CI Outcome: Post-COVID 0-11: 0.0 (0.0 to 0.0) 12-17: 0.0 (0.0 to 0.0) 18-39: 0.0 (0.0 to 0.0) 40-59: 0.0 (0.0 to 0.0) 60+: 0.0 (0.0 to 0.0)
			Control Incidence 95% CI Outcome: Post-COVID 0-11: 0.0 (0.0 to 0.0) 12-17: 0.0 (0.0 to 0.0) 18-39: 0.0 (0.0 to 0.0) 40-59: 0.0 (0.0 to 0.0) 60+: 0.0 (0.0 to 0.0)
Kostev et al. ⁽⁵⁸⁾	ICD-10: U09.9 91 to 365 days after first COVID-19 diagnosis.	4,285 (8.3%) of total sample By age 18–30: 5.0% 31–45: 7.3% 46–60: 9.8% 61–70: 8.6% >70: 5.6%	N/A
Meza-Torres et al. ⁽⁴⁸⁾	Long COVID is defined as fatigue, breathlessness, cognitive dysfunction, and a variety of other symptoms occurring beyond 4 weeks after COVID- 19 infection.	 7,623/416,505 (1.8%) of the population who had been exposed to COVID-19 infection. 6,316/7,623 (82.9%) were index community COVID-19 infection cases. 1,307/7,623 (17.2%) had been hospitalised for treatment for their primary COVID-19 infection. 	N/A
Perlis et al. ⁽⁵⁷⁾	All individuals whose survey start date was more than 2 months after the month in which they initially identified a positive COVID-19 test result. Cases defined as reporting continued symptoms at the time of the survey.	2,359 of 16,091 (14.7%) reported continued symptoms who tested positive at least 2 months prior.1,843 of 12,441 (14.8%) reported continued symptoms who tested positive at least 6 months prior.	N/A

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
		1,135 of 7,462 (15.2%) reported continued symptoms who tested positive at least 12 months prior.	
		Persistent symptoms at least 2 months after diagnosis Male (n=564) Female (n=1,795) Total (n=2,359) Symptom count, mean (SD) P value 3.1 (2.5) 3.9 (2.8) 3.7 (2.7) <0.001	
		The authors calculated prevalence estimates (in percentages) of post- COVID syndrome according to different criteria for possible case definitions as raw prevalence, age-sex standardised prevalence (according to the age-sex distribution of the invited population), and the minimum possible prevalence (under the extreme assumption that all non-responders fully recovered and were free of symptoms at the time of the survey). N Total: 11,536, Men: 4,747, Women: 6,789 Overall prevalence estimate of post-COVID syndrome Total: 6.5%	
Peter et al. ⁽⁶³⁾	Long COVID is defined as ongoing symptoms beyond four weeks after acute infection. Post-COVID-19 condition or post-COVID syndrome is considered in patients with symptoms lasting for at least two months, being unexplained by an alternative diagnosis, and occurring three months	Men: 4.6% Women: 8.4% Any (new) symptom <u>Prevalence (%)</u> Total: 63.7 (62.8 to 64.6) Men: 56.8 (55.4 to 58.2) Women: 68.5 (67.4 to 69.6) <u>Standardised prevalence (95% CI)</u> Total: 61.8 (60.9 to 63.7)	
	from the acute infection.	Total: 61.8 (60.9 to 62.7) Men: 55.3 (53.9 to 56.8) Women: 67.9 (66.8 to 69.0) <u>Minimum possible (%)</u> Total: 14.6 Men: 10.8 Women: 18.3	
		Any (new) symptom moderate to strong <u>Prevalence (%)</u> Total: 41.5 (40.6 to 42.4) Men: 34.0 (32.7 to 35.4) Women: 46.8 (45.6 to 48.0) <u>Standardised prevalence (95% CI)</u> Total: 39.2 (38.3 to 40.1)	

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
		Men: 32.3 (31.0 to 33.7) Women: 45.7 (44.5 to 46.9) <u>Minimum possible (%)</u> Total: 9.5 Men: 6.5 Women: 12.5	
		Any (new) symptom treated <u>Prevalence (%)</u> Total: 11.4 (10.8 to 12.0) Men: 9.0 (8.2 to 9.9) Women: 13.0 (12.2 to 13.8) <u>Standardised prevalence (95% CI)</u> Total: 10.4 (9.9 to 11.0) Men: 8.2 (7.5 to 9.0) Women: 12.5 (11.7 to 13.3) <u>Minimum possible (%)</u> Total: 2.6 Men: 1.7 Women: 3.5	
		Health recovered <100% Prevalence (%) Total: 55.4 (54.5 to 56.4) Men: 50.9 (49.5 to 52.4) Women: 58.6 (57.4 to 59.8) <u>Standardised prevalence (95% CI)</u> Total: 53.3 (52.3 to 54.2) Men: 49.0 (47.5 to 50.5) Women: 57.3 (56.1 to 58.6) <u>Minimum possible (%)</u> Total: 12.4 Men: 9.5 Women: 15.3	
		Health recovered ≤80% <u>Prevalence (%)</u> Total: 30.4 (29.6 to 31.3) Men: 27.1 (25.9 to 28.4) Women: 32.7 (31.6 to 33.9) <u>Standardised prevalence (95% CI)</u> Total: 28.4 (27.6 to 29.3)	

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
		Men: 25.4 (24.2 to 26.7) Women: 31.2 (30.1 to 32.4) <u>Minimum possible (%)</u> Total: 6.8 Men: 5.1 Women: 8.6	
		Health or working capacity recovered ≤80% Prevalence (%) Total: 34.6 (33.7 to 35.5) Men: 31.0 (29.7 to 32.4) Women: 37.1 (36.0 to 38.3) Standardised prevalence (95% CI) Total: 32.5 (31.7 to 33.4) Men: 29.2 (28.0 to 30.6) Women: 35.6 (34.5 to 36.8) Minimum possible (%) Total: 7.9 Men: 5.9 Women: 9.9	
		Health or working capacity recovered ≤80% and any symptom moderate to strong Prevalence (%) Total: 28.5 (27.7 to 29.3) Men: 24.1 (22.9 to 25.4) Women: 31.6 (30.5 to 32.7) Standardised prevalence (95% CI) Total: 26.5 (25.7 to 27.4) Men: 22.6 (21.4 to 23.8) Women: 30.3 (29.2 to 31.4) Minimum possible (%) Total: 6.5 Men: 4.6 Women: 8.4	
Sørensen et al. ⁽⁵⁶⁾	No definition stated.	 6-12 months after test Among test positives, 29.6% reported at least one symptom. Two was the median number of symptoms reported. Self-reported new diagnoses received between the test date and until 6-12 months after 	N/A

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
		At least one diagnosis of depression, anxiety, chronic fatigue symptom, fibromyalgia, or post-traumatic stress disorder with new onset within the first 6, 9, or 12 months after the test was reported by 7.2% of test positives.	
		Self-reported health problems with new onset between the test date and until 6-12 months after Among test positives, 53.1% reported at least one of the following problems with new onset within the first 6, 9, or 12 months after the test date: difficulties concentrating; memory issues; mental exhaustion; physical exhaustion or sleep problems.	
Whitaker et al. ⁽⁵⁴⁾	Participants who self-reported having had COVID- 19—either suspected or PCR confirmed— and with one or more of 29 symptoms 12 weeks or more	At 12 weeks, 37.7% (37.4,38.1) of those in rounds 3–5 reported one or more symptoms, and 17.5% (17.2,17.7) reported three or more; in round 6, these figures were 21.6% (20.9,22.3) and 11.9% (11.4,12.5), respectively. For rounds 3–5, these translated to a weighted population prevalence of 5.80% (5.7, 5.9) for having, or having had, one or more persistent symptoms for 12 weeks or more, and 2.2% (2.2, 2.3) for three or more persistent symptoms.	N/A
	before the survey date.	In round 6 the equivalent percentages were 3.1% (3.00, 3.14) and 1.61 (1.6, 1.7), respectively, for 27 symptoms in common with rounds 3–5, increasing to 3.26% (3.2, 3.3) and 1.86% (1.8,1.9) for one and three symptoms respectively if all 35 symptoms surveyed in round 6 are included.	

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
Bernas et al. ⁽⁵³⁾	Authors' own design Online questionnai re All participants completed a standardize d questionnai re to assess (1) risk factors for severe acute COVID- 19courses, (2) their physical and psychologic al performanc e in comparison to the time before the COVID-19 pandemic, and (3) the occurrence of 20 potential post- COVID-19		Daily prevalenc e of symptoms at 3 months post- infection: Fatigue 28.1% [26.3- 30.0%] Daily prevalenc e 6 months post- infection: Fatigue 29.3% [28.4- 30.3%] Daily prevalenc e 9 months post- infection: Fatigue 29.3% [28.4- 30.3%] Daily prevalenc e 9 months post- infection: Fatigue 29.3% [28.4- 30.3%] Daily prevalenc e 9 months post- infection: Fatigue 29.2% [27.9- 30.5%] Daily prevalenc e 12 months	Daily prevalenc e of symptoms at 3 months post- infection: Chest pain 1.7% [1.3- 2.3%] Palpitation 2.9% [2.3- 3.7%] Daily prevalenc e 6 months post- infection: Chest pain 1.7% [1.4- 2.0%] Palpitation 3.3% [2.9- 3.7%] Daily prevalenc e 9 months post- infection: Chest pain 1.6% [1.3- 1.9%] Palpitation	Daily prevalenc e of symptoms at 3 months post- infection: Disturbance of memory 6.4% [5.5- 7.5%] Headache 5.6% [4.7- 6.6%] Loss of concentrati on 9.0% [7.9- 10.2%] Sleep disorders 10.8% [9.6- 12.1%] Vertigo 2.1% [1.6- 2.7%] Daily prevalenc e 6 months post- infection: Vertigo 2.4% [2.1- 2.7%]	Daily prevalenc e of symptoms at 3 months post- infection: Cough 2.9% [2.3- 3.7%] Dyspnoea 3.0% [2.4- 3.7%] Daily prevalenc e 6 months post- infection: Cough 2.6% [2.3- 3.0%] Dyspnoea 3.2% [2.8- 3.6%] Daily prevalenc e 9 months post- infection: Cough 2.5% [2.1- 2.9%] Dyspnoea		Daily prevalenc e of symptoms at 3 months post- infection: Anxiety 9.8% [8.6- 11.0%] Depression 6.8% [5.9- 8.0%] Daily prevalenc e 6 months post- infection: Anxiety 10.0% [9.4- 10.7%] Depression 6.5% [6.0- 7.1%] Daily prevalenc e 9 months post- infection: Anxiety 9.8% [9.0 - 10.7%] Depression	Daily prevalenc e of symptoms at 3 months post- infection: Sore throat 0.9% [0.6- 1.4%] Anosmia/ag eusia 7.7% [6.7-8.9%] Daily prevalenc e 6 months post- infection: Sore throat 0.8% [0.6- 1.0%] Anosmia/ag eusia 9.1% [8.5-9.7%] Daily prevalenc e 9 months post- infection: Sore throat 0.8% [0.6- 1.0%] Anosmia/ag eusia 9.1% [8.5-9.7%]	Daily prevalenc e of symptoms at 3 months post- infection: Arthralgia 7.3% [6.3- 8.4%] Myalgia 5.2% [4.3- 6.1%] Daily prevalenc e 6 months post- infection: Arthralgia 7.3% [6.7- 7.8%] Myalgia 5.5% [5.1- 6.0%] Daily prevalenc e 9 months post- infection: Arthralgia 7.3% [6.4- 7.9%] Myalgia	Daily prevalenc e of symptoms at 3 months post- infection: Abdominal pain 1.4% [1.0-2.0%] Diarrhoea 1.4% [1.0- 2.0%] Lack of appetite 1.1% [0.7- 1.6%] Nausea/vo miting 0.4% [0.2- 0.7%] Daily prevalenc e 6 months post- infection: Abdominal pain 1.6% [1.3-1.9%] Diarrhoea 1.0% [0.8-	

Table 2. Long COVID symptoms in the general population.

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	symptoms		post-	3.5% [3.0-	Disturbance	3.3% [2.9-		6.4%	[8.6-	5.6% [5.0-	1.3%]	
	during the		infection	4.1%]	of memory	3.9%]		[65.8-	10.3%]	6.3%]	Nausea/vo	
	two weeks		Fatigue		6.7% [6.2-			7.2%]			miting	
	prior to the		27.7%	Daily	7.2%]	Daily			Daily	Daily	0.4% [0.3-	
	survey,		[26.3-	prevalenc	Headache	prevalenc		Daily	prevalenc	prevalenc	0.6%]	
	and		29.1%]	e 12	6.0% [5.5-	e 12		prevalenc	e 12	e 12		
	reported			months	6.6%]	months		e 12	months	months	Daily	
	their (4)			post-	Loss of	post-		months	post-	post-	prevalenc	
	vaccination			infection:	concentrati	infection:		post-	infection:	infection:	e 9	
	and (5)		Daily	Chest pain	on 9.4%	Cough		infection:	Sore throat	Arthralgia	months	
	infection		prevalenc	1.4% [1.1-	[8.8-	2.5% [2.1-		Anxiety	0.7% [0.5-	6.8% [6.1-	post-	
	status.		e 15	1.8%]	10.1%]	3.0%]		9.1% [8.3 –	1.0%]	7.7%]	infection:	
	Participants		months	Palpitation	Sleep	Dyspnoea		10.1%]	Anosmia/ag	Myalgia	Abdominal	
	who		post-	3.6% [3.0-	disorders	3.4% [2.9-		Depression	eusia 8.6%	5.4% [4.7-	pain 1.5%	
	reported a		infection:	4.2%]	11.0%	4.0%]		6.5% [5.8-	[7.7-9.5%]	6.2%]	[1.2-1.8%]	
	positive		Fatigue		[10.4-			7.3%]	:		Diarrhoea	
	SARS-CoV-2		25.0%	Daily	11.7%]	Daily					1.8% [1.5-	
	PCR test		[23.1-	prevalenc		prevalenc		Daily	Daily	Daily	2.3%]	
	were asked		27.0%]	e 15	Daily	e 15		prevalenc	prevalenc	prevalenc	Lack of	
	about			months	prevalenc	months		e 15	e 15	e 15	appetite	
	symptoms			post-	e 9	post-		months	months	months	1.0% [0.8-	
	during the			infection:	months	infection:		post-	post-	post-	1.3%]	
	acute phase			Chest pain	post-	Cough		infection:	infection:	infection:	Nausea/vo	
	of their			1.2% [0.8-	infection:	2.8% [2.1-		Anxiety	Sore throat	Arthralgia	miting	
	infection.			1.8%]	Vertigo	3.6%]		8.1% [7.0-	0.7% [0.4-	6.5% [5.5-	0.4% [0.3-	
	All			Palpitation	2.5% [2.1-	Dyspnoea		9.4%]	1.1%]	7.7%]	0.67%]	
	participants			3.4% [2.7-	3.0%]	3.4% [2.7-		Depression	Anosmia/ag	Myalgia		
	with			4.4%]	Disturbance	4.3%]		6.7% [5.7-	eusia 6.8%	4.9% [4.0-	Daily	
	COVID-19				of memory			7.9%]	[5.8-8.1%]	6.0%]	prevalenc	
	history				6.8% [6.1-						e 12	
	were asked				7.5%]						months	
	about				Headache						post-	
	reinfection				5.8% [5.2-						infection:	
	and long-				6.5%]						Abdominal	
	term				Loss of						pain 1.1%	
	sequelae.				concentrati						[0.8-1.5%]	
	1				on 9.7%						Diarrhoea	
					[8.9- 10.6%]						1.8% [1.4- 2.2%]	
					Sleep						Lack of	
	1				disorders							
					uisoruers						appetite	

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
					10.9% [10.0- 11.8%] Daily prevalenc e 12 months post- infection: Vertigo 2.4% [2.0- 3.0%] Disturbance of memory 6.5% [5.8- 7.3%] Headache 5.1% [4.4- 5.8%] Loss of concentrati on 9.8% [8.9- 10.8%] Sleep disorders 10.3% [9.4- 11.3%]						1.0% [0.7- 1.3%] Nausea/vo miting 0.4% [0.2- 0.6%] Daily prevalenc e 15 months post- infection: Abdominal pain 0.8% [0.4-1.3%] Diarrhoea 1.5% [1.1- 2.2%] Lack of appetite 0.9% [0.6- 1.5%] Nausea/vo miting 0.3% [0.1- 0.6%]	
					Daily prevalenc e 15 months post- infection: Vertigo 2.2% [1.6- 2.9%]							

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
					Disturbance of memory 6.4% [5.4- 7.6%] Headache 3.9% [3.1- 4.9%] Loss of concentrati on 9.7% [8.5- 11.1%] Sleep disorders 9.4% [8.2- 10.8%]							
Kostev et al. ⁽⁵⁸⁾	ICD-10 codes as entered via the GP practice		Malaise and fatigue: 2,957 (69.0%)		Symptoms involving cognitive functions and awareness: 171 (4.0%)	Abnormaliti es of breathing: 900 (21%)			Disturbance s of smell and taste: 257 (6%)			
Meza- Torres et al. ⁽⁴⁸⁾	Cambridge Multi morbidity Score (CMS) as an overall measure of comorbidity The data were sourced from a representati ve network (PCSC) where practices		Hospitalis ed (n= 1294) Before long COVID n (%), After developin g Long COVID n (%) Weakness and tiredness: 26 (2.0) 95 (7.3)	Hospitalis ed (n= 1294) Before long COVID n (%), After developin g Long COVID n (%) Palpitations : 9 (0.7) 26 (2) Chest pain: 38 (2.9) 97 (7.5)	Hospitalis ed (n= 1294) Before long COVID n (%), After developin g Long COVID n (%) Memory loss and confusion: 1 (0.1), 5 (0.4)	Hospitalis ed (n= 1294) Before long COVID n (%), After developin g Long COVID n (%) Shortness of breath: 49 (3.8), 214 (16.5)		Hospitalis ed (n= 1294) Before long COVID n (%), After developin g Long COVID n (%) Worry and anxiety: 33 (2.6) 82 (6.3) Low mood and not	Hospitalis ed (n= 1294) Before long COVID n (%), After developin g Long COVID n (%) Loss of smell: 3 (0.2), 6 (0.5) Loss of taste: 1	Hospitalis ed (n= 1294) Before long COVID n (%), After developin g Long COVID n (%) Muscle aches: 8 (0.6) 24 (1.9)	Hospitalis ed (n= 1294) Before long COVID n (%), After developin g Long COVID n (%) Abdominal pain: 40 (3.1) 37 (2.9) Nausea and vomiting: 7	

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Author Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
have received feedback throughout the pandemic. Data on COVID-19 infection diagnoses and comorbidity are likely to be of good quality. Linkage to hospital and mortality data adds reliability compared with only using coded data.		Fever: 11 (0.9) 20 (1.6) Communit y (n=6315) Before long COVID n (%), After developin g Long COVID n (%) Weakness and tiredness: 123 (2.0), 786 (12.5) Fever: 48 (0.8), 105 (1.7)	Communit y (n=6315) Before long COVID n (%), After developin g Long COVID n (%) Palpitations : 38 (0.6), 128 (2.0) Chest pain: 143 (2.3), 371(5.9)	Difficulty concentrati ng: 0, 6 (0.5) Trouble sleeping: 9 (0.7), 21 (1.6) Headache: 37 (2.9) 48 (3.7) Vertigo and dizziness: 16 (1.2) 30 (2.3) Communit Y (n=6315) Before long COVID n (%), After developin g Long COVID n (%) Memory loss and confusion: 4 (0.1), 14 (0.2) Difficulty concentrati ng: 3 (0.2), 35 (0.6) Trouble sleeping: 19 (0.3), 46 (0.7)	Cough: 70 (5.4), 114 (8.8) Communit y (n=6315) Before long COVID n (%), After developin g Long COVID n (%) Shortness of breath: 150 (2.4), 714 (11.3) Cough: 250 (4.0), 544 (8.6)		enjoying anything: 57 (4.4) 97 (7.5) Communit y (n=6315) Before long COVID n (%), After developin g Long COVID n (%) Worry and anxiety: 274(4.34), 407(6.44) Low mood and not enjoying anything: 292(4.62), 389 (6.16)	(0.1) 6 (0.5) Sore throat: 16 (1.2) 18 (1.4) Communit y (n=6315) Before long COVID n (%), After developin g Long COVID n (%) Loss of smell: 14 (0.2), 103 (1.6) Loss of taste: 5 (0.1), 43 (0.7) Sore throat: 83 (1.3), 77 (1.2)	Communit y (n=6315) Before long COVID n (%), After developin g Long COVID n (%) Muscle aches: 33 (0.5), 121 (1.9)	(0.5) 23 (1.8) Loss of appetite: 2 (0.2) 6 (0.5) Diarrhoea: 16 (1.2) 25 (1.9) Communit y (n=6315) Before long COVID n (%), After developin g Long COVID n (%) Abdominal pain: 158 (2.5), 178 (2.8) Nausea and vomiting: 27 (0.4), 72 (1.1) Loss of appetite: 9 (0.14), 35 (0.6) Diarrhoea: 34 (0.5), 79 (1.3)	

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms Headache:	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
					158 (2.5), 306 (4.9) Vertigo and dizziness: 66 (1), 137 (2.2)							
Perlis et al. ⁽⁵⁷⁾	Online questionnai re		Persistent symptoms at least 2 months after diagnosis Male (n=564) Female (n=1,795) Total (n=2,359) No. (%) P value Fatigue: 267 (47.3) 965 (53.8) 1232 (52.2) .008		Persistent symptoms at least 2 months after diagnosis Male (n=564) Female (n=7795) Total (n=2359) No. (%) P value Headache: 161 (28.5) 632 (35.2) 793 (33.6) 0.003 Brain fog: 164 (29.1) 788 (43.9) 952 (40.4) <0.001 Poor memory: 120 (21.3) 544 (30.3) 664 (28.1) <0.001 Either brain fog or poor memory:	Persistent symptoms at least 2 months after diagnosis Male (n=564) Female (n=1795) Total (n=2359) No. (%) P value Shortness of breath: 230 (40.8) 707 (39.4) 937 (39.7) 0.56	Persistent symptoms at least 2 months after diagnosis Male (n=564) Female (n=1795) Total (n=2359) No. (%) P value Exercise intolerance: 161 (28.5) 524 (29.2) 685 (29.0) 0.77	Persistent symptoms at least 2 months after diagnosis Male (n=564) Female (n=1795) Total (n=2359) No. (%) P value Depressed mood: 116 (20.6) 434 (24.2) 550 (23.3) .08 Anxious mood: 126 (22.3) 552 (30.8) 678 (28.7) <0.001	Persistent symptoms at least 2 months after diagnosis Male (n=564) Female (n=1795) Total (n=2359) No. (%) P value Loss of smell: 199 (35.3) 832 (46.4) 1031 (43.7) <0.001			

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
					205 (36.3) 874 (48.7) 1079 (45.7) <0.001 Dizziness: 92 (16.3) 393 (21.9) 485 (20.6) 0.004 Sleep disruption: 127 (22.5) 581 (32.4) 708 (30.0) <0.001							
Peter et al. ⁽⁶³⁾	Postal questionnai re The standardise d questionnai re included sociodemog raphic characteristi cs, lifestyle factors, and medically attended comorbiditi es already present before the acute SARS-CoV-2 infection. It questioned the presence of 30 specific		Prevalenc e of symptom clusters 6- 12 months after acute infection Fatigue: 37.2% (36.4% to 38.1%) Substantial fatigue (FAS>21): Total: n=11141. 41.9% (41.0% to 42.8%); Men: n=4579. 33.4% (32.1% to 34.8%);	Prevalenc e of symptom clusters 6- 12 months after acute infection Chest symptoms: 30.2% (29.4% to 31.0%)	<pre><0.001 Prevalenc e of symptom clusters 6- 12 months after acute infection Neurocognit ive impairment: 31.3% (30.5% to 32.2%) Headache or dizziness: 19.9% (19.2% to 20.6%)</pre>	Prevalenc e of symptom clusters 6- 12 months after acute infection Upper respiratory symptoms: 13.9% (13.3% to 14.6%)		Prevalenc e of symptom clusters 6- 12 months after acute infection Anxiety or depression: 21.1% (20.4% to 21.9%)	Prevalenc e of symptom clusters 6- 12 months after acute infection Smell or taste disorder: 23.6% (22.9% to 24.4%)	Prevalenc e of symptom clusters 6- 12 months after acute infection Musculoskel etal pain: 16.8% (16.1% to 17.5%)	Prevalenc e of symptom clusters 6- 12 months after acute infection Abdominal symptoms: 5.6% (5.2% to 6.0%) Nausea or vomiting: 3.5% (3.2% to 3.9%)	Prevalenc e of symptom clusters 6-12 months after acute infection Rash or paresthesia : 10.1% (9.6% to 10.7%) Hair loss: 7.0% (6.5% to 7.5%)

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	symptoms		Women:									
	before and		n=6562.									
	during (and		47.8%									
	related to)		(46.6% to									
	the acute		49.0%)									
	infection		Extreme									
	phase as		fatigue									
	well as at		(FAS>34):									
	the time of		Total:									
	filling out		n=11141.									
	the		11.2%									
	questionnai		(10.6% to									
	re (that is,		11.8%);									
	six to 12		Men:									
	months		n=4579.									
	after acute		8.5%									
	infection)		(7.7% to									
	by yes/no		9.4%);									
	responses.		Women:									
	Further new		n=6562.									
	or ongoing		13.1%									
	current		(12.3% to									
	symptoms		13.9%)									
	could be		Chills or									
	added in a		fever: 2.4%									
	free text		(2.1% to									
	field.		2.7%)									
	Fatigue: the											
	10 item											
	Fatigue											
	Assessment											
	Scale.											
	Working											
	capacity:											
	Adapted											
	questions											
	from the											
	short form											
1	of the work											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	ability index. Health related quality of life: SF-12 questionnai re Online questionnai re		Symptoms 6-12 months		Symptoms 6-12 months		Symptoms 6-12 months			Symptoms 6-12 months	Symptoms 6-12 months	
Sørensen et al. ⁽⁵⁶⁾	developed by research team. The questionnai re included questions on height, weight, education, employmen t, smoking and drinking habits, physical activity, sick leave, and symptoms in the time around the test date, defined as from 1 week before the test and until 4		after test Fatigue/exh austion: 6,799 (11.1%) Chills 966 (1.6%) Fever 1,362 (2.2%) Red runny eyes:822 (1.3%) Self- reported new diagnoses received between the test date and until 6-12 months after Chronic fatigue syndrome	Symptoms 6-12 months after test Chest pain 1,695 (2.8%)	after test Sleeping legs/arms 2,841 (4.7%) Headache 3,740 (6.1%) Dizziness 2,430 (4.0%) Self- reported health problems with new onset between the test date and until 6-12 months after Mental exhaustion 20,810 (37.7%)	Symptoms 6-12 months after test Dyspnea: 3,277 (5.4%) Cough 2,956 (4.8%)	after test Hot flushes/swe at 2,047 (3.4%) Symptoms 6-months after test Hot flushes/swe at: COVID- 19 positive: 264 (3.5%); COVID-19 negative: 225 (1.5%) Symptoms 9 months after test Hot flushes/swe at: COVID- 19 positive: 1,474 (3.4%);	Self- reported new diagnoses received between the test date and until 6-12 months after Anxiety 1,900 (3.4%) Depression 1,883 (3.5%) PTSD 769 (1.3%)	Symptoms 6-12 months after test: Dysosmia: 6,674 (10.9%) Dysgeusia: 5,365 (8.8%) Runny nose: 2,376 (3.9%) Sore throat: 2,285 (3.7%)	after test: Reduced strength arms/legs: 3,381 (5.5%) Muscle/joint pain: 3,217 (5.3%) Symptoms 6-months after test Reduced strength arms/legs: COVID-19 positive: 448 (6.0%); COVID-19 negative: 140 (0.9%) Muscle/joint pain: COVID-19	after test: Reduced appetite: 1,772 (2.9%) Abdominal pain: 1,241 (2.0%) Nausea: 1,179 (1.9%) Diarrhoea: 1,122 (1.8%) Symptoms 6-months after test: Reduced appetite: COVID-19 positive: ; COVID-19 negative: Abdominal pain: COVID-19 positive:	

Author Asses		General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
weeks after. To eva post-ac COVID sympto particip were a about: sympto during past 14 days, (selecte health conditio diagno by a medica doctor before after th test da and (3) self- reporte experie of spec physica and neuroc ive sympto days, (ute 19 ms, ants ked (1) ms he 2) 1 ns ed and e, d nces fic ognit ms 6 and	2,401 (4.0%) Fibromyalgi a 620 (1.0%) Self- reported health problems with new onset between the test date and until 6-12 months after Physical exhaustion 25,492 (45.5%)		Difficulties concentrati ng 16,720 (29.7%) Memory issues 16,149 (28.7%) Sleep problems 11,850 (22.9%)		COVID-19 negative: 1,085 (1.7%) Symptoms 12 months after test Hot flushes/swe at: COVID- 19 positive: 3.9 (3.2%); COVID-19 negative: 240 (1.7%)			positive: 429 (5.7%); COVID-19 negative: 263 (1.7%) Symptoms 9 months after test: Reduced strength arms/legs: COVID-19 positive: 2,448 (5.6%); COVID-19 negative: 715 (1.1%) Muscle/joint pain: COVID-19 positive: 2,304 (5.3%); COVID-19 negative: 1,236 (2.0%) Symptoms 12 months after test:	156 (2.1%); COVID-19 negative: 192 (1.3%) Nausea: COVID-19 positive: 136 (1.8%; COVID-19 negative: 166 (1.1%) Diarrhoea: COVID-19 positive: 119 (1.6%); COVID-19 negative: 190 (1.3%) Symptoms 9 months after test: Reduced appetite: COVID-19 positive: 1,251 (2.9%); COVID-19 negative: 815 (1.3%) Abdominal pain: COVID-19 positive: 877	

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	For the									Reduced	(2.0%);	
	reported									strength	COVID-19	
	symptoms									arms/legs:	negative:	
	and health									COVID-19	1,005	
	conditions,										(1.6%)	
	participants									positive:		
	were also									485	Nausea:	
	asked									(5.0%);	COVID-19	
	about									COVID-19	positive:	
	whether									negative:	846	
	they used									169 (1.2%)	(1.9%);	
	to regularly										COVID-19	
	experience									Muscle/joint	negative:	
	these									pain:	915 (1.5%)	
	before the											
	test. Test									COVID-19	Diarrhoea:	
	negatives									positive:	COVID-19	
	were asked									484	positive:	
	about test									(4.9%);	830	
	indication									COVID-19	(1.9%);	
	and									negative:	COVID-19	
	whether									273 (2.0%)	negative:	
	they									2/3 (2.070)	962 (1.5%)	
	suspected											
	ever having had COVID-										Symptoms	
	19. All										12 months	
											after test:	
	questions in the										Reduced	
	questionnai										appetite:	
	re were										COVID-19	
	mandatory,										positive:	
	except										279	
	height,										(2.8%);	
	weight,										COVID-19	
	smoking,										negative:	
	and alcohol										208 (1.5%)	
	consumptio										200 (1.570)	
	n.										Abdominal	
											pain:	
											COVID-19	

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
											positive: 208 (2.1%); COVID-19 negative: 213 (1.5%) Nausea: COVID-19 positive: 197 (2.0%); COVID-19 negative: 213 (1.5%) Diarrhoea: COVID-19 positive: 173	
											(1.8%); COVID-19 negative: 186 (1.3%)	
Whitaker et al. ⁽⁵⁴⁾	Online questionnai re In addition to the 29 symptoms enquired about on the questionnai re in rounds 3–5, respondent s gave free- text descriptions	Rounds 3- 5 Thrombosis : 0. Round 6 Thrombosis : 33 (0.3%, [0.2-0.5]). Sum over all rounds Thrombosis : 33	Rounds 3- 5 Sore eyes: 2154 (3%, [2.8-3.1]). Fever: 897 (1.2%, [1.2-1.3]). Severe fatigue: 2098 (2.9%, [2.8-3]). Chills: 906 (1.2%, [1.2-1.3]).	Rounds 3- 5 Tight chest: 4234 (5.8%, [5.7-6]). Chest pain: 1854 (2.5%, [2.4-2.7]). Heart issues: 0. Round 6 Tight chest: 398 (4.2%, [3.8-4.6]).	Rounds 3- 5 Headache: 3792 (5.2%, [5.1-5.4]). Difficulty sleeping: 5427 (7.5%, [7.3-7.7]). Tiredness: 12214 (16.8%, [16.5- 17.1]).	Rounds 3- 5 Sneezing: 1512 (2.1%, [2- 2.2]). Shortness of breath: 7166 (9.8%, [9.6-10.1]). New persistent cough: 3073 (4.2%, [4.1-4.4]).			Rounds 3- 5 Runny nose: 1882 (2.6%, [2.5-2.7]). Blocked nose: 2102 (2.9%, [2.8-3]). Loss or change to sense of smell: 3510 (4.8%, [4.7-5]).	Rounds 3- 5 Muscle aches: 5264 (7.2%, [7- 7.4]). Pain in joints: 0. Round 6 Muscle aches: 391 (4.1%, [3.8-4.6]). Pain in joints: 450	Rounds 3- 5 Appetite loss: 1942 (2.7%, [2.6-2.8]). Nausea/vo miting: 600 (0.8%, [0.8-0.9]). Diarrhoea: 983 (1.4%, [1.3-1.4]). Abdominal pain/belly ache: 1175	Rounds 3- 5 Red, itchy areas on the skin: 794 (1.1%, [1-1.2]). Sudden swelling to face or lips: 67 (0.1%, [0.1-0.1]). Purple sores/bliste rs on feet: 221 (0.3%, [0.3-0.3]).

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	of other		Heavy	Chest pain:	Numbness/t				Loss or	(4.8%,	(1.6%,	Hair loss:
	symptoms.		arms/legs:	398 (4.2%,	ingling:	Round 6			change to	[4.4-5.2]).	[1.5-1.7]).	0.
	Free text		2331	[3.8-4.6]).	1511	Sneezing:			sense of		Weight	
	responses		(3.2%,	Heart	(2.1%, [2-	64 (0.7%,			taste: 2927	Sum over	loss: 0.	Round 6
	informed		[3.1-3.3]).	issues: 287	2.2]).	[0.5-0.9]).			(4%, [3.9-	all rounds	David	Red, itchy
	the additional		Thrombosis : 0.	(3%, [2.7- 3.4]).	Confusion/b rain	Shortness of breath:			4.2]). Sore throat:	Muscle aches:	Round 6 Appetite	areas on the skin:
	symptoms		: 0.	S.4]). Sum over	fog/forgetfu	750 (7.9%,			2212 (3%,	5655	loss: 93	179 (1.9%,
	that were		Round 6	all rounds	Iness: 0.	[7.4-8.5]).			[2.9-3.2]).	Pain in	(1%, [0.8-	[1.6-2.2]).
	surveyed in		Sore eyes:	Tight chest:	Vision	New			Hoarse	joints: 450	1.2]).	Sudden
	round 6.		117 (1.2%,	4632	issues: 0.	persistent			voice: 1572	Jenneer 188	Nausea/vo	swelling to
			[1-1.5]).	Chest pain:	Round 6	cough: 361			(2.2%,		miting: 158	face or lips:
			Fever: 55	2252	Headache:	(3.8%,			[2.1-2.3]).		(1.7%,	10 (0.1%,
			(0.6%,	Heart	311 (3.3%,	[3.5-4.2]).			Dizziness:		[1.4-2]).	[0.1-0.2]).
			[0.4-0.8]).	issues: 287	[3-3.7]).				2224		Diarrhoea:	Purple
			Severe		Difficulty	Sum over			(3.1%,		158 (1.7%,	sores/bliste
			fatigue: 234		sleeping:	all rounds			[2.9-3.2]).		[1.4-2]).	rs on feet:
			(2.5%,		438 (4.6%,	Sneezing:			Hearing		Abdominal	34 (0.4%,
			[2.2-2.8]). Chills: 0.		[4.2-5.1]).	1576 Shortness			issues: 0.		pain/belly	[0.3-0.5]). Hair loss:
			Heavy		Tiredness: 759 (8%,	of breath:			Round 6		ache: 158 (1.7%,	131 (1.4%,
			arms/legs:		[7.5-8.6]).	7916			Runny		[1.4-2]).	[1.2-1.6]).
			0.		Numbness/t	New			nose: 154		Weight	[1.2 1.0]).
			Thrombosis		ingling: 202	persistent			(1.6%,		loss: 62	Sum over
			: 33 (0.3%,		(2.1%,	cough:			[1.4-1.9]).		(0.7%,	all rounds
			[0.2-0.5]).		[1.9-2.5]).	3434			Blocked		[0.5-0.8]).	Red, itchy
			Sum over		Confusion/b				nose: 154			areas on
			all rounds		rain				(1.6%,		Sum over	the skin:
			Sore eyes:		fog/forgetfu				[1.4-1.9]).		all rounds	973
			2271		Iness: 590				Loss or		Appetite	Sudden
			Fever: 952		(6.2%,				change to		loss: 2035	swelling to
			Severe fatique:		[5.8-6.8]). Vision				sense of smell: 404		Nausea/vo miting: 758	face or lips: 77
			2332		issues: 182				(4.3%,		Diarrhoea*	Purple
			Chills: 906		(1.9%,				[3.9-4.7]).		*: 1141	sores/bliste
			Heavy		[1.7-2.2]).				Loss or		Abdominal	rs on feet:
			arms/legs:		Sum over				change to		pain/belly	255
			2331		all rounds				sense of		ache**:	Hair loss:
			Thrombosis		Headache:				taste: 364		1333	131
			: 33		4103				(3.9%,		Weight	
									[3.5-4.3]).		loss: 62	

Psycholog Autonomi Ear, Nose Dermatol Cardiovas Respirator Gastrointe Neurologi Musculosk ical/Psych and ogic New onset General c Nervous Assessme Author cular С eletal stinal y Symptom nt Mode conditions Symptoms System iatric Throat Symptoms Symptoms Symptoms Symptoms Symptoms Symptoms Symptoms Symptoms s Difficulty Sore throat: sleeping: 172 (1.8%, 5865 [1.6-2.1]). Tiredness: Hoarse 12973 voice: 172 Numbness/t (1.8%, ingling: [1.6-2.1]). 1713 Dizziness: Confusion/b 244 (2.6%, [2.3-2.9]). rain fog/forgetfu Hearing issues: 196 Iness: 590 (2.1%, [1.8-2.4]). Vision issues: 182 Sum over all rounds Runny nose: 2036 Blocked nose: 2256 Loss or change to sense of smell: 3914 Loss or change to sense of taste: 3291 Sore throat: 2384 Hoarse voice: 1744 Dizziness: 2468 Hearing issues: 196

Table 3. Quality of Life (QOL) and physical movement and or functioning outcome in the general population.

Author, population, sample size (n) and assessment mode	Quality of Life (QOL) and physical movement/functioning outcome(s)
Ayoubkhani et al. ⁽⁴³⁾ Population: Adults who received at least one dose of vaccine after testing positive for COVID-19 in the community (general population) n = 28,356 Assessment mode: COVID-19 infection survey	Long COVID resulting in limitation of activities was reported by 4747 participants (16.7%) at least once during follow up.
Bernas et al. ⁽⁵³⁾ Population: Potential stem cell donors registered with DKMS Germany who had consented to participate in an initial COVID- 19 survey Case group: those with previous COVID-19 diagnosis n = 12,609 Control group: those without previous COVID-19 diagnosis n = 186,768	 Impact on Activities of daily living (ADL) Participants unable to work to work at the time of participation due to health problems related to COVID-19.I: 745 (6.3%) Participants unable to work for more than 12 weeks: 173/ 745 (23.2%), among them 59.1% with severe RTI or hospitalisation (n=94/159). Fourteen had unknown severity. Participants who reported impairments in basic ADL: 28/745 (4%), 87.5% of which had severe acute infection, more advanced ADL were reported in 112 individuals, 77.3% of which reported severe acute infection. 12 months post infection: Participants with moderate acute infections unable to work: 3.4% (95% CI: 2.7% - 4.1%) Participants with severe RTI unable to work: 12.7% (10.7% - 15.0%) Participants with respiratory hospitalisation unable to work: 25.6% (18.5%-34.2%)
Assessment mode: Online questionnaire Peter et al. ⁽⁶³⁾ Population: Adults aged 18 – 65 years with a previous COVID-19 diagnosis n = 11,710 Assessment mode: Postal questionnaire	Working capacity recovered <100% N - Total: 11397 - Men: 4700 - Women: 6697 Prevalence (%) - Total: 47.1 (46.2 to 48.0) - Men: 43.5 (42.1 to 44.9) - Women: 49.6 (48.5 to 50.8)
	Age-sex standardised prevalence (95% CI)

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Author, population, sample size (n) and assessment mode	Quality of Life (QOL) and physical movement/functioning outcome(s)
	- Total: 44.3 (43.4 to 45.3) - Men: 40.9 (39.5 to 42.4) - Women: 47.6 (46.4 to 48.8)
	Minimum possible (%) - Total: 10.6 - Men: 8.2 - Women: 13.0
	Working capacity recovered ≤80% N - Total: 11397 - Men: 4700 - Women: 6697
	Prevalence (%) - Total: 26.6 (25.8 to 27.4) - Men: 24.1 (22.9 to 25.3) - Women: 28.3 (27.3 to 29.4)
	Age-sex standardised prevalence (95% CI) - Total: 24.4 (23.6 to 25.2) - Men: 22.1 (21.0 to 23.3) - Women: 26.6 (25.5 to 27.7)
	Minimum possible prevalence* (%) - Total: 6.0 - Men: 4.5 - Women: 7.4
Sørensen et al. ⁽⁵⁶⁾	*Minimum possible prevalence is under the extreme assumption that all non-responders fully recovered and were free of symptoms at the time of the survey.
Sørensen et al. ⁽³⁰⁾ Population: Cohort group: adolescents and adults ≥ 15 years old with a previous COVID-19 diagnosis Control group: time-matched adolescents	Physical activity—past 6 months (n, %) - Walk, cycle or light exercise (at least four times/week): 35,920 (58.9%) - Work out or do gardening (at least four times/week): 15,163 (24.9%) - Read, watch TV or other sedentary lifestyle: 6742 (11.1%) - Hard training or competitive sports (several times/week): 3173 (5.2%)
and adults ≥ 15 years old with a negative COVID-19 test result	Physical form—past 6 months (n, %) - Good: 25,003 (41.0%)

Author, population, sample size (n) and assessment mode	Quality of Life (QOL) and physical movement/functioning outcome(s)	
Population is further split into adolescents \leq 19 years old and age ranges from 20 to 70+ years old	- Fair: 21,999 (36.1%) - Less good: 7010 (11.5%) - Really good: 5230 (8.6%) - Poor: 1760 (2.9%)	
n = varies depending on analysis		
Assessment mode: Online questionnaire		

Table 4. Summary of association analysis extracted from primary research studies focusing on the generalpopulation.

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
US CDC ⁽⁷⁹⁾ Population: Adult COVID-19 Survivors aged $18-64$ and ≥ 65 Years n = 353164 (case group) n = 1,640,776 (control group)	Analysis: Risk ratios for developing post-COVID-19 conditions in those with previous COVID-19 diagnosis (cases), compared to those without previous COVID-19 diagnosis (controls), and stratified by age group. Method: Regression analysis Cardiac • cardiovascular disease: 18 - 64 years: RR: 1.39; 95% CI: 1.30 - 1.41 ≥65 years: RR: 1.49; 95% CI: 1.63 - 1.70 ≥65 years: RR: 1.66; 95% CI: 1.63 - 1.70 ≥65 years: RR: 1.66; 95% CI: 1.45 - 1.53 - heart failure: 18 - 64 years: RR: 1.52; 95% CI: 1.25 - 1.41 - acute myocardial infarction: 18 - 64 years: RR: 1.59; 95% CI: 1.25 - 1.41 - acute myocardial infarction: 18 - 64 years: RR: 1.69; 95% CI: 1.20 - 1.30 ≥65 years: RR: 1.29; 95% CI: 1.20 - 1.39 ≥65 years: RR: 1.29; 95% CI: 1.20 - 1.39 ≥65 years: RR: 1.29; 95% CI: 1.20 - 1.39 ≥65 years: RR: 1.20; 95% CI: 1.20 - 1.39 ≥65 years: RR: 1.20; 95% CI: 1.20 - 1.39 ≥65 years: RR: 2.0; 95% CI: 1.24 - 2.39 -attem pulmonary embolism: 18 - 64 years: RR: 1.43; 95% CI: 1.20 - 2.39 -attima: 18 - 64 years: RR: 1.3; 95% CI: 1.27 - 1.43 >respiratory astima: 18 - 64 years: RR: 1.43; 95% CI: 1.20 - 2.18 ≥65 year

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	18 – 64 years: RR: 1.19; 95% CI: 1.13 – 1.25 ≥65 years: RR: 1.26; 95% CI: 1.21 – 1.31
	Hemolytic and Vascular - coagulation and hemorrhagic event: $18 - 64$ years: RR: 1.28; 95% CI: 1.22 - 1.35 ≥65 years: RR: 1.41; 95% CI: 1.34 - 1.48 - thromboembolic event: $18 - 64$ years: RR: 1.47; 95% CI: 1.36 - 1.59 ≥65 years: RR: 1.82; 95% CI: 1.36 - 1.59 ≥65 years: RR: 1.82; 95% CI: 1.69 - 1.97 - cerebrovascular disease: $18 - 64$ years: RR: 1.06; 95% CI: 0.95 - 1.19 ≥65 years: RR: 1.44; 95% CI: 1.33 - 1.55
	GI - gastrointestinal and esophageal event: 18 – 64 years: RR: 1.27; 95% CI: 1.24 – 1.30 ≥65 years: RR: 1.34; 95% CI: 1.30 – 1.37
	Neurologic - smell and taste disturbances: $18 - 64$ years: RR: 1.92; 95% CI: $1.71 - 2.16$ ≥65 years: RR: 1.51; 95% CI: $1.15 - 1.98$ - neurologic conditions: $18 - 64$ years: RR: 1.21 ; 95% CI: $1.18 - 1.24$ ≥65 years: RR: 1.52 ; 95% CI: $1.48 - 1.56$
	Mental Health - sleeping disorders: 18 - 64 years: RR: 1.24; 95% CI: 1.21 - 1.27 ≥65 years: RR: 1.26; 95% CI: 1.22 - 1.30 - other mental conditions: 18 - 64 years: RR: 0.99; 95% CI: 0.93 - 1.05
	≥65 years: RR: 1.41; 95% CI: 1.30 – 1.53 - substance-related disorder: 18 – 64 years: RR: 0.91; 95% CI: 0.86 – 0.96 ≥65 years: RR: 1.24; 95% CI: 1.10 – 1.39 - anxiety: 18 – 64 years: RR: 1.10; 95% CI: 1.08 – 1.13
	≥65 years: RR: 1.27; 95% CI: 1.22 – 1.32

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	- mood disorder: 18 – 64 years: RR: 0.94; 95% CI: 0.85 – 1.03 ≥65 years: RR: 1.42; 95% CI: 1.21 – 1.66
	Muscular - malaise and fatigue: $18 - 64$ years: RR: 1.79; 95% CI: 1.75 - 1.83 ≥65 years: RR: 1.77; 95% CI: 1.72 - 1.82 - musculoskeletal pain: $18 - 64$ years: RR: 1.55; 95% CI: 1.53 - 1.58 ≥65 years: RR: 1.37; 95% CI: 1.34 - 1.40 - muscle disorder: $18 - 64$ years: RR: 1.19; 95% CI: 1.14 - 1.24
	≥65 years: RR: 1.60; 95% CI: 1.51 - 1.69 Diabetes - diabetes type 1: 18 - 64 years: RR: 1.32; 95% CI: 1.19 - 1.46 ≥65 years: RR: 1.40; 95% CI: 1.19 - 1.64 - diabetes type 2: 18 - 64 years: RR: 1.39; 95% CI: 1.35 - 1.44 ≥65 years: RR: 1.53; 95% CI: 1.48 - 1.59
Ayoubkhani et al. ⁽⁴³⁾	Analysis: Estimated time trajectories of long COVID from COVID-19 infection, and changes in trajectories after covid-19 vaccination. Method: Logistic regression (adjusted for age, sex, white or non-white ethnicity, region or country, area deprivation fifth group, health status, patient-facing health or social care worker, hospital admission with acute covid-19, and calendar time of infection). Long COVID of any severity
Population: Adults who received at least one dose of vaccine after testing positive for COVID-19 in the community (general population)	 Time trajectory (per week): Estimate (SE): -0.003 (0.003); p = 0.25; OR: 0.997; 95% CI: 0.991 - 1.002 First vaccine dose (change in level): Estimate (SE): -0.137 (0.035); p <0.001; OR: 0.872; 95% CI: 0.814 - 0.934 Second vaccine dose (change in level): Estimate (SE): -0.092 (0.031); p = 0.003; OR: 0.912; 95% CI: 0.859 - 0.969 Time since first vaccination (per week): Estimate (SE): 0.006 (0.005); p = 0.21; OR: 1.006; 95% CI: 0.996 - 1.016 Time since second vaccination (per week): Estimate (SE): -0.011 (0.005); p = 0.03; OR: 0.989; 95% CI: 0.979 - 0.999
n = 28,356	Activity-limiting long COVID - Time trajectory (per week): Estimate (SE): 0.003 (0.004); p = 0.44; OR: 1.003; 95% CI: 0.996 - 1.010 - First vaccine dose (change in level): Estimate (SE): -0.131 (0.044); p = 0.003; OR: 0.877; 95% CI: 0.805 - 0.955 - Second vaccine dose (change in level): Estimate (SE): -0.096 (0.038); p = 0.01; OR: 0.909; 95% CI: 0.844 - 0.979 - Time since first vaccination (per week): Estimate (SE): 0.006 (0.006); p = 0.35; OR: 1.006; 95% CI: 0.994 - 1.018 - Time since second vaccination (per week): Estimate (SE): -0.013 (0.006); p = 0.03; OR: 0.987; 95% CI: 0.976 - 0.998

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	 Analysis: Estimated time trajectories of long COVID from COVID-19 infection, and changes in trajectories after covid-19 vaccination, moderated by vaccine type. Method: Logistic regression (adjusted for age, sex, white or non-white ethnicity, region or country, area deprivation fifth group, health status, patient-facing health or social care worker, hospital admission with acute COVID-19, and calendar time of infection). Long COVID of any severity Time trajectory (per week): Estimate (SE): -0.004 (0.003); p = 0.19; OR: 0.996; 95% CI: 0.990 - 1.002 First vaccine dose (change in level): Estimate (SE): -0.093 (0.055); p = 0.09; OR: 0.911; 95% CI: 0.818 - 1.014 Second vaccine dose (change in level): Estimate (SE): -0.093 (0.051); p = 0.07; OR: 0.911; 95% CI: 0.985 - 1.016 Time since first vaccination (per week): Estimate (SE): -0.004 (0.008); p = 0.55; OR: 1.000; 95% CI: 0.985 - 1.016 Time since second vaccination (per week): Estimate (SE): -0.006 (0.008); p = 0.40; OR: 1.048; 95% CI: 0.981 - 1.013 Vaccine type: adenovirus vector (versus mRNA): Estimate (SE): -0.004 (0.008); p = 0.31; OR: 0.996; 95% CI: 0.981 - 1.166 First vaccination interacted with type: Estimate (SE): 0.002 (0.064); p = 0.31; OR: 1.002; 95% CI: 0.818 - 1.066 Second vaccination interacted with type: Estimate (SE): 0.009 (0.009); p = 0.33; OR: 1.009; 95% CI: 0.991 - 1.028 Time since first vaccination interacted with type: Estimate (SE): -0.010 (0.010); p = 0.33; OR: 1.099; 95% CI: 0.970 - 1.010 Activity-limiting long COVID Time trajectory (per week): Estimate (SE): -0.056; OR: 1.002; 95% CI: 0.995 - 1.009 First vaccine dose (change in level): Estimate (SE): -0.056 (0.064); p = 0.68; OR: 0.974; 95% CI: 0.860 - 1.103 Time since first vaccination (per week): Estimate (SE): -0.015 (0.010); p = 0.77; OR: 1.003; 95% CI: 0.860 - 1.103 Time since first vaccination (per week): Estimate (SE): -0.
	- First vaccination interacted with type: Estimate (SE): 0.045 (0.087); $p = 0.60$; OR: 1.046; 95% CI:0.883 - 1.240 - Second vaccination interacted with type: Estimate (SE): -0.116 (0.080); $p = 0.15$; OR: 0.890; 95% CI: 0.761 - 1.041 - Time since first vaccination interacted with type: Estimate (SE): 0.004 (0.012); $p = 0.75$; OR: 1.004; 95% CI: 0.981 - 1.027 - Time since second vaccination interacted with type: Estimate (SE): 0.004 (0.013); $p = 0.73$; OR: 1.004; 95% CI: 0.980 - 1.029
Bernas et al. ⁽⁵³⁾ Population: Potential stem cell donors registered with DKMS Germany who had consented to participate in an initial COVID-19 survey Case group: those with previous COVID-19 diagnosis n = 12,609	 Analysis: Odds ratios for cases to experience symptoms daily or daily and/or occasionally compared to controls. Method: Multivariate logistic regression (adjusted for severity of acute COVID-19 and age). Anxiety Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 0.76; 95% CI: 0.63 – 0.93; Daily and or occasional symptoms: OR: 0.70; 95% CI: 0.62 – 0.80 25 – 39 years: Daily symptoms: OR: 0.92; 95% CI: 0.68 – 1.26; Daily and or occasional symptoms: OR: 0.86; 95% CI: 0.71 – 1.04 40 – 61 years: Daily symptoms: OR: 0.99; 95% CI: 0.73 – 1.35; Daily and or occasional symptoms: OR: 0.81; 95% CI: 0.67 – 0.99 Severe acute COVID-19: 18 – 24 years: Daily symptoms: OR: 1.57; 95% CI: 1.20 – 2.07; Daily and or occasional symptoms: OR: 1.36; 95% CI: 1.05 – 1.77 25 – 39 years: Daily symptoms: OR: 1.57; 95% CI: 1.02 – 2.43; Daily and or occasional symptoms: OR: 1.33; 95% CI: 0.90 – 1.98

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
Control group: those without previous COVID- 19 diagnosis n = 186,768	40 – 61 years: Daily symptoms: OR: 2.16; 95% CI: 1.43 – 3.26; Daily and or occasional symptoms: OR: 1.51; 95% CI: 1.03 – 2.22 Depression - Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 0.81; 95% CI: 0.64 – 1.04; Daily and or occasional symptoms: OR: 0.80; 95% CI: 0.70 – 0.91 25 – 39 years: Daily symptoms: OR: 1.12; 95% CI: 0.76 – 1.65; Daily and or occasional symptoms: OR: 0.97; 95% CI: 0.80 – 1.18 40 – 61 years: Daily symptoms: OR: 0.95; 95% CI: 0.64 – 1.40; Daily and or occasional symptoms: OR: 0.95; 95% CI: 0.79 – 1.15 - Severe acute COVID-19: 18 – 24 years: Daily symptoms: OR: 2.06; 95% CI: 1.51 – 2.81; Daily and or occasional symptoms: OR: 1.57; 95% CI: 1.24 – 1.99
	 25 – 39 years: Daily symptoms: OR: 1.70; 95% CI: 1.02 – 2.82; Daily and or occasional symptoms: OR: 1.57; 95% CI: 1.10 – 2.26 40 – 61 years: Daily symptoms: OR: 2.73; 95% CI: 1.171 – 4.37; Daily and or occasional symptoms: OR: 1.86; 95% CI: 1.31 – 2.64 <u>Disturbance of memory</u> Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 1.77; 95% CI: 1.30 – 2.42; Daily and or occasional symptoms: OR: 1.52; 95% CI: 1.32 – 1.76 25 – 39 years: Daily symptoms: OR: 2.27; 95% CI: 1.39 – 3.70; Daily and or occasional symptoms: OR: 1.67; 95% CI: 1.33 – 2.08 40 – 61 years: Daily symptoms: OR: 3.19; 95% CI: 1.99 – 5.10; Daily and or occasional symptoms: OR: 1.84; 95% CI: 1.48 – 2.29 Severe acute COVID-19:
	 18 – 24 years: Daily symptoms: OR: 4.55; 95% CI: 3.13 – 6.62; Daily and or occasional symptoms: OR: 3.59; 95% CI: 2.84 – 4.54 25 – 39 years: Daily symptoms: OR: 6.21; 95% CI: 3.47 – 11.10; Daily and or occasional symptoms: OR: 3.99; 95% CI: 2.79 – 5.71 40 – 61 years: Daily symptoms: OR: 10.33; 95% CI: 5.96 – 17.90; Daily and or occasional symptoms: OR: 4.84; 95% CI: 3.42 – 6.84 Fatique Asymptomatic/moderate acute COVID-19:
	 18 – 24 years: Daily symptoms: OR: 1.02; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 25 – 39 years: Daily symptoms: OR: 1.13; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 1.26; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 58vere acute COVID-19: 18 – 24 years: Daily symptoms: OR: 2.29; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 25 – 39 years: Daily symptoms: OR: 2.27; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 25 – 39 years: Daily symptoms: OR: 2.27; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: OR: 3.78; 95% CI: ;Daily and or occasional symptoms: OR: ; 95% CI: 40 – 61 years: Daily symptoms: 0R: 40 – 61 years: Daily symptoms: 0R: 40 – 61 years: Daily symptoms: 0R: 40 – 61 years: 0R: 40 – 61 years: 0R:
	Headache • Asymptomatic/moderate acute COVID-19: 18 - 24 years: Daily symptoms: OR: 1.18; 95% CI: 0.92 - 1.51; Daily and or occasional symptoms: OR: 0.97; 95% CI: 0.85 - 1.10 25 - 39 years: Daily symptoms: OR: 1.29; 95% CI: 0.87 - 1.92; Daily and or occasional symptoms: OR: 0.86; 95% CI: 0.71 - 1.06 40 - 61 years: Daily symptoms: OR: 1.32; 95% CI: 0.88 - 1.98; Daily and or occasional symptoms: OR: 0.86; 95% CI: 0.71 - 1.05 • Severe acute COVID-19: 18 - 24 years: Daily symptoms: OR: 2.60; 95% CI: 1.90 - 3.55; Daily and or occasional symptoms: OR: 2.03; 95% CI: 1.51 - 2.72 25 - 39 years: Daily symptoms: OR: 2.84; 95% CI: 1.72 - 4.68; Daily and or occasional symptoms: OR: 1.50; 95% CI: 0.97 - 2.33

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	40 – 61 years: Daily symptoms: OR: 3.73; 95% CI: 2.31 – 6.02; Daily and or occasional symptoms: OR: 1.47; 95% CI: 0.96 – 2.26
	 Loss of concentration Asymptomatic/moderate acute COVID-19: 18 - 24 years: Daily symptoms: OR: 1.26; 95% CI: 1.02 - 1.56; Daily and or occasional symptoms: OR: 0.94; 95% CI: 0.83 - 1.06 25 - 39 years: Daily symptoms: OR: 1.67; 95% CI: 1.19 - 2.36; Daily and or occasional symptoms: OR: 1.17; 95% CI: 0.96 - 1.41 40 - 61 years: Daily symptoms: OR: 2.23; 95% CI: 1.60 - 3.11; Daily and or occasional symptoms: OR: 1.33; 95% CI: 1.10 - 1.61 Severe acute COVID-19: 18 - 24 years: Daily symptoms: OR: 2.88; 95% CI: 2.17 - 3.83; Daily and or occasional symptoms: OR: 2.38; 95% CI: 1.83 - 3.08 25 - 39 years: Daily symptoms: OR: 3.68; 95% CI: 2.34 - 5.80; Daily and or occasional symptoms: OR: 2.49; 95% CI: 1.68 - 3.69 40 - 61 years: Daily symptoms: OR: 7.41; 95% CI: 4.85 - 11.33; Daily and or occasional symptoms: OR: 3.62; 95% CI: 2.46 - 5.32 Sleep disorders
	 Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 0.97; 95% CI: 0.77 – 1.22; Daily and or occasional symptoms: OR: 0.80; 95% CI: 0.71 – 0.91
	25 – 39 years: Daily symptoms: OR: 1.07; 95% CI: 0.75 – 1.54; Daily and or occasional symptoms: OR: 0.94; 95% CI: 0.78 – 1.14 40 – 61 years: Daily symptoms: OR: 0.98; 95% CI: 0.70 – 1.39; Daily and or occasional symptoms: OR: 0.99; 95% CI: 0.82 – 1.20 - Severe acute COVID-19:
	18 – 24 years: Daily symptoms: OR: 2.64; 95% CI: 1.98 – 3.51; Daily and or occasional symptoms: OR: 1.55; 95% CI: 1.21 – 1.98 25 – 39 years: Daily symptoms: OR: 2.51; 95% CI: 1.60 – 3.93; Daily and or occasional symptoms: OR: 1.68; 95% CI: 1.16 – 2.45 40 – 61 years: Daily symptoms: OR: 2.78; 95% CI: 1.82 – 4.24; Daily and or occasional symptoms: OR: 1.55; 95% CI: 1.08 – 2.23
	Chest pain
	 Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 2.13; 95% CI: 1.17 – 3.85; Daily and or occasional symptoms: OR: 1.31; 95% CI: 1.10 – 1.58 25 – 39 years: Daily symptoms: OR: 2.76; 95% CI: 1.06 – 7.21; Daily and or occasional symptoms: OR: 1.36; 95% CI: 1.02 – 1.80 40 – 61 years: Daily symptoms: OR: 3.50; 95% CI: 1.36 – 8.97; Daily and or occasional symptoms: OR: 1.53; 95% CI: 1.16 - 2.03 Severe acute COVID-19: 18 – 24 years: Daily symptoms: OR: 3.31; 95% CI: 1.39 – 7.88; Daily and or occasional symptoms: OR: 3.33; 95% CI: 2.59 – 4.29 25 – 39 years: Daily symptoms: OR: 15.42; 95% CI: 4.28 – 55.59; Daily and or occasional symptoms: OR: 3.86; 95% CI: 2.61 – 5.71 40 – 61 years: Daily symptoms: OR: 19.88; 95% CI: 5.64 – 70.05; Daily and or occasional symptoms: OR: 4.98; 95% CI: 3.43 – 7.25
	Cough - Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 1.20; 95% CI: 0.73 – 1.99; Daily and or occasional symptoms: OR: 1.13; 95% CI: 0.96 – 1.33 25 – 39 years: Daily symptoms: OR: 0.75; 95% CI: 0.33 – 1.71; Daily and or occasional symptoms: OR: 0.91; 95% CI: 0.71 – 1.18 40 – 61 years: Daily symptoms: OR: 1.47; 95% CI: 0.69 – 3.11; Daily and or occasional symptoms: OR: 1.06; 95% CI: 0.83 – 1.36 - Severe acute COVID-19:
	18 – 24 years: Daily symptoms: OR: 4.03; 95% CI: 2.32 – 7.01; Daily and or occasional symptoms: OR: 2.09; 95% CI: 1.61 – 2.71 25 – 39 years: Daily symptoms: OR: 2.94; 95% CI: 1.23 – 7.01; Daily and or occasional symptoms: OR: 2.07; 95% CI: 1.39 – 3.07

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	40 – 61 years: Daily symptoms: OR: 4.16; 95% CI: 1.85 – 9.36; Daily and or occasional symptoms: OR: 2.36; 95% CI: 1.61 – 3.46
	Dyspnoea - Asymptomatic/moderate acute COVID-19: 18 - 24 years: Daily symptoms: OR: 2.39; 95% CI: 1.26 - 4.54; Daily and or occasional symptoms: OR: 1.82; 95% CI: 1.50 - 2.21 25 - 39 years: Daily symptoms: OR: 1.53; 95% CI: 0.53 - 4.44; Daily and or occasional symptoms: OR: 1.69; 95% CI: 1.25 - 2.28 40 - 61 years: Daily symptoms: OR: 2.07; 95% CI: 0.79 - 5.38; Daily and or occasional symptoms: OR: 1.63; 95% CI: 1.23 - 2.18 - Severe acute COVID-19: 18 - 24 years: Daily symptoms: OR: 18.55; 95% CI: 11.59 - 29.68; Daily and or occasional symptoms: OR: 9.57; 95% CI: 7.53 - 12.16 25 - 39 years: Daily symptoms: OR: 16.96; 95% CI: 8.10 - 35.51; Daily and or occasional symptoms: OR: 9.46; 95% CI: 6.55 - 13.67 40 - 61 years: Daily symptoms: OR: 16.64; 95% CI: 8.36 - 33.11; Daily and or occasional symptoms: OR: 10.87; 95% CI: 7.62 - 15.50
	Palpitation • Asymptomatic/moderate acute COVID-19: 18 - 24 years: Daily symptoms: OR: 1.38; 95% CI: 0.85 - 2.22; Daily and or occasional symptoms: OR: 1.29; 95% CI: 1.11 - 1.50 25 - 39 years: Daily symptoms: OR: 1.86; 95% CI: 0.88 - 3.93; Daily and or occasional symptoms: OR: 1.36; 95% CI: 1.07 - 1.72 40 - 61 years: Daily symptoms: OR: 1.60; 95% CI: 0.77 - 3.31; Daily and or occasional symptoms: OR: 1.21; 95% CI: 0.96 - 1.53 • Severe acute COVID-19: 18 - 24 years: Daily symptoms: OR: 7.03; 95% CI: 4.66 - 10.62; Daily and or occasional symptoms: OR: 3.64; 95% CI: 2.88 - 4.60 25 - 39 years: Daily symptoms: OR: 6.68; 95% CI: 3.46 - 12.90; Daily and or occasional symptoms: OR: 3.48; 95% CI: 2.43 - 4.99 40 - 61 years: Daily symptoms: OR: 7.10; 95% CI: 3.84 - 13.13; Daily and or occasional symptoms: OR: 3.65; 95% CI: 2.58 - 5.18
	Abdominal pain
	 Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 0.75; 95% CI: 0.45 – 1.24; Daily and or occasional symptoms: OR: 0.92; 95% CI: 0.80 – 1.07 25 – 39 years: Daily symptoms: OR: 1.30; 95% CI: 0.58 – 2.92; Daily and or occasional symptoms: OR: 0.85; 95% CI: 0.68 – 1.07 40 – 61 years: Daily symptoms: OR: 1.32; 95% CI: 0.59 – 2.97; Daily and or occasional symptoms: OR: 1.00; 95% CI: 0.80 – 1.26 Severe acute COVID-19: 18 – 24 years: Daily symptoms: OR: 1.89; 95% CI: 1.09 – 3.28; Daily and or occasional symptoms: OR: 1.50; 95% CI: 1.17 – 1.91 25 – 39 years: Daily symptoms: OR: 2.12; 95% CI: 0.84 – 5.36; Daily and or occasional symptoms: OR: 1.51; 95% CI: 1.04 – 2.20 40 - 61 years: Daily symptoms: OR: 3.83; 95% CI: 1.64 – 8.95; Daily and or occasional symptoms: OR: 1.93; 95% CI: 1.35 – 2.77
	 <u>Diarrhoea</u> Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 1.57; 95% CI: 1.08 – 2.28; Daily and or occasional symptoms: OR: 1.08; 95% CI: 0.94 – 1.23 25 – 39 years: Daily symptoms: OR: 1.55; 95% CI: 0.84 – 2.85; Daily and or occasional symptoms: OR: 1.06; 95% CI: 0.86 – 1.31 40 – 61 years: Daily symptoms: OR: 0.61; 95% CI: 0.31 – 1.21; Daily and or occasional symptoms: OR: 1.03; 95% CI: 0.84 – 1.27 Severe acute COVID-19: 18 – 24 years: Daily symptoms: OR: 1.13; 95% CI: ;Daily and or occasional symptoms: OR: 1.38; 95% CI: 1.08 – 1.75 25 – 39 years: Daily symptoms: OR: 2.05; 95% CI: ;Daily and or occasional symptoms: OR: 1.52; 95% CI: 1.05 – 2.19

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	40 – 61 years: Daily symptoms: OR: 2.40; 95% CI: ;Daily and or occasional symptoms: OR: 1.63; 95% CI: 1.14 – 2.32
	Lack of appetite - Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 1.13; 95% CI: 0.73 – 1.75; Daily and or occasional symptoms: OR: 0.91; 95% CI: 0.78 – 1.06 25 – 39 years: Daily symptoms: OR: 1.77; 95% CI: 0.86 – 3.63; Daily and or occasional symptoms: OR: 0.98; 95% CI: 0.77 – 1.25 40 – 61 years: Daily symptoms: OR: 1.73; 95% CI: 0.80 – 3.74; Daily and or occasional symptoms: OR: 1.06; 95% CI: 0.84 – 1.36 - Severe acute COVID-19: 18 – 24 years: Daily symptoms: OR: 1.95; 95% CI: 1.07 – 3.55; Daily and or occasional symptoms: OR: 1.97; 95% CI: 1.55 – 2.50 25 – 39 years: Daily symptoms: OR: 2.07; 95% CI: 0.73 – 5.86; Daily and or occasional symptoms: OR: 1.73; 95% CI: 1.19 – 2.52 40 – 61 years: Daily symptoms: OR: 1.99; 95% CI: 0.69 – 5.74; Daily and or occasional symptoms: OR: 2.43; 95% CI: 1.69 – 3.49
	Nausea/vomiting • Asymptomatic/moderate acute COVID-19: 18 - 24 years: Daily symptoms: OR: 1.09; 95% CI: 0.46 - 2.58; Daily and or occasional symptoms: OR: 1.07; 95% CI: 0.88 - 1.32 25 - 39 years: Daily symptoms: OR: 2.08; 95% CI: 0.53 - 8.11; Daily and or occasional symptoms: OR: 1.10; 95% CI: 0.80 - 1.53 40 - 61 years: Daily symptoms: OR: 1.74; 95% CI: 0.39 - 7.71; Daily and or occasional symptoms: OR: 1.06; 95% CI: 0.77 - 1.48 • Severe acute COVID-19: 18 - 24 years: Daily symptoms: OR: 4.62; 95% CI: 2.23 - 9.85; Daily and or occasional symptoms: OR: 2.04; 95% CI: 1.53 - 2.72 25 - 39 years: Daily symptoms: OR: 2.59; 95% CI: 0.67 - 10.08; Daily and or occasional symptoms: OR: 2.11; 95% CI: 1.35 - 3.32 40 - 61 years: Daily symptoms: OR: 2.69; 95% CI: 0.66 - 11.01; Daily and or occasional symptoms: OR: 2.78; 95% CI: 1.80 - 4.30
	Vertigo
	 Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 1.09; 95% CI: 0.68 – 1.74; Daily and or occasional symptoms: OR: 1.01; 95% CI: 0.88 – 1.17 25 – 39 years: Daily symptoms: OR: 1.50; 95% CI: 0.71 – 3.16; Daily and or occasional symptoms: OR: 1.11; 95% CI: 0.89 – 1.39 40 – 61 years: Daily symptoms: OR: 1.28; 95% CI: 0.61 – 2.69; Daily and or occasional symptoms: OR: 1.10; 95% CI: 0.89 – 1.37 Severe acute COVID-19: 18 – 24 years: Daily symptoms: OR: 2.95; 95% CI: 1.79 – 4.86; Daily and or occasional symptoms: OR: 2.61; 95% CI: 2.06 – 3.32 25 – 39 years: Daily symptoms: OR: 4.33; 95% CI: 1.97 – 9.55; Daily and or occasional symptoms: OR: 2.48; 95% CI: 1.72 – 3.58 40 – 61 years: Daily symptoms: OR: 6.21; 95% CI: 2.96 – 13.05; Daily and or occasional symptoms: OR: 2.71; 95% CI: 1.90 – 3.86
	Arthralgia - Asymptomatic/moderate acute COVID-19: 18 - 24 years: Daily symptoms: OR: 1.01; 95% CI: 0.63 - 1.63; Daily and or occasional symptoms: OR: 0.98; 95% CI: 0.84 - 1.15 25 - 39 years: Daily symptoms: OR: 1.25; 95% CI: 0.61 - 2.56; Daily and or occasional symptoms: OR: 1.01; 95% CI: 0.79 - 1.29 40 - 61 years: Daily symptoms: OR: 1.33; 95% CI: 0.67 - 2.62; Daily and or occasional symptoms: OR: 0.99; 95% CI: 0.78 - 1.25 - Severe acute COVID-19: 18 - 24 years: Daily symptoms: OR: 3.23; 95% CI: 1.98 - 5.28; Daily and or occasional symptoms: OR: 2.19; 95% CI: 1.72 - 2.79 25 - 39 years: Daily symptoms: OR: 4.00; 95% CI: 1.90 - 8.41; Daily and or occasional symptoms: OR: 1.94; 95% CI: 1.34 - 2.80

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	40 – 61 years: Daily symptoms: OR: 3.20; 95% CI: 1.58 – 6.49; Daily and or occasional symptoms: OR: 2.03; 95% CI: 1.42 – 2.90
	Myalgia - Asymptomatic/moderate acute COVID-19: 18 - 24 years: Daily symptoms: OR: 1.59; 95% CI: 1.00 - 2.53; Daily and or occasional symptoms: OR: 0.87; 95% CI: 0.75 - 1.02 25 - 39 years: Daily symptoms: OR: 1.61; 95% CI: 0.79 - 3.26; Daily and or occasional symptoms: OR: 1.01; 95% CI: 0.80 - 1.28 40 - 61 years: Daily symptoms: OR: 1.38; 95% CI: 0.70 - 2.72; Daily and or occasional symptoms: OR: 1.13; 95% CI: 0.89 - 1.42 - Severe acute COVID-19: 18 - 24 years: Daily symptoms: OR: 3.81; 95% CI: 2.19 - 6.61; Daily and or occasional symptoms: OR: 1.91; 95% CI: 1.50 - 2.44 25 - 39 years: Daily symptoms: OR: 5.00; 95% CI: 2.19 - 11.41; Daily and or occasional symptoms: OR: 1.91; 95% CI: 1.32 - 2.76
	40 – 61 years: Daily symptoms: OR: 4.44; 95% CI: 2.01 – 9.82; Daily and or occasional symptoms: OR: 2.31; 95% CI: 1.62 – 3.30 Sore throat • Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 0.73; 95% CI: 0.31 – 1.74; Daily and or occasional symptoms: OR: 1.08; 95% CI: 0.92 – 1.26 25 – 39 years: Daily symptoms: OR: 1.60; 95% CI: 0.43 – 5.89; Daily and or occasional symptoms: OR: 1.00; 95% CI: 0.78 – 1.28 40 – 61 years: Daily symptoms: OR: 1.55; 95% CI: 0.41 – 5.82; Daily and or occasional symptoms: OR: 0.97; 95% CI: 0.75 – 1.24 • Severe acute COVID-19: 18 – 24 years: Daily symptoms: OR: 0.98; 95% CI: 0.26 – 3.73; Daily and or occasional symptoms: OR: 1.45; 95% CI: 1.11 – 1.89 25 – 39 years: Daily symptoms: OR: 3.72; 95% CI: 0.52 – 26.63; Daily and or occasional symptoms: OR: 1.36; 95% CI: 0.90 – 2.06
	 40 – 61 years: Daily symptoms: OR: 4.20; 95% CI: 0.60 – 29.41; Daily and or occasional symptoms: OR: 1.79; 95% CI: 1.20 – 2.67 <u>Anosmia/aqeusia</u> Asymptomatic/moderate acute COVID-19: 18 – 24 years: Daily symptoms: OR: 47.17; 95% CI: 31.71 – 70.18; Daily and or occasional symptoms: OR: 14.26; 95% CI: 11.67 – 17.42
	25 – 39 years: Daily symptoms: OR: 42.64; 95% CI: 23.18 – 78.44; Daily and or occasional symptoms: OR: 16.18; 95% CI: 11.88 – 22.04 40 – 61 years: Daily symptoms: OR: 25.73; 95% CI: 14.35 – 46.16; Daily and or occasional symptoms: OR: 13.29; 95% CI: 9.84 – 17.95 - Severe acute COVID-19: 18 – 24 years: Daily symptoms: OR: 94.98; 95% CI: 59.43 – 151.80; Daily and or occasional symptoms: OR: 26.86; 95% CI: 20.19 – 35.74 25 – 39 years: Daily symptoms: OR: 56.56; 95% CI: 27.29 – 117.21; Daily and or occasional symptoms: OR: 23.72; 95% CI: 15.25 – 36.90 40 – 61 years: Daily symptoms: OR: 43.22; 95% CI: 21.74 – 85.94; Daily and or occasional symptoms: OR: 23.91; 95% CI: 15.68 – 36.46
Kostev et al. ⁽⁵⁸⁾	Analysis: Association between predefined variables and post-covid-19 condition in the 12 months after the diagnosis of COVID-19 in patients followed in general practices in Germany. Method: Multivariable logistic regression (adjusted for age, sex and comorbidities).
Population: Those who attended a general practitioner (GP) with a COVID-19 diagnosis n = 51,630	- Age (in years): 18–30: 1 (Reference) 31–45: OR: 1.40; 95% CI: 1.20 – 1.64; p <0.001 46–60: OR: 2.10; 95% CI: 1.81 – 2.45; p <0.001 61–70: OR: 1.81; 95% CI: 1.49 – 2.21; p <0.001

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	>70: OR: 1.54; 95% CI: 1.23 – 1.92; p <0.001
	- Sex:
	Male: 1 (Reference)
	Female: OR: 1.23; 95% CI: 1.16 – 1.33; p <0.001
	- Comorbidities (Present in at least 3% of patients in the 12 Months before the index date):
	Asthma: OR: 1.38; 95% CI: 1.19 – 1.59; p <0.001
	Reaction to severe stress, and adjustment disorders: OR: 1.24; 95% CI: 1.10 – 1.41; p <0.001
	Somatoform disorders: OR: 1.23; 95% CI: 1.07 – 1.40; p <0.001
	Sleep disorders: OR: 1.21; 95% CI: 1.06 – 1.39; p <0.005
	Lipid metabolism disorder: OR: 1.17; 95% CI: $1.04 - 1.33$; p = 0.009
	Osteoarthritis: OR: 1.17; 95% CI: 1.02 – 1.33; p = 0.023 Purine and pyrimidine metabolism disorder: OR: 1.17; 95% CI: 0.97 – 1.42; p = 0.098
	Migraine: OR: 1.16; 95% CI: 0.97 – 1.36; $p = 0.075$
	Vitamin D deficiency: OR: 1.15; 95% CI: 0.97 – 1.37; $p = 0.106$
	Chronic sinusitis: OR: 1.13; 95% CI: $0.99 - 1.29$; p = 0.106
	Anxiety disorders: OR: 1.13; 95% CI: $0.96 - 1.23$; p = 0.152
	Shoulder lesions: OR: 1.12; 95% CI: $0.97 - 1.29$; p = 0.116
	Mononeuropathies: OR: 1.11; 95% CI: $0.95 - 1.30$; p = 0.189
	Thyroid gland disorders: OR: 1.10; 95% CI: $0.98 - 1.23$; p = 0.103
	Overweight and obesity: OR: 1.09; 95% CI: $0.95 - 1.26$; $p = 0.207$
	Varicose vein: OR: 1.08; 95% CI: $0.95 - 1.25$; p = 0.358
	Heart disease: OR: 1.08 ; 95% CI: $0.91 - 1.28$; p = 0.383
	Cancer: OR: 1.02; 95% CI: $0.84 - 1.24$; p = 0.842
	Diseases of oesophagus, stomach, and duodenum: OR: 1.01; 95% CI: $0.91 - 1.13$; p = 0.845
	Hypertension: OR: 1.01; 95% CI: $0.90 - 1.14$; p = 0.886
	Vasomotor and allergic rhinitis: OR: 1.01; 95% CI: $0.86 - 1.18$; $p = 0.944$
	Spondylosis: OR: 0.97; 95% CI: 0.82 – 1.13; p = 0.658
	Nicotine dependence: OR: 0.96 ; 95% CI: $0.78 - 1.19$; $p = 0.705$
	Depression: OR: 0.95; 95% CI: 0.84 – 1.08; p = 0.433
	Chronic kidney disease and kidney failure: OR: 0.94; 95% CI: 0.74 – 1.19; $p = 0.592$
	Chronic obstructive pulmonary disease: OR: 0.89; 95% CI: 0.76 – 1.04; p = 0.150
	Iron deficiency anaemia: OR: 0.89; 95% CI: 0.75 – 1.07; p = 0.228
	Diabetes mellitus: OR: 0.85; 95% CI: 0.73 – 0.99; p = 0.048
Meza-Torres et al. ⁽⁴⁸⁾	Analysis: Change in symptoms in the hospitalised and community groups before and after developing long COVID for people presenting with COVID-19 infection in the primary care sentinel cohort in England between March 1, 2020, and April 1, 2021 (n = 7,609).
Population: Those with a previous COVID-19	Method: Univariate logistic regression
infection identified from the primary care	
sentinel cohort (PCSC) of the Oxford-Royal	- Central nervous system: LC hospitalised: OR: 1.64; 95% CI: 1.2 - 2.24; LC Community: OR: 2.44; 95% CI: 2.09 - 2.86
College of General Practitioners Research and	Memory loss and confusion: LC hospitalised: OR: 5.02; 95% CI: 0.58 - 43.32; LC Community: OR: 3.51; 95% CI: 1.15 - 10.71
Surveillance Centre	Difficulty concentrating: LC hospitalised: OR: Infinite; LC Community: OR: 11.73; 95% CI: 3.62 - 38.01

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
Population further split into those with a COVID-19 infection only; those who developed LC, were referred to a LC service or had a symptom score suggestive of LC; and those who were hospitalised/not hospitalised with acute COVID-19 n = varies depending on analysis	Loss of smell: LC hospitalised: OR: 2.0; 95% CI: 0.5 - 8.06; LC Community: OR: 7.46; 95% CI: 4.23 - 13.17 Trouble sleeping: LC hospitalised: OR: 5.2; 95% CI: 0.85 - 2.01; LC Community: OR: 2.43; 95% CI: 4.3 - 4.13 Headache: LC hospitalised: OR: 6.02; 95% CI: 0.73 - 50.02; LC Community: OR: 2.43; 95% CI: 3.64 - 21.74 Vertigo and dizziness: LC hospitalised: OR: 1.6; 95% CI: 0.27 - 50.02; LC Community: OR: 2.1; 95% CI: 2.62 - 3.32 Sore throat LC hospitalised: OR: 3.6; 95% CI: 0.21 - 0.62; LC Community: OR: 2.95; 95% CI: 2.64 - 3.43 Sore throat LC hospitalised: OR: 1.6; 95% CI: 0.10 - 0.62; LC Community: OR: 2.89; 95% CI: 0.43 - 4.39 - 6.25 Cough OR: LC hospitalised: OR: 1.6; 95% CI: 1.21 - 0.62; LC Community: OR: 2.89; 95% CI: 1.96 - 2.68 Cardiovascular: LC hospitalised: OR: 1.6; 95% CI: 1.22 - 3.9; LC Community: OR: 2.29; 95% CI: 2.41 - 3.43 Palpitations: LC hospitalised: OR: 2.6; 95% CI: 1.36 - 2.9; LC Community: OR: 2.29; 95% CI: 2.35 - 4.96 Chest pain: LC hospitalised: OR: 2.6; 95% CI: 1.36 - 3.9; LC Community: OR: 3.42; 95% CI: 2.35 - 4.96 Chest pain: LC hospitalised: OR: 2.69; 95% CI: 1.36 - 3.9; LC Community: OR: 3.42; 95% CI: 2.51 - 3.28 General: LC hospitalised: OR: 3.68; 95% CI: 1.36 - 6.79; LC Community: OR: 3.42; 95% CI: 3.5 - 4.96 Chest pain: LC hospitalised: OR: 3.04; 95% CI: 1.36 - 6.79; LC Community: OR: 3.42; 95% CI: 3.5 - 4.96 Chest pain: LC hospitalised: OR: 3.04; 95% CI: 1.36 - 7.38; LC Community: OR: 3.42; 95% CI: 3.5 - 3.49 General: LC hospitalised: OR: 3.04; 95% CI: 1.36 - 7.37; LC Community: OR: 3.72; 95% CI: 5.58 - 8.71 Fever: LC hospitalised: OR: 3.04; 95% CI: 1.36 - 7.37; LC Community: OR: 3.72; 95% CI: 1.56 - 5.86 Abdominal pain: LC hospitalised: OR: 3.31; 95% CI: 1.27 - 3.73; LC Community: OR: 3.72; 95% CI: 1.71 - 4.22 Loss of appetite: LC hospitalised: OR: 3.39; 95% CI: 1.42 - 7.37; LC Community: OR: 3.19; 95% CI: 1.14 - 4.22 Loss of appetite: LC hospitalised: OR: 3.21; 95% CI: 1.26 - 7.57; LC Community: OR: 3.13; 95% CI: 1.14 - 4.22 Loss of appetite: LC hospi

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Conurbation: OR: 1.46; 95% CI: 1.39 - 1.53; p <0.001 - Depression: OR: 1.55; 95% CI: 1.47 - 1.64; p <0.001 - Anxiety: OR: 1.35; 95% CI: 1.28 - 1.43; p <0.001 - Asthma: OR: 1.28; 95% CI: 1.21 - 1.35; p <0.001 - CKD: OR: 0.76; 95% CI: 0.67 - 0.87; p <0.001 - Type 2 diabetes: OR: 1.18; 95% CI: 1.07 - 1.29; p <0.001 - Eczema: OR: 1.06; 95% CI: 1.0 - 1.12; p = 0.03 - Cambridge Multimorbidity Score: OR: 0.54; 95% CI: 0.52 - 0.56; p <0.001 - ICU admission: OR: 5.74; 95% CI: 5.02 - 6.53; p <0.001 Analysis: Associations with long COVID acquired after hospitalization (Cases of hospitalisation: n = 7,623; cases evaluated: n = 1,307). Method: Multivariate logistic regression (all covariates were included in a 3-step backward elimination using thresholds of a levels of .20, .10, and .05 in each step respectively, where a 2-sided a value of .05 was considered statistically significant. Age and sex were forced into the model at each step).
	 Age: OR: 1.01 (1.0 - 1.02); p <0.01 Sex: Female: 1 (Reference) Male: OR: 1.43 (1.25 - 1.64); p <0.001 Deprivation: Least deprived: 1 (Reference) Most deprived (Q1 -3): 1.42 (1.24 - 1.63); p <0.001 Ethnicity: White: 1 (Reference) Non-White: OR: 1.78 (1.50 - 2.12); p <0.001 Obesity: OR: 2.18; 95% CI: 1.91 - 2.49; p <0.001 Depression: OR: 0.84; 95% CI: 0.73 - 0.96; p = 0.01 Asthma: OR: 1.27; 95% CI: 1.10 - 1.47; p <0.01 CKD: OR: 1.44; 95% CI: 1.08 - 1.9; p = 0.01 Type 2 diabetes: OR: 1.66; 95% CI: 1.35 - 2.02; p <0.001 Cambridge Multimorbidity Score: OR: 1.41; 95% CI: 1.26 - 1.57; p <0.001
	Analysis: Risk factors associated with all-cause mortality in people with long COVID (Cases of all-cause mortality: $n = 7,623$; cases evaluated: $n = 23$). Method: Multivariate logistic regression (all covariates were included in a 3-step backward elimination using thresholds of a levels of .20, .10, and .05 in each step respectively, where a 2-sided a value of .05 was considered statistically significant. Age and sex were forced into the model at each step).
	- Age: OR: 1.08 (1.02 - 1.14); p <0.01 - Sex:

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Female: 1 (Reference) Male: OR: 3.32 (1.32 – 9.24); p = 0.01 - Population: City: 1 (Reference) Conurbation: OR: 0.38; 95% CI: 0.12 – 0.99; p = 0.07 - Cambridge Multimorbidity Score: OR: 2.11; 95% CI: 1.34 – 3.28; p <0.001 - Are variable of the original of the orig
	 Any vaccine dose at any time: OR: 0.1; 95% CI: 0.03 – 0.35; p <0.001 Analysis: Development of long COVID among individuals testing positive for COVID-19 Method: Multiple logistic regression (extended model to adjust for vaccination status and predominant variant at month of infection, along with sex, age, education, income, ethnicity, urbanicity and region).
	 Age: OR: 1.16; 95% CI: 1.13 - 1.20; p <0.001 Gender: Male: 1 (Reference) Female: OR: 1.95; 95% CI: 1.75 - 2.16; p <0.001 Income (\$): <25000: 1 (Reference)
Perlis et al. ⁽⁵⁷⁾	25,000-74,999: OR: 0.94; 95% CI: 0.85 - 1.06; p = 0.32 75000-149999: OR: 0.80; 95% CI: 0.69 - 0.91; p = 0.001 ≥150 000: OR: 0.76; 95% CI: 0.62 - 0.93; p = 0.01 - Education:
Population: Adults > 18 years old with a previous COVID-19 diagnosis	High school or less: 1 (Reference) Some college: OR: 1.17; 95% CI: 1.05 - 1.31; $p = 0.01$ Bachelor's degree: OR: 0.90; 95% CI: 0.79 - 1.03; $p = 0.03$ Graduate degree: OR: 0.68; 95% CI: 0.57 - 0.80; $p < 0.001$
n = 16,091	- Race: Asian: 1 (Reference) Black: OR: 1.03; 95% CI: 0.76 - 1.41; p = 0.84 Hispanic: OR: 1.35; 95% CI: 1.01 - 1.81; p = 0.04 Other category: OR: 1.81; 95% CI: 1.28 - 2.59; p <0.001 White: OR: 1.62; 95% CI: 1.25 - 2.13; p <0.001
	 Urbanicity: Rural: 1 (Reference) Suburban: OR: 0.99; 95% CI: 0.88 - 1.12; p = 0.93 Urban: OR: 0.76; 95% CI: 0.65 - 0.88; p <0.001 Region:
	Northeast: 1 (Reference) Midwest: OR: 1.10; 95% CI: 0.95 - 1.28; p = 0.20 South: OR: 1.08; 95% CI: 0.94 - 1.24; p = 0.31 West: OR: 1.06; 95% CI: 0.90 - 1.24; p = 0.50

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	- Prior vaccinations: None: 1 (Reference) Partial: OR: 0.93; 95% CI: 0.69 - 1.25; $p = 0.64$ Complete: OR: 0.72; 95% CI: 0.60 - 0.86; $p < 0.001$ - Predominant variant: Ancestral: 1 (Reference) Epsilon: OR: 0.81; 95% CI: 0.69 - 0.95; $p = 0.01$ Alpha: OR: 0.89; 95% CI: 0.73 - 1.07; $p = 0.21$ Delta: OR: 1.10; 95% CI: 0.96 - 1.25; $p = 0.18$ Omicron: OR: 0.77; 95% CI: 0.64 - 0.92; $p = 0.01$
Peter et al. ⁽⁶³⁾	Analysis: Prevalence ratios for new symptom clusters. Method: Mutually adjusted Analysis: Prevalence ratios for new symptom clusters. Method: Mutually adjusted Analysis: Prevalence ratios for new symptom clusters. Method: Mutually adjusted Analysis: Prevalence ratios for new symptom clusters. Male (ref.) Female: PR: 1.20; 95% CI: 1.16 to 1.24 - University entrance qualification Yes (ref.) No: PR: 1.02; 95% CI: 0.99 to 1.06 - Smoking status, N (%) Never (ref.) Former: PR: 1.02; 95% CI: 1.01 to 1.11 Current: PR: 1.02; 95% CI: 1.01 to 1.13 - Time since positive PCR, per month: PR: 1.00; 95% CI: 0.99 to 1.01 - Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 1.36; 95% CI: 1.33 to 1.40 Inpatient care: PR: 1.36; 95% CI: 1.33 to 1.40 Inpatient care: PR: 1.12; 95% CI: 1.03 to 1.16 Cardiovascular disorders: PR: 1.02; 95% CI: 1.03 to 1.16 Cardiovascular disorders: PR: 1.02; 95% CI: 1.03 to 1.11 Neurological or sensory disorders: PR: 1.02; 95% CI: 1.03 to 1.10 Neurological or sensory disorders: PR: 1.02; 95% CI: 1.03 to 1.16 Cardiovascular disorde

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Fability - Age, per 10 years: PR: 1.04; 95% CI: 1.01 to 1.06 - Sex Male (ref.) Female: PR: 1.27, 95% CI: 1.21 to 1.34 - University entrance qualification Yes Yes No: PR: 1.05; 95% CI: 1.00 to 1.11 - Smoking status, N (%) Never (ref.) Former: PR: 1.10; 95% CI: 1.04 to 1.17 Current: PR: 1.17; 95% CI: 1.08 to 1.26 BMI, per 5 kg/m ² : PR: 1.05; 95% CI: 1.03 to 1.07 Time since positive PCR, per month: PR: 1.00; 95% CI: 0.98 to 1.01 Treatement of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 1.89; 95% CI: 1.17 to 1.88 Inpatient care: PR: 1.89; 95% CI: 1.11 to 1.23 Cardiovascular disorders: PR: 1.17; 95% CI: 1.11 to 1.23 Cardiovascular disorders: PR: 1.17; 95% CI: 1.04 to 1.18 Neurological or sensory disorders: PR: 1.05; 95% CI: 0.09 to 1.12 Metabolic disorders: PR: 1.16; 95% CI: 1.05 to 1.19 Metabolic disorders: PR: 1.16; 95% CI: 1.08 to 1.22 Dermatological diseases: PR: 1.10; 95% CI: 0.94 to 1.08 Carce: PR: 0.97; 95% CI: 0.16 to 1.01 Male (ref.) Female: PR: 1.32; 95% CI: 0.96 to 1.04 Male (ref.) <t< th=""></t<>

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Current: PR: 1.11; 95% CI: 1.01 to 1.22 - BMI, per 5 kg/m ² : PR: 1.04; 95% CI: 1.02 to 1.07 - Time since positive PCR, per month: PR: 1.01; 95% CI: 0.99 to 1.03 - Treatment of acute SARS-CoV-2 infection
	No medical care (ref.) Outpatient care: PR: 1.87; 95% CI: 1.76 to 1.98 Inpatient care: PR: 1.93; 95% CI: 1.74 to 2.14
	- Pre-existing conditions Musculoskeletal disorders: PR: 1.20; 95% CI: 1.13 to 1.27 Cardiovascular disorders: PR: 1.04; 95% CI: 0.97 to 1.12
	Neurological or sensory disorders: PR: 1.12; 95% CI: 1.05 to 1.20 Metabolic disorders: PR: 1.12; 95% CI: 1.05 to 1.20 Mental disorders: PR: 1.19; 95% CI: 1.11 to 1.28 Respiratory diseases: PR: 1.12; 95% CI: 1.04 to 1.20
	Dermatological diseases: PR: 1.04; 95% CI: 0.96 to 1.13 Cancer: PR: 1.03; 95% CI: 0.91 to 1.18
	<u>Chest Symptoms</u> - Age, per 10 years: PR: 0.98; 95% CI: 0.96 to 1.00 - Sex
	Male (ref.) Female: PR: 1.27; 95% CI: 1.19 to 1.35 - University entrance qualification Yes (ref.)
	No: PR: 1.08; 95% CI: 1.02 to 1.15 - Smoking status, N (%) Never (ref.)
	Former: PR: 1.14; 95% CI: 1.07 to 1.22 Current: PR: 1.17; 95% CI: 1.06 to 1.28 - BMI, per 5 kg/m ² : PR: 1.10; 95% CI: 1.07 to 1.13 - Time since positive PCR, per month: PR: 1.00; 95% CI: 0.98 to 1.02
	 Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 1.83; 95% CI: 1.72 to 1.95
	Inpatient care: PR: 1.96; 95% CI: 1.75 to 2.18 - Pre-existing conditions Musculoskeletal disorders: PR: 1.24; 95% CI: 1.16 to 1.32
	Cardiovascular disorders: PR: 1.14; 95% CI: 1.06 to 1.23 Neurological or sensory disorders: PR: 1.13; 95% CI: 1.05 to 1.21 Metabolic disorders: PR: 1.09; 95% CI: 1.02 to 1.17

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Mental disorders: PR: 1.11; 95% CI: 1.02 to 1.19 Respiratory diseases: PR: 1.09 1.01 to 1.18 Dermatological diseases: PR: 1.03; 95% CI: 0.95 to 1.12 Cancer: PR: 0.99; 95% CI: 0.85 to 1.14
	Smell or taste disorder - Age, per 10 years: PR: .94; 95% CI: 0.92 to 0.97 - Sex Male (ref.) Female: PR: 1.25; 95% CI: 1.16 to 1.35 - University entrance qualification
	Yes (ref.) No: PR: 1.03; 95% CI: 0.96 to 1.11 - Smoking status, N (%) Never (ref.) Former: PR: 1.05; 95% CI: 0.97 to 1.14 Current : PR:1.03; 95% CI: 0.92 to 1.16
	 BMI, per 5 kg/m²: PR: 1.00; 95% CI: 0.96 to 1.03 Time since positive PCR, per month: PR: 1.04; 95% CI: 1.02 to 1.07 Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 1.33; 95% CI: 1.22 to 1.44 Inpatient care: PR: 1.23; 95% CI: 1.02 to 1.48
	 Pre-existing conditions Musculoskeletal disorders: PR: 1.22; 95% CI: 1.13 to 1.32 Cardiovascular disorders: PR: 1.04; 95% CI: 0.94 to 1.15 Neurological or sensory disorders: PR: 1.06; 95% CI: 0.97 to 1.16 Metabolic disorders: PR: 1.07; 95% CI: 0.98 to 1.18 Mental disorders: PR: 1.08; 95% CI: 0.98 to 1.19 Respiratory diseases: PR: 0.91; 95% CI: 0.82 to 1.01
	Dermatological diseases: PR: 1.07; 95% CI: 0.96 to 1.19 Cancer: PR: 1.08; 95% CI: 0.91 to 1.30 <u>Anxiety/Depression</u> - Age, per 10 years: PR: 1.05; 95% CI: 1.01 to 1.08 - Sex
	Male (ref.) Female: PR: 1.32; 95% CI: 1.22 to 1.44 - University entrance qualification Yes (ref.)

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	No: PR: 1.03; 95% CI: 0.96 to 1.12 - Smoking status, N (%) Never (ref.) Former: PR: 1.11; 95% CI: 1.02 to 1.21 Current: PR: 1.22; 95% CI: 1.08 to 1.38 - BMI, per 5 kg/m ² : PR: 1.02; 95% CI: 0.99 to 1.06 - Time since positive PCR, per month: PR: 1.00; 95% CI: 0.98 to 1.03 - Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 2.05; 95% CI: 1.89 to 2.22 Inpatient care: PR: 2.17; 95% CI: 1.87 to 2.52 - Pre-existing conditions Musculoskeletal disorders: PR: 1.05; 95% CI: 0.95 to 1.16 Neurological or sensory disorders: PR: 1.05; 95% CI: 0.95 to 1.15 Metabolic disorders: PR: 1.06; 95% CI: 0.96 to 1.16 Mental disorders: PR: 1.04; 95% CI: 0.94 to 1.15 Dermatological diseases: PR: 1.10; 95% CI: 0.98 to 1.22 Cancer: PR: 0.87; 95% CI: 0.71 to 1.07
	Headache/dizziness - Age, per 10 years: PR: 0.99; 95% CI: 0.96 to 1.02 - Sex Male (ref.) Female: PR: 1.32; 95% CI: 1.21 to 1.44 - University entrance qualification Yes (ref.) No: PR: 1.11; 95% CI: 1.03 to 1.21 - Smoking status, N (%) Never (ref.) Former: PR: 1.14; 95% CI: 1.04 to 1.24 Current: PR: 1.24; 95% CI: 1.09 to 1.40 - BMI, per 5 kg/m²: PR: 1.04; 95% CI: 1.01 to 1.08 - Time since positive PCR, per month: PR: 0.99; 95% CI: 0.97 to 1.02 - Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 1.94; 95% CI: 1.78 to 2.11 Inpatient care: PR: 2.10; 95% CI: 1.79 to 2.46 - Pre-existing conditions

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Musculoskeletal disorders: PR: 1.29; 95% CI: 1.18 to 1.40 Cardiovascular disorders: PR: 1.02; 95% CI: 0.92 to 1.13 Neurological or sensory disorders: PR: 0.99; 95% CI: 0.89 to 1.09 Metabolic disorders: PR: 1.13; 95% CI: 1.03 to 1.25 Mental disorders: PR: 1.17; 95% CI: 1.05 to 1.30 Respiratory diseases: PR: 1.10; 95% CI: 0.99 to 1.22 Dermatological diseases: PR: 0.92; 95% CI: 0.82 to 1.04 Cancer: PR: 0.95; 95% CI: 0.77 to 1.17
	Musculoskeletal pain - Age, per 10 years: PR: 1.20; 95% CI: 1.16 to 1.25 - Sex Male (ref.) Female: PR: 1.36; 95% CI: 1.24 to 1.49 - University entrance qualification Yes (ref.) No: PR: 1.13; 95% CI: 1.03 to 1.24 - Smoking status, N (%) Never (ref.) Former: PR: 1.07; 95% CI: 0.97 to 1.18 Current: PR: 1.37; 95% CI: 1.20 to 1.56 - BMI, per 5 kg/m ² : PR: 1.08; 95% CI: 1.04 to 1.12 - Time since positive PCR, per month: PR: 0.99; 95% CI: 0.97 to 1.02 - Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 2.16; 95% CI: 1.97 to 2.37
	Inpatient care: PR: 2.17; 95% CI: 1.83 to 2.56 - Pre-existing conditions Musculoskeletal disorders: PR: 1.21; 95% CI: 1.10 to 1.32 Cardiovascular disorders: PR: 1.13; 95% CI: 1.02 to 1.25 Neurological or sensory disorders: PR: 1.10; 95% CI: 0.99 to 1.22 Metabolic disorders: PR: 1.09; 95% CI: 0.98 to 1.21 Mental disorders: PR: 1.18; 95% CI: 1.06 to 1.32 Respiratory diseases: PR: 1.05; 95% CI: 0.94 to 1.18 Dermatological diseases: PR: 0.97; 95% CI: 0.85 to 1.11 Cancer: PR: 1.13; 95% CI: 0.94 to 1.37 Upper respiratory symptoms - Age, per 10 years: PR: 1.12; 95% CI: 1.07 to 1.16 - Sex

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Male (ref.) Female: PR: 1.14; 95% CI: 1.03 to 1.26 University entrance qualification Yes (ref.) No: PR: 1.17; 95% CI: 1.06 to 1.30 - Smoking status, N (%) Never (ref.) Former: PR: 0.93; 95% CI: 0.83 to 1.04 Current: PR: 1.28; 95% CI: 1.11 to 1.49 - BMI, per 5 kg/m ² : PR: 1.09; 95% CI: 1.04 to 1.14 - Time since positive PCR, per month: PR: 0.98; 95% CI: 0.95 to 1.01 - Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 2.07; 95% CI: 1.46 to 2.20 - Pre-existing conditions Musculoskeletal disorders: PR: 1.15; 95% CI: 1.02 to 1.29 Neurological or sensory disorders: PR: 1.14; 95% CI 1.01 to 1.28 Metabolic disorders: PR: 1.17; 95% CI 0.95 to 1.21 Mental disorders: PR: 1.17; 95% CI 0.95 to 1.21 Mental disorders: PR: 1.17; 95% CI 0.97 to 1.26 Respiratory diseases: PR: 1.17; 95% CI 0.92 to 1.22 Cancer: PR: 1.08; 95% CI: 0.86 to 1.34
	Rash/paresthesia - Age, per 10 years: PR: 1.10; 95% CI: 1.04 to 1.15 - Sex Male (ref.) Female: PR: 1.36; 95% CI: 1.20 to 1.54 - University entrance qualification Yes (ref.) No: PR: 0.88; 95% CI: 0.78 to 0.99 - Smoking status, N (%) Never (ref.) Former: PR: 1.20; 95% CI: 1.05 to 1.37 Current: PR: 1.41; 95% CI: 1.17 to 1.70 - BMI, per 5 kg/m ² : PR: 1.08; 95% CI: 1.02 to 1.14 - Time since positive PCR, per month: PR: 1.01; 95% CI: 0.98 to 1.05 - Treatment of acute SARS-CoV-2 infection

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	No medical care (ref.) Outpatient care: PR: 2.08; 95% CI: 1.82 to 2.37 Inpatient care: PR: 3.03; 95% CI: 2.45 to 3.74 - Pre-existing conditions Musculoskeletal disorders: PR: 1.13; 95% CI: 0.99 to 1.29 Cardiovascular disorders: PR: 1.02; 95% CI: 0.87 to 1.19 Neurological or sensory disorders: PR: 1.25; 95% CI: 1.08 to 1.44 Metabolic disorders: PR: 1.17; 95% CI: 1.01 to 1.35 Mental disorders: PR: 1.16; 95% CI: 0.99 to 1.36 Dermatological diseases: PR: 1.17; 95% CI: 0.99 to 1.37
	Cancer: PR: 0.81; 95% CI: 0.59 to 1.12 <u>Hair loss</u> - Age, per 10 years: PR: 0.97; 95% CI: 0.92 to 1.03 - Sex Male (ref.) Female: PR: 4.77; 95% CI: 3.86 to 5.90 - University entrance qualification Yes (ref.) No: PR: 1.12; 95% CI: 0.97 to 1.30 - Smoking status, N (%) Never (ref.) Former: PR: 0.99; 95% CI: 0.84 to 1.17
	Current: PR: 1.02; 95% CI: 0.81 to 1.30 - BMI, per 5 kg/m ² : PR: 1.07; 95% CI: 1.01 to 1.13 - Time since positive PCR, per month: PR: 0.88; 95% CI: 0.84 to 0.92 - Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 2.24; 95% CI: 1.93 to 2.61 Inpatient care: PR: 4.06; 95% CI: 3.22 to 5.11 - Pre-existing conditions Musculoskeletal disorders: PR: 1.07; 95% CI: 0.91 to 1.25 Cardiovascular disorders: PR: 1.17; 95% CI: 0.97 to 1.41 Neurological or sensory disorders: PR: 1.02; 95% CI: 0.85 to 1.23 Metabolic disorders: PR: 1.19; 95% CI: 1.01 to 1.41 Mental disorders: PR: 1.09; 95% CI: 0.90 to 1.32
	Mental disorders: PR: 1.09; 95% CI: 0.90 to 1.32 Respiratory diseases: PR: 0.94; 95% CI: 0.76 to 1.14 Dermatological diseases: PR: 1.10; 95% CI:0.90 to 1.35 Cancer: PR: 0.88; 95% CI: 0.62 to 1.27

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Abdominal Symptoms - Age, per 10 years: PR: 1.02; 95% CI: 0.95 to 1.09 - Sex Male (ref.) Female: PR: 1.35; 95% CI: 1.13 to 1.61 - University entrance qualification Yes (ref.) No: PR: 1.17; 95% CI: 0.99 to 1.39 - Smoking status, N (%) Never (ref.) Former: PR: 1.03; 95% CI: 0.86 to 1.24 Current: PR: 1.03; 95% CI: 0.83 to 1.42 BMI, per 5 kg/m ² : PR: 0.98; 95% CI: 0.90 to 1.07 - Time since positive PCR, per month: PR: 0.98; 95% CI: 0.93 to 1.03 - Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 2.41; 95% CI: 2.02 to 2.88 Inpatient care: PR: 2.74; 95% CI: 1.08 to 3.78 Pre-existing conditions Musculoskeletal disorders: PR: 1.22; 95% CI: 1.00 to 1.49 Nusculoskeletal disorders: PR: 1.22; 95% CI: 0.10 to 1.49 Neurological or sensory disorders: PR: 1.03; 95% CI: 0.70 to 1.45 Mental disorders: PR: 1.31; 95% CI: 0.70 to 1.42 Mental disorders: PR: 1.31; 95% CI: 0.70 to 1.45 Mental disorders: PR: 1.31; 95% CI: 0.70 to 1.45 Mental disorders: PR: 1.31; 95% CI: 0.70 to 1.45 Mental disorders: PR: 1.31; 95% CI: 0.70 to 1.45 Mental disorders: PR: 1.31; 95% CI: 0.70
	Nausea/vomiting - Age, per 10 years: PR: 1.01; 95% CI: 0.92 to 1.10 - Sex Male (ref.) Female: PR: 2.02; 95% CI: 1.57 to 2.60 - University entrance qualification Yes (ref.) No: PR: 1.27; 95% CI: 1.02 to 1.58 - Smoking status, N (%) Never (ref.) Former: PR: 1.37; 95% CI: 1.09 to 1.73

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Current: PR: 1.60; 95% CI: 1.18 to 2.17 - BMI, per 5 kg/m ² : PR: 0.94; 95% CI: 0.84 to 1.05 - Time since positive PCR, per month: PR: 0.96; 95% CI: 0.90 to 1.02) - Treatment of acute SARS-CoV-2 infection No medical care (ref.) Outpatient care: PR: 2.33; 95% CI: 1.85 to 2.92
	Inpatient care: PR: 2.70; 95% CI: 1.76 to 4.14 - Pre-existing conditions Musculoskeletal disorders: PR: 1.23; 95% CI: 0.98 to 1.55 Cardiovascular disorders: PR: 1.01; 95% CI: 0.77 to 1.33 Neurological or sensory disorders: PR: 1.15; 95% CI: 0.89 to 1.47 Metabolic disorders: PR: 1.27; 95% CI: 0.99 to 1.62
	Mental disorders: PR: 1.70; 95% CI: 1.33 to 2.18 Respiratory diseases: PR: 1.07; 95% CI: 0.81 to 1.42 Dermatological diseases: PR: 0.95; 95% CI: 0.70 to 1.29 Cancer: PR: 1.05; 95% CI: 0.65 to 1.71
	Chills/fever - Age, per 10 years: PR: 1.07; 95% CI: 0.95 to 1.20 - Sex Male (ref.) Female: PR: 1.51; 95% CI: 1.13 to 2.01
	- University entrance qualification Yes (ref.) No: PR: 1.14; 95% CI: 0.86 to 1.51 - Smoking status, N (%) Never (ref.)
	Former: PR: 1.25; 95% CI: 0.93 to 1.66 Current: PR: 1.72; 95% CI: 1.17 to 2.51 - BMI, per 5 kg/m ² : PR: 1.01; 95% CI: 0.89 to 1.14 - Time since positive PCR, per month: PR: 0.96; 95% CI: 0.88 to 1.03 - Treatment of acute SARS-CoV-2 infection
	No medical care (ref.) Outpatient care: PR: 3.08; 95% CI: 2.33 to 4.06 Inpatient care: PR: 3.42; 95% CI: 2.10 to 5.57 - Pre-existing conditions Musculoskeletal disorders: PR: 1.07; 95% CI: 0.81 to 1.41
	Cardiovascular disorders: PR: 1.08; 95% CI: 0.79 to 1.49 Neurological or sensory disorders: PR: 0.88; 95% CI: 0.63 to 1.23 Metabolic disorders: PR: 1.08; 95% CI: 0.79 to 1.47

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Mental disorders: PR: 1.21; 95% CI: 0.84 to 1.72 Respiratory diseases: PR: 1.18; 95% CI: 0.83 to 1.66 Dermatological diseases: PR: 1.17; 95% CI: 0.81 to 1.68 Cancer: PR: 1.27; 95% CI: 0.71 to 2.25
	 Analysis: Risk differences of symptoms after 6–12 months, comparing COVID-19 test-positive and test-negative participants (n = 61,002 test-positive, n = 91,878 test-negative individuals). Method: Parametric g-computation on logistic regression (adjusted for age, sex, comorbidities, obesity, healthcare occupation, and time after testing.
Sørensen et al. ⁽⁵⁶⁾ Population: Cohort group: adolescents and adults ≥ 15 years old with a previous COVID- 19 diagnosis Control group: time-matched adolescents and adults ≥ 15 years old with a negative COVID- 19 test result Population is further split into adolescents ≤19 years old and age ranges from 20 to 70+ years old n = varies depending on analysis	 Dysosmia: RD: 10.92; 95% CI: 10.64 – 11.20 Dysgeusia: RD: 8.68; 95% CI: 8.43 – 8.93 Fatigue/exhaustion: RD: 8.43; 95% CI: 8.12 – 8.74 Dyspnoea: RD: 4.87; 95% CI: 4.64 – 5.07 Reduced strength legs/arms: RD: 4.68; 95% CI: 4.45 – 4.90 Sleeping legs/arms: RD: 3.50; 95% CI: 3.30 – 3.71 Muscle/joint pain: RD: 3.46; 95% CI: 3.30 – 3.71 Muscle/joint pain: RD: 3.46; 95% CI: 3.24 – 3.68 Headache: RD: 3.04; 95% CI: 2.18 – 2.58 Chest pain: RD: 2.01; 95% CI: 1.48 – 1.84 Reduced appetite: RD: 1.51; 95% CI: 1.48 – 1.84 Reduced appetite: RD: 1.51; 95% CI: 0.28 – 0.62 Abdominal pain: RD: 0.44; 95% CI: 0.29 – 0.60 Chills: RD: 0.43; 95% CI: 0.28 – 0.59 Diarrhoea: RD: 0.43; 95% CI: 0.28 – 0.59 Diarrhoea: RD: 0.43; 95% CI: 0.20 – 0.51 Fever: RD: 0.32; 95% CI: 0.23 – 0.22 Runny nose: RD: -0.22; 95% CI: -0.43 – 0.01 Sore throat: RD: -0.65; 95% CI: -0.43
	Analysis: Risk differences of self-reported new diagnoses received between the test date and until 6-12 months after, comparing COVID-19 test-positive and test-negative participants ($n = 61,002$ test-positive, $n = 91,878$ test-negative individuals). Method: Parametric g-computation on logistic regression (adjusted for age, sex, comorbidities, obesity, healthcare occupation and time after testing).
	 Chronic fatigue syndrome: RD: 2.53; 95% CI: 2.35 – 2.71 Anxiety: RD: 1.15; 95% CI: 0.95 – 1.34 Depression: RD: 1.00; 95% CI: 0.81 – 1.19 PTSD: RD: 0.16; 95% CI: 0.03 – 0.28

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	- Fibromyalgia: RD: 0.02; 95% CI: -0.09 – 0.14
	Analysis: Risk differences of self-reported health problems with new onset between the test date and until 6–12 months after, comparing COVID-19 test-positive and test-negative participants ($n = 61,002$ test-positive, $n = 91,878$ test-negative individuals). Method: Parametric g-computation on logistic regression (adjusted for age, sex, comorbidities, obesity, healthcare occupation, and time after testing).
	 Physical exhaustion: RD: 40.45; 95% CI: 39.99 – 40.97 Mental exhaustion: RD: 32.58; 95% CI: 32.11 – 33.09 Difficulties concentrating: RD: 28.34; 95% CI: 27.91 – 28.78 Memory issues: RD: 27.25; 95% CI: 26.80 – 27.71 Sleep problems: RD: 17.27; 95% CI: 16.81 – 17.73
	Analysis: Risk differences of symptoms 6-12 months after test, comparing hospitalised and non-hospitalised COVID-19 test-positive participants ($n = 2,421$ hospitalised, $n = 58,581$ non-hospitalised). Method: Parametric g-computation on logistic regression (adjusted for age, sex, comorbidities, obesity, healthcare occupation, and time after testing).
	 Fatigue/exhaustion: RD: 8.64; 95% CI: 6.70 – 10.74 Reduced strength legs/arms: RD: 7.13; 95% CI: 5.55 – 8.66 Dyspnoea: RD: 6.71; 95% CI: 5.17 – 8.39 Muscle/joint pain: RD: 5.05; 95% CI: 3.57 – 6.72 Headache: RD: 4.58; 95% CI: 2.86 – 6.31 Sleeping legs/arms: RD: 4.25; 95% CI: 2.87 – 5.68 Dizziness: RD: 4.11; 95% CI: 2.64 – 5.72
	 Chest pain: RD: 4.02; 95% CI: 2.69 – 5.38 Cough: RD: 2.81; 95% CI: 1.45 – 4.36 Hot flushes/sweat: RD: 2.53; 95% CI: 1.34 – 3.86 Nausea: RD: 2.38; 95% CI: 1.24 – 3.53 Abdominal pain: RD: 1.88; 95% CI: 0.93 – 2.87
	 - Reduced appetite: RD: 1.78; 95% CI: 0.63 – 2.95 - Sore throat: RD: 1.52; 95% CI: 0.15 – 2.80 - Fever: RD: 1.44; 95% CI: 0.43 – 2.46 - Red runny eyes: RD: 1.41; 95% CI: 0.62 – 2.32
	 Chills: RD: 1.38; 95% CI: 0.53 – 2.28 Runny nose: RD: 1.15; 95% CI: -0.12 – 2.36 Diarrhoea: RD: 0.98; 95% CI: 0.16 – 1.79 Dysgeusia: RD: 0.97; 95% CI: -0.65 – 2.69 Dysosmia: RD: -0.52; 95% CI: -2.27 – 1.21

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)			
	Analysis: Risk differences of symptoms after 6-12 months, comparing COVID-19 test- positive and test-negative participants, stratified by sex and age group (females, n = 93,494; males, n = 59,386). Method: Parametric g-computation on logistic regression (adjusted for age, sex, comorbidities, obesity, healthcare occupation, and time after testing).			
	 Abdominal pain: 15-19: Female: RD: 0.08; 95% CI: -1.21 - 1.45; Male: RD: -1.25; 95% CI: -2.54 - 0.09 20-29: Female: RD: -0.09; 95% CI: -0.74 - 0.55; Male: RD: 0.34; 95% CI: -0.38 - 1.08 30-39: Female: RD: 0.03; 95% CI: -0.61 - 0.74; Male: RD: 0.34; 95% CI: -0.35 - 1.06 40-49: Female: RD: 0.55; 95% CI: 0.10 - 1.02; Male: RD: 0.24; 95% CI: -0.27 - 0.76 50-59: Female: RD: 0.99; 95% CI: 0.62 - 1.38; Male: RD: 0.29; 95% CI: -0.01 - 0.62 60-69: Female: RD: 0.91; 95% CI: 0.51 - 1.30; Male: RD: 0.39; 95% CI: 0.09 - 0.69 70+: Female: RD: 0.22; 95% CI: -0.13 - 0.60; Male: RD: 0.21; 95% CI: -0.06 - 0.53 			
	 Dyspnoea: 15-19: Female: RD: 2.37; 95% CI: 1.09 - 3.65; Male: RD: 0.71; 95% CI: -0.54 - 1.94 20-29: Female: RD: 3.48; 95% CI: 2.81 - 4.16; Male: RD: 2.22; 95% CI: 1.40 - 2.97 30-39: Female: RD: 5.35; 95% CI: 4.60 - 6.10; Male: RD: 3.77; 95% CI: 2.98 - 4.63 40-49: Female: RD: 6.25; 95% CI: 5.61 - 6.90; Male: RD: 5.08; 95% CI: 4.37 - 5.89 50-59: Female: RD: 5.94; 95% CI: 5.37 - 6.51; Male: RD: 4.98; 95% CI: 4.36 - 5.55 60-69: Female: RD: 5.04; 95% CI: 4.44 - 5.68; Male: RD: 4.30; 95% CI: 3.67 - 4.95 70+: Female: RD: 2.10; 95% CI: 1.49 - 2.68; Male: RD: 2.22; 95% CI: 1.64 - 2.79 			
	 Chest pain: 15-19: Female: RD: 2.62; 95% CI: 1.43 - 3.98; Male: RD: 0.78; 95% CI: -0.38 - 2.05 20-29: Female: RD: 2.57; 95% CI: 1.97 - 3.21; Male: RD: 1.30; 95% CI: 0.48 - 2.01 30-39: Female: RD: 2.79; 95% CI: 2.13 - 3.50; Male: RD: 1.74; 95% CI: 1.00 - 2.52 40-49: Female: RD: 2.90; 95% CI: 2.36 - 3.41; Male: RD: 1.72; 95% CI: 1.19 - 2.28 50-59: Female: RD: 2.46; 95% CI: 2.06 - 2.89; Male: RD: 1.64; 95% CI: 1.26 - 2.05 60-69: Female: RD: 1.35; 95% CI: 0.97 - 1.75; Male: RD: 1.20; 95% CI: 0.81 - 1.61 70+: Female: RD: 0.53; 95% CI: 0.24 - 0.86; Male: RD: 0.67; 95% CI: 0.34 - 1.03 			
	 Chills: 15-19: Female: RD: 0.72; 95% CI: -0.53 - 1.85; Male: RD: -0.96; 95% CI: -2.04 - 0.04 20-29: Female: RD: 0.41; 95% CI: -0.17 - 1.01; Male: RD: -0.11; 95% CI: -0.80 - 0.53 30-39: Female: RD: 0.35; 95% CI: -0.22 - 0.96; Male: RD: -0.07; 95% CI: -0.77 - 0.61 40-49: Female: RD: 0.65; 95% CI: 0.23 - 1.08; Male: RD: 0.10; 95% CI: -0.34 - 0.52 50-59: Female: RD: 0.78; 95% CI: 0.45 - 1.10; Male: RD: 0.54; 95% CI: 0.25 - 0.85 			

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Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)			
	60-69: Female: RD: 0.34; 95% CI: 0.08 - 0.62; Male: RD: 0.54; 95% CI: 0.25 - 0.84 70+: Female: RD: 0.41; 95% CI: 0.09 - 0.77; Male: RD: 0.37; 95% CI: 0.10 - 0.66			
	- Cough: 15-19: Female: RD: -1.32; 95% CI: -3.49 - 0.80; Male: RD: -3.49; 95% CI: -6.020.92 20-29: Female: RD: -1.86; 95% CI: -2.850.89; Male: RD: -0.92; 95% CI: -2.22 - 0.42 30-39: Female: RD: -0.36; 95% CI: -1.21 - 0.49; Male: RD: 0.41; 95% CI: -0.73 - 1.58 40-49: Female: RD: -0.33; 95% CI: -1.00 - 0.34; Male: RD: -0.73; 95% CI: -1.57 - 0.14 50-59: Female: RD: 0.98; 95% CI: 0.41 - 1.54; Male: RD: 0.76; 95% CI: 0.16 - 1.37 60-69: Female: RD: 1.15; 95% CI: 0.52 - 1.74; Male: RD: 0.10; 95% CI: -0.43 - 0.68 70+: Female: RD: 1.19; 95% CI: 0.45 - 1.92; Male: RD: 1.15; 95% CI: 0.52 - 1.79			
	 Diarrhoea: 15-19: Female: RD: 0.25; 95% CI: -0.79 - 1.32; Male: RD: -0.36; 95% CI: -1.75 - 0.90 20-29: Female: RD: -0.19; 95% CI: -0.84 - 0.40; Male: RD: 0.18; 95% CI: -0.57 - 0.91 30-39: Female: RD: 0.22; 95% CI: -0.48 - 0.85; Male: RD: 0.91; 95% CI: 0.15 - 1.64 40-49: Female: RD: 0.73; 95% CI: 0.31 - 1.20; Male: RD: -0.19; 95% CI: -0.71 - 0.31 50-59: Female: RD: 0.89; 95% CI: 0.53 - 1.28; Male: RD: 0.27; 95% CI: -0.08 - 0.60 60-69: Female: RD: 0.28; 95% CI: -0.05 - 0.64; Male: RD: 0.00; 95% CI: -0.30 - 0.32 70+: Female: RD: 0.13; 95% CI: -0.23 - 0.53; Male: RD: -0.04; 95% CI: -0.35 - 0.29 			
	 Dizziness: 15-19: Female: RD: 2.38; 95% CI: 0.84 - 3.99; Male: RD: -1.03; 95% CI: -2.48 - 0.30 20-29: Female: RD: 1.92; 95% CI: 1.09 - 2.69; Male: RD: 0.25; 95% CI: -0.61 - 1.00 30-39: Female: RD: 3.74; 95% CI: 2.83 - 4.61; Male: RD: 1.70; 95% CI: 0.87 - 2.55 40-49: Female: RD: 3.68; 95% CI: 3.05 - 4.29; Male: RD: 2.05; 95% CI: 1.42 - 2.67 50-59: Female: RD: 3.42; 95% CI: 2.87 - 3.94; Male: RD: 1.53; 95% CI: 1.11 - 1.94 60-69: Female: RD: 2.06; 95% CI: 1.56 - 2.58; Male: RD: 1.62; 95% CI: 1.17 - 2.07 70+: Female: RD: 1.51; 95% CI: 0.98 - 2.05; Male: RD: 1.38; 95% CI: 0.88 - 1.90 			
	 Fatigue/exhaustion: 15-19: Female: RD: 7.37; 95% CI: 5.41 - 9.49; Male: RD: 1.98; 95% CI: -0.32 - 4.25 20-29: Female: RD: 5.99; 95% CI: 5.00 - 7.02; Male: RD: 2.41; 95% CI: 1.13 - 3.72 30-39: Female: RD: 10.93; 95% CI: 9.74 - 12.11; Male: RD: 5.61; 95% CI: 4.37 - 6.85 40-49: Female: RD: 10.84; 95% CI: 9.94 - 11.79; Male: RD: 7.93; 95% CI: 6.84 - 9.12 50-59: Female: RD: 10.91; 95% CI: 10.11 - 11.74; Male: RD: 8.17; 95% CI: 7.28 - 8.92 60-69: Female: RD: 8.29; 95% CI: 7.47 - 9.15; Male: RD: 6.35; 95% CI: 5.56 - 7.19 70+: Female: RD: 4.24; 95% CI: 3.41 - 5.09; Male: RD: 3.92; 95% CI: 3.10 - 4.75 			
	- Fever:			

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)			
	15-19: Female: RD: -0.66; 95% CI: -2.01 - 0.83; Male: RD: -0.19; 95% CI: -1.86 - 1.53 20-29: Female: RD: 0.03; 95% CI: -0.72 - 0.73; Male: RD: -0.51; 95% CI: -1.37 - 0.31 30-39: Female: RD: 0.14; 95% CI: -0.49 - 0.82; Male: RD: 0.82; 95% CI: -0.01 - 1.66 40-49: Female: RD: 0.32; 95% CI: -0.18 - 0.77; Male: RD: 0.24; 95% CI: -0.32 - 0.78 50-59: Female: RD: 0.60; 95% CI: 0.23 - 0.98; Male: RD: 0.64; 95% CI: 0.25 - 1.02 60-69: Female: RD: 0.17; 95% CI: -0.16 - 0.50; Male: RD: 0.56; 95% CI: 0.24 - 0.92 70+: Female: RD: 0.39; 95% CI: 0.06 - 0.77; Male: RD: 0.72; 95% CI: 0.39 - 1.08			
	 Headache: 15-19: Female: RD: 2.59; 95% CI: 0.99 - 4.33; Male: RD: -0.99; 95% CI: -2.96 - 0.86 20-29: Female: RD: 2.68; 95% CI: 1.80 - 3.63; Male: RD: 0.44; 95% CI: -0.70 - 1.59 30-39: Female: RD: 5.26; 95% CI: 4.28 - 6.17; Male: RD: 2.77; 95% CI: 1.53 - 3.92 40-49: Female: RD: 4.59; 95% CI: 3.86 - 5.33; Male: RD: 2.37; 95% CI: 1.49 - 3.28 50-59: Female: RD: 4.52; 95% CI: 3.90 - 5.16; Male: RD: 1.21; 95% CI: 0.62 - 1.82 60-69: Female: RD: 2.71; 95% CI: 2.07 - 3.39; Male: RD: 1.48; 95% CI: 0.91 - 2.10 70+: Female: RD: 0.99; 95% CI: 0.40 - 1.59; Male: RD: 0.71; 95% CI: 0.24 - 1.19 			
	 Hot flushes/sweat: 15-19: Female: RD: 1.24; 95% CI: -0.13 - 2.66; Male: RD: -0.02; 95% CI: -1.41 - 1.52 20-29: Female: RD: 0.75; 95% CI: 0.01 - 1.47; Male: RD: 0.24; 95% CI: -0.53 - 1.01 30-39: Female: RD: 1.83; 95% CI: 1.15 - 2.57; Male: RD: 0.89; 95% CI: 0.06 - 1.73 40-49: Female: RD: 2.70; 95% CI: 2.13 - 3.29; Male: RD: 0.90; 95% CI: 0.28 - 1.53 50-59: Female: RD: 2.98; 95% CI: 2.53 - 3.47; Male: RD: 1.33; 95% CI: 0.89 - 1.75 60-69: Female: RD: 1.83; 95% CI: 1.34 - 2.34; Male: RD: 0.75; 95% CI: 0.36 - 1.14 70+: Female: RD: 1.08; 95% CI: 0.63 - 1.59; Male: RD: 0.73; 95% CI: 0.34 - 1.13 			
	 Dysosmia: 15-19: Female: RD: 11.77; 95% CI: 9.80 - 13.72; Male: RD: 8.46; 95% CI: 6.08 - 10.72 20-29: Female: RD: 13.60; 95% CI: 12.61 - 14.61; Male: RD: 12.57; 95% CI: 11.3 - 13.82 30-39: Female: RD: 14.13; 95% CI: 13.07 - 15.19; Male: RD: 11.84; 95% CI: 10.65 - 13.13 40-49: Female: RD: 14.01; 95% CI: 13.14 - 14.90; Male: RD: 10.55; 95% CI: 9.62 - 11.62 50-59: Female: RD: 11.79; 95% CI: 11.07 - 12.49; Male: RD: 7.80; 95% CI: 7.11 - 8.47 60-69: Female: RD: 7.54; 95% CI: 6.78 - 8.31; Male: RD: 5.69; 95% CI: 4.95 - 6.38 70+: Female: RD: 3.66; 95% CI: 2.99 - 4.42; Male: RD: 2.85; 95% CI: 2.27 - 3.49 			
	 Dysgeusia: 15-19: Female: RD: 9.56; 95% CI: 7.87 - 11.23; Male: RD: 6.97; 95% CI: 5.25 - 8.92 20-29: Female: RD: 10.19; 95% CI: 9.30 - 11.09; Male: RD: 9.54; 95% CI: 8.38 - 10.74 30-39: Female: RD: 11.21; 95% CI: 10.26 - 12.31; Male: RD: 8.85; 95% CI: 7.68 - 10.01 40-49: Female: RD: 11.26; 95% CI: 10.51 - 11.97; Male: RD: 8.25; 95% CI: 7.39 - 9.16 			

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)		
	50-59: Female: RD: 10.05; 95% CI: 9.42 - 10.75; Male: RD: 6.24; 95% CI: 5.65 - 6.88 60-69: Female: RD: 6.26; 95% CI: 5.57 - 6.96; Male: RD: 4.56; 95% CI: 3.93 - 5.22 70+: Female: RD: 3.60; 95% CI: 2.90 - 4.32; Male: RD: 2.58; 95% CI: 2.03 - 3.20		
	 Muscle/joint pain: 15-19: Female: RD: 0.89; 95% CI: -0.42 - 2.23; Male: RD: 0.46; 95% CI: -0.71 - 1.64 20-29: Female: RD: 1.61; 95% CI: 0.86 - 2.35; Male: RD: 0.59; 95% CI: -0.27 - 1.53 30-39: Female: RD: 3.79; 95% CI: 2.91 - 4.61; Male: RD: 2.02; 95% CI: 0.97 - 3.08 40-49: Female: RD: 4.76; 95% CI: 4.08 - 5.39; Male: RD: 2.88; 95% CI: 2.14 - 3.64 50-59: Female: RD: 5.30; 95% CI: 4.72 - 5.92; Male: RD: 3.68; 95% CI: 3.11 - 4.29 60-69: Female: RD: 3.66; 95% CI: 3.04 - 4.29; Male: RD: 2.84; 95% CI: 2.27 - 3.44 70+: Female: RD: 1.66; 95% CI: 1.08 - 2.28; Male: RD: 1.74; 95% CI: 1.22 - 2.31 		
	 Nausea: 15-19: Female: RD: 0.66; 95% CI: -0.75 - 2.09; Male: RD: -0.80; 95% CI: -2.11 - 0.45 20-29: Female: RD: 0.44; 95% CI: -0.31 - 1.23; Male: RD: 0.28; 95% CI: -0.43 - 0.99 30-39: Female: RD: 0.08; 95% CI: -0.69 - 0.85; Male: RD: -0.03; 95% CI: -0.76 - 0.68 40-49: Female: RD: 0.72; 95% CI: 0.25 - 1.19; Male: RD: 0.04; 95% CI: -0.35 - 0.49 50-59: Female: RD: 0.96; 95% CI: 0.61 - 1.35; Male: RD: 0.39; 95% CI: 0.10 - 0.65 60-69: Female: RD: 0.39; 95% CI: 0.03 - 0.77; Male: RD: 0.27; 95% CI: 0.02 - 0.51 70+: Female: RD: 0.55; 95% CI: 0.18 - 0.94; Male: RD: 0.15; 95% CI: -0.08 - 0.38 		
	 Red runny eyes: 15-19: Female: RD: -0.78; 95% CI: -1.78 - 0.22; Male: RD: -1.26; 95% CI: -2.380.16 20-29: Female: RD: 0.15; 95% CI: -0.32 - 0.63; Male: RD: 0.42; 95% CI: -0.12 - 0.94 30-39: Female: RD: 0.57; 95% CI: 0.08 - 1.10; Male: RD: 0.55; 95% CI: 0.02 - 1.09 40-49: Female: RD: 0.92; 95% CI: 0.54 - 1.32; Male: RD: 0.31; 95% CI: -0.05 - 0.67 50-59: Female: RD: 0.98; 95% CI: 0.65 - 1.28; Male: RD: 0.29; 95% CI: 0.00 - 0.58 60-69: Female: RD: 0.65; 95% CI: 0.32 - 0.95; Male: RD: 0.30; 95% CI: 0.01 - 0.59 70+: Female: RD: 0.38; 95% CI: 0.09 - 0.70; Male: RD: 0.33; 95% CI: 0.05 - 0.66 		
	 - Reduced appetite: 15-19: Female: RD: 4.89; 95% CI: 3.24 - 6.62; Male: RD: 2.63; 95% CI: 1.10 - 4.28 20-29: Female: RD: 2.08; 95% CI: 1.30 - 2.81; Male: RD: 1.68; 95% CI: 0.91 - 2.43 30-39: Female: RD: 1.86; 95% CI: 1.11 - 2.61; Male: RD: 1.24; 95% CI: 0.51 - 2.01 40-49: Female: RD: 1.53; 95% CI: 1.03 - 2.04; Male: RD: 1.03; 95% CI: 0.52 - 1.56 50-59: Female: RD: 1.72; 95% CI: 1.35 - 2.11; Male: RD: 1.17; 95% CI: 0.79 - 1.52 60-69: Female: RD: 1.11; 95% CI: 0.73 - 1.54; Male: RD: 0.86; 95% CI: 0.54 - 1.21 70+: Female: RD: 1.63; 95% CI: 1.10 - 2.17; Male: RD: 1.14; 95% CI: 0.73 - 1.64 		

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)		
	 Reduced strength legs/arms: 15-19: Female: RD: 1.75; 95% CI: 0.54 - 2.95; Male: RD: 1.76; 95% CI: 0.61 - 3.03 20-29: Female: RD: 2.25; 95% CI: 1.64 - 2.85; Male: RD: 2.17; 95% CI: 1.47 - 2.92 30-39: Female: RD: 4.63; 95% CI: 3.81 - 5.41; Male: RD: 3.43; 95% CI: 2.58 - 4.36 40-49: Female: RD: 5.79; 95% CI: 5.16 - 6.43; Male: RD: 4.03; 95% CI: 3.27 - 4.80 50-59: Female: RD: 6.63; 95% CI: 6.03 - 7.25; Male: RD: 5.34; 95% CI: 4.67 - 5.95 60-69: Female: RD: 5.32; 95% CI: 4.68 - 6.02; Male: RD: 4.09; 95% CI: 3.51 - 4.68 70+: Female: RD: 2.71; 95% CI: 2.03 - 3.38; Male: RD: 3.11; 95% CI: 2.42 - 3.83 		
	- Runny nose: 15-19: Female: RD: -1.52; 95% CI: -3.39 - 0.43; Male: RD: -3.82; 95% CI: -6.181.53 20-29: Female: RD: -1.39; 95% CI: -2.290.45; Male: RD: -0.89; 95% CI: -2.08 - 0.36 30-39: Female: RD: -0.89; 95% CI: -1.730.02; Male: RD: -0.22; 95% CI: -1.21 - 0.77 40-49: Female: RD: -0.66; 95% CI: -1.230.06; Male: RD: -0.47; 95% CI: -1.20 - 0.32 50-59: Female: RD: 0.58; 95% CI: 0.04 - 1.06; Male: RD: 0.19; 95% CI: -0.30 - 0.75 60-69: Female: RD: 0.83; 95% CI: -0.14 - 1.03; Male: RD: 0.44; 95% CI: -0.11 - 0.97 70+: Female: RD: 0.44; 95% CI: -0.14 - 1.03; Male: RD: 0.09; 95% CI: -0.41 - 0.65		
	 Sleeping legs/arms: 15-19: Female: RD: 1.91; 95% CI: 0.68 - 3.14; Male: RD: 0.51; 95% CI: -0.61 - 1.60 20-29: Female: RD: 1.49; 95% CI: 0.88 - 2.12; Male: RD: 0.99; 95% CI: 0.25 - 1.82 30-39: Female: RD: 4.11; 95% CI: 3.34 - 4.90; Male: RD: 2.90; 95% CI: 2.05 - 3.82 40-49: Female: RD: 4.99; 95% CI: 4.39 - 5.66; Male: RD: 2.60; 95% CI: 1.91 - 3.33 50-59: Female: RD: 4.98; 95% CI: 4.37 - 5.54; Male: RD: 3.59; 95% CI: 3.05 - 4.14 60-69: Female: RD: 3.85; 95% CI: 3.26 - 4.41; Male: RD: 2.65; 95% CI: 2.14 - 3.22 70+: Female: RD: 2.02; 95% CI: 1.43 - 2.65; Male: RD: 2.01; 95% CI: 1.40 - 2.58 		
	- Sore throat: 15-19: Female: RD: -1.96; 95% CI: -3.950.02; Male: RD: -4.93; 95% CI: -7.47, -2.54 20-29: Female: RD: -1.77; 95% CI: -2.770.78; Male: RD: -1.16; 95% CI: -2.26, 0.12 30-39: Female: RD: -1.00; 95% CI: -1.780.17; Male: RD: -0.72; 95% CI: -1.70, 0.22 40-49: Female: RD: -1.10; 95% CI: -1.750.43; Male: RD: -0.57; 95% CI: -1.25, 0.17 50-59: Female: RD: 0.04; 95% CI: -0.46 - 0.56; Male: RD: -0.01; 95% CI: -0.51, 0.45 60-69: Female: RD: 0.05; 95% CI: -0.48 - 0.55; Male: RD: -0.20; 95% CI: -0.13, 0.79		
	Analysis: Risk differences of self-reported health problems with new onset between the test date and until 6-12 months after, comparing COVID-19 test-positive and test-negative participants, stratified by sex and age group (females, n = 93,494; males, n = 59,386). Method: Parametric g-computation on logistic regression (adjusted for age, sex, comorbidities, obesity, healthcare occupation, and time after testing).		

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)			
	 Difficulty concentrating: 15-19: Female: RD: 25.28; 95% CI: 21.91 - 28.27; Male: RD: 13.40; 95% CI: 9.98 - 16.61 20-29: Female: RD: 30.27; 95% CI: 28.71 - 31.75; Male: RD: 19.91; 95% CI: 17.83 - 21.87 30-39: Female: RD: 33.73; 95% CI: 31.98 - 35.34; Male: RD: 25.20; 95% CI: 23.37 - 27.15 40-49: Female: RD: 35.57; 95% CI: 34.36 - 36.94; Male: RD: 25.47; 95% CI: 23.96 - 27.03 50-59: Female: RD: 33.71; 95% CI: 32.63 - 34.83; Male: RD: 24.29; 95% CI: 23.20, 25.40 60-69: Female: RD: 24.85; 95% CI: 23.68 - 26.27; Male: RD: 19.03; 95% CI: 17.82 - 20.30 70+: Female: RD: 13.61; 95% CI: 12.38 - 14.94; Male: RD: 11.48; 95% CI: 10.38 - 12.80 			
	 Memory issues: 15-19: Female: RD: 22.60; 95% CI: 19.91 - 25.24; Male: RD: 11.25; 95% CI: 8.31 - 14.30 20-29: Female: RD: 24.67; 95% CI: 23.37 - 26.15; Male: RD: 14.84; 95% CI: 13.12 - 16.58 30-39: Female: RD: 31.80; 95% CI: 30.24 - 33.32; Male: RD: 19.24; 95% CI: 17.47 - 20.99 40-49: Female: RD: 35.74; 95% CI: 34.44 - 37.03; Male: RD: 23.60; 95% CI: 22.35 - 25.11 50-59: Female: RD: 35.25; 95% CI: 34.07 - 36.34; Male: RD: 22.89; 95% CI: 21.67 - 24.14 60-69: Female: RD: 25.65; 95% CI: 24.42 - 26.98; Male: RD: 19.28; 95% CI: 17.97 - 20.62 70+: Female: RD: 14.21; 95% CI: 12.83 - 15.60; Male: RD: 12.65; 95% CI: 11.37 - 14.05 			
	 Mental exhaustion: 15-19: Female: RD: 29.28; 95% CI: 26.00 - 32.78; Male: RD: 15.84; 95% CI: 11.78 - 19.80 20-29: Female: RD: 33.19; 95% CI: 31.38 - 35.04; Male: RD: 18.58; 95% CI: 16.29 - 20.87 30-39: Female: RD: 36.20; 95% CI: 34.39 - 38.00; Male: RD: 27.70; 95% CI: 25.54 - 29.75 40-49: Female: RD: 39.14; 95% CI: 37.67 - 40.42; Male: RD: 29.01; 95% CI: 27.30 - 30.79 50-59: Female: RD: 39.00; 95% CI: 37.84 - 40.13; Male: RD: 28.48; 95% CI: 27.25 - 29.81 60-69: Female: RD: 30.97; 95% CI: 29.55 - 32.35; Male: RD: 22.30; 95% CI: 20.91 - 23.63 70+: Female: RD: 17.38; 95% CI: 15.94 - 18.90; Male: RD: 12.29; 95% CI: 10.99 - 13.68 			
	 Physical exhaustion: 15-19: Female: RD: 36.30; 95% CI: 32.77 - 39.41; Male: RD: 18.45; 95% CI: 14.87 - 22.38 20-29: Female: RD: 38.41; 95% CI: 36.73 - 39.94; Male: RD: 24.66; 95% CI: 22.47 - 26.87 30-39: Female: RD: 41.81; 95% CI: 40.21 - 43.45; Male: RD: 34.97; 95% CI: 32.94 - 37.02 40-49: Female: RD: 46.53; 95% CI: 45.12 - 47.94; Male: RD: 38.62; 95% CI: 36.97 - 40.39 50-59: Female: RD: 46.73; 95% CI: 45.50 - 47.87; Male: RD: 37.93; 95% CI: 36.49 - 39.37 60-69: Female: RD: 41.15; 95% CI: 39.80 - 42.71; Male: RD: 34.05; 95% CI: 32.46 - 35.56 70+: Female: RD: 29.33; 95% CI: 27.52 - 31.27; Male: RD: 24.63; 95% CI: 22.92 - 26.39 			
	- Sleep problems: 15-19: Female: RD: 13.57; 95% CI: 10.64 - 16.62; Male: RD: 9.23; 95% CI: 5.91, - 12.83 20-29: Female: RD: 13.78; 95% CI: 12.26 - 15.19; Male: RD: 9.08; 95% CI: 7.14 - 11.05 Page E4 of 260			

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)			
	30-39: Female: RD: 15.34; 95% CI: 13.82 - 16.91; Male: RD: 12.72; 95% CI: 10.86 - 14.90 40-49: Female: RD: 19.06; 95% CI: 17.83 - 20.38; Male: RD: 14.36; 95% CI: 12.88 - 15.96 50-59: Female: RD: 25.04; 95% CI: 23.87 - 26.23; Male: RD: 16.08; 95% CI: 14.88 - 17.30 60-69: Female: RD: 19.98; 95% CI: 18.54 - 21.25; Male: RD: 14.93; 95% CI: 13.64 - 16.24 70+: Female: RD: 14.55; 95% CI: 12.90 - 16.11; Male: RD: 8.84; 95% CI: 7.65 - 10.13			
	Analysis: Risk differences of self-reported diagnoses with new onset between the test date and until 6-12 months, after comparing COVID-19 test-positive and test-negative participants, stratified by sex and age group (females, n = 93,494; males, n = 59,386). Method: Parametric g-computation on logistic regression (adjusted for age, sex, comorbidities, obesity, healthcare occupation, and time after testing).			
	 Depression: 15-19: Female: RD: 1.23; 95% CI: -0.37 - 2.99; Male: RD: 0.98; 95% CI: -0.86 - 2.76 20-29: Female: RD: 1.65; 95% CI: 0.78 - 2.51; Male: RD: 0.31; 95% CI: -0.73 - 1.38 30-39: Female: RD: 2.53; 95% CI: 1.69 - 3.32; Male: RD: 1.33; 95% CI: 0.45 - 2.20 40-49: Female: RD: 1.28; 95% CI: 0.72 - 1.84; Male: RD: 1.12; 95% CI: 0.45 - 1.80 50-59: Female: RD: 0.89; 95% CI: 0.44 - 1.36; Male: RD: 0.61; 95% CI: 0.11 - 1.14 60-69: Female: RD: 0.49; 95% CI: -0.01 - 1.01; Male: RD: 0.64; 95% CI: 0.05 - 1.22 70+: Female: RD: 1.39; 95% CI: 0.68 - 2.10; Male: RD: 1.09; 95% CI: 0.51 - 1.71 			
	 Anxiety: 15-19: Female: RD: 0.32; 95% CI: -1.34 - 2.08; Male: RD: 1.20; 95% CI: -0.38 - 2.84 20-29: Female: RD: 3.14; 95% CI: 2.29 - 4.02; Male: RD: 1.19; 95% CI: 0.12 - 2.22 30-39: Female: RD: 2.96; 95% CI: 2.17 - 3.81; Male: RD: 1.47; 95% CI: 0.68 - 2.30 40-49: Female: RD: 1.54; 95% CI: 0.99 - 2.10; Male: RD: 1.00; 95% CI: 0.40 - 1.57 50-59: Female: RD: 1.05; 95% CI: 0.61 - 1.47; Male: RD: 0.53; 95% CI: 0.02 - 1.00 60-69: Female: RD: 0.21; 95% CI: 0.30 - 0.69; Male: RD: 0.19; 95% CI: -0.32 - 0.72 70+: Female: RD: 1.05; 95% CI: 0.40 - 1.73; Male: RD: 0.91; 95% CI: 0.34 - 1.54 			
	- PTSD: 15-19: Female: RD: 0.40; 95% CI: -0.29 - 1.17; Male: RD: 0.03; 95% CI: -0.76 - 0.80 20-29: Female: RD: 0.30; 95% CI: -0.05 - 0.61; Male: RD: 0.05; 95% CI: -0.48 - 0.55 30-39: Female: RD: 0.91; 95% CI: 0.51 - 1.31; Male: RD: 0.55; 95% CI: 0.05 - 1.05 40-49: Female: RD: 0.42; 95% CI: 0.07 - 0.77; Male: RD: 0.14; 95% CI: -0.33 - 0.59 50-59: Female: RD: 0.05; 95% CI: -0.25 - 0.34; Male: RD: -0.03; 95% CI: -0.42 - 0.39 60-69: Female: RD: -0.19; 95% CI: -0.57 - 0.18; Male: RD: -0.30; 95% CI: -0.74 - 0.14 70+: Female: RD: -0.34; 95% CI: -0.78 - 0.09; Male: RD: -0.25; 95% CI: -0.62 - 0.18			
	- Chronic fatigue syndrome: 15-19: Female: RD: 2.90; 95% CI: 1.73 - 4.14; Male: RD: 1.62; 95% CI: 0.57 - 2.87			

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)			
	20-29: Female: RD: 2.98; 95% CI: 2.43 - 3.53; Male: RD: 1.86; 95% CI: 1.08 - 2.60 30-39: Female: RD: 4.00; 95% CI: 3.37 - 4.65; Male: RD: 2.80; 95% CI: 1.98 - 3.69			
	40-49: Female: RD: 2.87; 95% CI: 2.35 - 3.37; Male: RD: 2.39; 95% CI: 1.76 - 3.01			
	50-59: Female: RD: 2.46; 95% CI: 2.03 - 2.94; Male: RD: 2.42; 95% CI: 1.85 - 2.96			
	60-69: Female: RD: 1.94; 95% CI: 1.36 - 2.52; Male: RD: 2.17; 95% CI: 1.57 - 2.83			
	70+: Female: RD: 3.25; 95% CI: 2.43 - 4.13; Male: RD: 2.81; 95% CI: 2.01 - 3.59			
	- Fibromyalgia:			
	15-19: Female: RD: 0.75; 95% CI: 0.19 - 1.34; Male: RD: 0.24; 95% CI: -0.45 - 1.02			
	20-29: Female: RD: 0.32; 95% CI: 0.07 - 0.57; Male: RD: -0.10; 95% CI: -0.57 - 0.34			
	30-39: Female: RD: 0.46; 95% CI: 0.14 - 0.79; Male: RD: 0.27; 95% CI: -0.20 - 0.73			
	40-49: Female: RD: 0.25; 95% CI: -0.05 - 0.56; Male: RD: 0.16; 95% CI: -0.30 - 0.56 50-59: Female: RD: -0.14; 95% CI: -0.43 - 0.12; Male: RD: -0.02; 95% CI: -0.41 - 0.33			
	60-69: Female: RD: -0.46; 95% CI: -0.840.10; Male: RD: -0.41; 95% CI: -0.82 - 0.00			
	70+: Female: RD: -0.10; 95% CI: -0.57 - 0.40; Male: RD: -0.38; 95% CI: -0.76 - 0.01			
	Analysis: Odds ratios for persistent symptoms at 12 weeks among symptomatic respondents.			
	Method: Logistic regression (mutually adjusted for all covariates).			
Whitaker et al. ⁽⁵⁴⁾ Population: Rounds 3-5 and 6 of the React2 programme evaluating community prevalence of SARS-CoV-2 anti-spike protein antibody positivity in adults n = 55,730	 Sex: Male: 1 (Reference) Female: OR: 1.38; 95% CI: 1.32 - 1.45 Age group: 18-24: OR: 0.64; 95% CI: 0.57 - 0.72 25-34: OR: 0.60; 95% CI: 0.56 - 0.65 35-44: OR: 0.64; 95% CI: 0.59 - 0.68 45-54: OR: 0.85; 95% CI: 0.80 - 0.91 55-64: 1 (Reference) 65-74: OR: 1.16; 95% CI: 1.01 - 1.33 74+: OR: 1.16; 95% CI: 0.71 - 1.98 Ethnicity: White: 1 (Reference) Asian: OR: 0.84; 95% CI: 0.74 - 0.96 Black: OR: 1.02; 95% CI: 0.74 - 0.96 Black: OR: 1.02; 95% CI: 0.98 - 1.38 Other: OR: 1.05; 95% CI: 0.83 - 1.32 Adiposity: Note: OR: 0.05			
	Underweight: OR: 0.99; 95% CI: 0.79 - 1.25 Normal weight: 1 (Reference)			
	Overweight: OR: 1.15; 95% ĆI: 1.09 - 1.21			
	Obese: OR: 1.39; 95% CI: 1.32 - 1.48			

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)		
	- Healthcare or care home worker:		
	No: 1 (Reference)		
	Yes: OR: 1.26; 95% CI: 1.17 - 1.36		
	- Index of multiple deprivation (IMD) quintile:		
	1 - most deprived: OR: 1.09; 95% CI: 1.0 - 1.19		
	2: OR: 1.04; 95% CI: 0.97 - 1.12		
	3: 1 (Reference) 4: OR: 0.98; 95% CI: 0.92 - 1.05		
	4. OR: 0.98, 95% CI: 0.92 - 1.05 5 - least deprived: OR: 0.91; 95% CI: 0.85 - 0.97		
	- Current smoker:		
	Not current cigarette smoker: 1 (Reference)		
	Current cigarette smoker: OR: 1.11; 95% CI: 1.03 - 1.2		
	Prefer not to say: OR: 0.84; 95% CI: 0.63 - 1.14		
	- Current vaper:		
	Not current vaper: 1 (Reference)		
	Current vaper: OR: 1.11; 95% CI: 1.01 - 1.21		
	Prefer not to say: OR: 0.94; 95% CI: 0.59 - 1.51		
	- Severity of COVID-19 symptoms:		
	Mild symptoms: 1 (Reference)		
	Moderate symptoms: OR: 1.51; 95% CI: 1.43 - 1.6		
	Severe symptoms: OR: 2.26; 95% CI: 2.1 - 2.42		
	- Treatment sought/received for COVID-19:		
	No medical attention sought: 1 (Reference)		
	Pharmacist / by phone (NHS 111/GP): OR: 2.02; 95% CI: 1.92 - 2.13		
	Visited GP/walk-in centre/A&E: OR: 1.57; 95% CI: 1.44 - 1.71		
	Hospital admission: OR: 3.45; 95% CI: 2.57 - 4.64		
	- Gross household income:		
	0-14,999: OR: 1.36; 95% CI: 1.22 - 1.51		
	15,000-49,999: 1 (Reference)		
	50,000-149,999: OR: 0.84; 95% CI: 0.8 - 0.88		
	>150,000: OR: 0.80; 95% CI: 0.73 - 0.88 - Hospitalised with COVID:		
	No: 1 (Reference)		
	Yes: OR: 3.45; 95% CI: 2.57 - 4.64		

Appendix 7. Specific age groups results

Table 1. Long COVID prevalence and or incidence in specific age groups.

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
Bahat et al. ⁽⁷⁰⁾	Not Reported	Not Reported	N/A
Buonsenso et al. ⁽³⁴⁾	All the symptoms lasting more than 1 month in children with a specific analysis of symptoms persisting >6 months post- SARS- CoV-2 infection	All Observations n (%) Fully recovered scale (1 not recovered, 10 fully recovered) 1-4: 17 (2.6%) 5-7: 73 (11%) 8-10: 576 (86%) 15 Months n (%) Fully recovered scale (1 not recovered, 10 fully recovered) 1-4: 14 (4%) 5-7: 46 (13%) 8-10: 288 (83%) 6-9 Months n (%) Fully recovered scale (1 not recovered, 10 fully recovered) 1-4: 2 (1.3%) 5-7: 7 (4.6%) 8-10: 144 (94%) ≥12 Months n (%) Fully recovered scale (1 not recovered, 10 fully recovered 1-4: 1 (0.7%) 5-7: 15 (9.9%) 8-10: 136 (89%)	N/A
Daitch et al. ⁽⁶⁷⁾	Patients were required to have a PCR- confirmed COVID-19 diagnosis at least 30 days before the clinic visit. Patients were interviewed by the attending physician and reported their long COVID symptoms using a designated questionnaire, in which they were asked to rank each symptom on a 0-3 Likert scale (0 – not at all; 1 – mild; 2 – moderate; 3 – severe). Individuals with high burden of	For each symptom, individuals who reported moderate to severe intensity were counted as positive N (%) - Any symptom (recorded for N=2141) Total sample (n = 2141): 1439 (67.2%) 18- 65 years (n = 1730): 1111 (64.2%) >65 years (n = 140): 328 (80.0%) ≥3 symptoms (high burden of long COVID)	N/A

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Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
	long COVID symptoms were defined as those reporting at least 3 continuing symptoms.	(recorded for N=1743) Total sample (n = 1743): 575 (33.0%) 18 - 65 years (n = 1488): 488 (32.8%) (n=1367, if based on 488/32.8*100) > 65 years (n = 255): 87 (34.1%)	
Dumont et al. ⁽⁵⁰⁾	Not Reported	Persistent symptoms n (%): Symptoms lasting over 4 weeks: 102 (18%) Symptoms lasting 4–6 weeks: 30 (5%) Symptoms lasting 6–8 weeks: 14 (2%) Symptoms lasting 8–12 weeks: 4 (1%) Symptoms lasting over 12 weeks: 54 (9%) Prevalence of symptoms lasting over 12 weeks: 54 (9%) Age 0–5: 8.0 (1.8, 14.2) Age 6–11: 5.3 (2.6, 8.1) Age 12–17: 13.6 (9.3, 18.1) All ages: 9.1 (6.7, 11.8)	N/A
Fang et al. ⁽⁶⁵⁾	Not Reported. However, patients were asked to report any sustained, intermittent, and emerging symptoms, respectively. The patient's current symptoms were carefully documented and evaluated by specialists to distinguish from their pre-disease status or other underlying diseases that were not associated with COVID-19	Any one of long COVID post-sequelae: Total patients: 630 (51.1%) Severe: 252 (57.5%) Non-severe: 378 (47.5%)	N/A
Funk et al. ⁽⁷⁷⁾	The term long COVID was not utilised however Post Covid-19 Conditions (PCCs) were the focus. Post–COVID-19 conditions were present if the caregiver indicated at the 90-day interview that the participant had any persistent, new, or returning symptoms or health problems. Post–COVID-19 conditions were not present if the caregiver indicated that these symptoms were neither persistent (i.e., recovered completely prior to 90 days) nor novel (i.e., underlying condition without exacerbation). Post–COVID-19 conditions were classified as cardiovascular, dermatologic, ophthalmologic or otolaryngologic, gastrointestinal, neurologic, psychological, respiratory,	110/1884 SARS-CoV-2–positive children (5.8% [95% CI, 4.8%-7.0%]) reported 90- day post–COVID-19 conditions 66/1437 of non-hospitalised SARS-CoV-2– positive children (4.6%; 95% CI, 3.6%-5.8%) 44/447 of hospitalised SARS-CoV-2–positive children (9.8%; 95% CI, 7.4%-13.0%)	N/A

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Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
	systemic (e.g., fatigue, weakness, fever, anorexia), or other. Caregivers could indicate the presence of PCCs using check boxes or free text. For the latter, 1 author (A.L.F.) blinded to SARS-CoV-2 test status performed narrative review and grouping. The PCC term also reflected health problems reported by children who tested negative, to permit comparisons. WHO definition of long COVID i.e. the		
Kikkenborg Berg et al. ⁽⁶⁴⁾	WHO definition of long COVID i.e. the presence of symptoms lasting at least 2 months. Long COVID symptoms were defined as new symptoms that presented after SARS-CoV-2 infection and were present for 8 weeks after the positive SARS-CoV-2 test	0-3 years: 427/1368 (31.2%) 4-11 years: 1505/5684 (26.5%) 12-14 years: 1077/3316 (32.5%)	N/A
Kikkenborg Berg et al. ⁽⁸⁸⁾	WHO definition of long COVID i.e. the presence of symptoms lasting at least 2 months. Long COVID symptoms were defined as new symptoms that presented after SARS-CoV-2 infection and were present for 8 weeks after the positive SARS-CoV-2 test.	Long COVID: 2,997/6,264 (47.8%) participants in the case group reported at least one new-onset symptom not known before the positive SARS-CoV-2 test and present 8 weeks after the positive test. 15-18 years: 4353/6630 (65.7%) reported participants in the case group reported at least one new symptom present after 4 weeks from the SARS-CoV-2 positive test and not known before infection,	N/A
Kildegaard et al. ⁽⁵⁵⁾	Hospital referral for suspicion of sequelae after COVID-19 infection, ICD-10 B948A, Z038Q Outcomes of SARS-CoV-2 infection were considered in three periods: the acute phase (days 0 to 29), an intermediate period when serious complications related to SARS-CoV-2 infection were likely to occur (days 0 to 59), and the post-acute phase (days 30 to 179)	SARS COV-2 positive cohort: 58/48948 (0.12%, 0.09% to 0.15%) Reference cohort: 32/607990 (0.01%)	N/A
Kostev et al. ⁽⁶⁹⁾	ICD-10 code U09.9 (post COVID-19 condition, unspecified), and was assessed between the index date and November 2021.	114 (1.7%) of total sample Age (in years) Mean (standard deviation):12.1 (4.7) N and % of post COVID sample:	N/A

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Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
		≤5 years: 14 (12.3%) 6–9 years: 12 (10.5%) 10–12 years: 22 (19.3%) 13–17 years: 66 (57.9%)	
		Sex Girls: 62 (54.4%) Boys: 52 (45.6%)	
		Type of practices General: 67 (58.8%) Paediatric: 47 (41.2%) 4,285 (8.3%) of total sample	
Kostev et al. ⁽⁵⁸⁾	ICD-10: U09.9 91 to 365 days after first COVID-19 diagnosis.	By age 18–30: 5.0% 31–45: 7.3% 46–60: 9.8% 61–70: 8.6% >70: 5.6%	N/A
Miller et al. ⁽⁵¹⁾	Defined "persistent symptoms" as a child having either answered yes to the above question* in the February or May monthly surveys or reporting symptom episodes lasting four weeks or more through the weekly surveys. This definition was in line with the National Institute for Health and Care Excellence (NICE) guidance and published studies at the time of survey design. *February 2021 and May 2021 monthly surveys: "In the last year (since February 2020) have any of the household members experienced any new symptoms that have lasted for four or more weeks even if these symptoms come and go, and that are not explained by something else (e.g., pre- existing chronic illness or pregnancy)?". Weekly surveys; Symptoms reported over ≥4 weeks: "Have you or anyone in the household had any of these symptoms in the past week?"	Overall: 2.6% (129/5032; 95% CI 2.1-3.0%) Children with a history of infection: 4.1% (43/1062 children; 95% CI, 2.9–5.4%)	N/A

Nugawela et al. ⁽⁸⁶⁾ Having at least one of 21 reported physical symptoms and experiencing more than minimal problems on any one of the five EQ- SD-Y questions at the time of the questionnaire, i.e. approximately 3 months after the PCR test. Nugawela et al. ⁽⁸⁶⁾ Having at least one of 21 reported physical symptoms and experiencing more than minimal problems on any one of the five EQ- SD-Y questions at the time of the questionnaire, i.e. approximately 3 months after the PCR test.	Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
Some/a lot of problems: Total population: 456 (6.39%), SARS-CoV-2 negative: 213 (5.47%), SARS-CoV-2 positive: 243 (7.49%) Looking after self: No problems: Total population: 6819 (95.52%), SARS-CoV-2 negative: 3709 (95.27%), SARS-CoV-2 positive: 3110 (95.81%) Some/a lot of problems: Total population: 320 (4.48%), SARS-CoV-2 negative: 184 (4.73%), SARS-CoV-2 negative: 136 (4.19%) Doing usual activities: No problems: Total population: 6099 (85.43%), SARS-CoV-2 negative: 3376 (86.72%), SARS-CoV-2 positive: 2723 (83.89%) Some/a lot of problems: Total population: 1040 (14.57%), SARS-CoV-2 negative: 517		Having at least one of 21 reported physical symptoms and experiencing more than minimal problems on any one of the five EQ- 5D-Y questions at the time of the questionnaire, i.e. approximately 3 months	negative (N=3893) SARS-CoV-2 positive (N=3246) Long COVID 3 months after a PCR test Total population: 1536 (21.52%), SARS-CoV-2 positive 817 (25.17%) Number of symptoms: 0: Total population: 2968 (41.57%), SARS- CoV-2 negative: 1848 (47.47%), SARS-CoV-2 positive: 1120 (34.50%) 1-4: Total population: 3496 (48.97%), SARS- CoV-2 negative: 1798 (46.19%), SARS-CoV-2 positive: 1698 (52.31%) 5+: Total population: 675 (9.46%), SARS- CoV-2 negative: 247 (6.34%), SARS-CoV-2 positive: 428 (13.19%) EQ-5D-Y results: Mobility: No problems: Total population: 6683 (93.61%), SARS-CoV-2 negative: 3680 (94.53%), SARS-CoV-2 positive: 3003 (92.51%) Some/a lot of problems: Total population: 456 (6.39%), SARS-CoV-2 negative: 213 (5.47%), SARS-CoV-2 positive: 243 (7.49%) Looking after self: No problems: Total population: 6819 (95.52%), SARS-CoV-2 negative: 3709 (95.27%), SARS-CoV-2 positive: 1310 (95.81%) Some/a lot of problems: Total population: 320 (4.48%), SARS-CoV-2 negative: 136 (4.19%) Doing usual activities: No problems: Total population: 6099 (85.43%), SARS-CoV-2 negative: 2723 (83.89%) Some/a lot of problems: Total population:	

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Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
		(13.28%), SARS-CoV-2 positive: 523 (16.11%) Having pain: No problems: Total population: 6016 (84.27%), SARS-CoV-2 negative: 3327 (85.46%), SARS-CoV-2 positive: 2689 (82.84%) Some/a lot of problems: Total population: 1123 (15.73%), SARS-CoV-2 negative: 566 (14.54%), SARS-CoV-2 positive: 557 (17.16%) Feeling worried/sad: No problems/a bit: Total population: 6571 (92.04%), SARS-CoV-2 negative: 3581 (91.99%), SARS-CoV-2 positive: 2990 (92.11%) Very worried/sad: Total population: 568 (7.96%), SARS-CoV-2 negative: 312 (8.01%), SARS-CoV-2 positive: 256 (7.89%)	
Pazukhina et al. ⁽⁶⁶⁾	Post-COVID-19 condition was defined as the presence of any symptom which started no later than three months after hospital discharge and lasted for at least 2 months as per the WHO case definition. Symptom duration was calculated from the time of the hospital discharge in the absence of reliable objective medical record data regarding date of first symptoms appearance.	SARS-COV-2 positive: 230 (7.69%) 6 Month Follow Up Adults: 508/1013 (50.15%); 95% CI: 47.09 - 53.31 Children: 72/360 (20%); 95% CI: 15.83 - 24.17 12 Month Follow Up Adults: 345/1013 (34.06%); 95% CI: 31.19 - 36.92 Children: 40/360 (11.11%); 95% CI: 8.06 - 14.44	N/A
Perlis et al. ⁽⁵⁷⁾	All individuals whose survey start date was more than 2 months after the month in which they initially identified a positive COVID-19 test result. Cases defined as reporting continued symptoms at the time of the survey.	Point Prevalence's of Long COVID-19 Among Individuals Testing Positive for COVID-19 by Antigen Test or PCR (%, 95% CI) 60 – 69 years: 18.3% 70+ years: 14.3%	N/A
Trapani et al. ⁽³⁶⁾	Long COVID-19 syndrome was assumed when at least one of the above reported manifestations increased in frequency during the 8–36 weeks after recovery from SARS-CoV-2 infection, with respect to the previous year.	Primary care (n=629) - At least one symptom: 153 (24.3%, 95% CI 21.0–27.9%) Cumulative incidence of Long COVID-19 was about the same in males and females in primary care (74/316=23.4% and 79/313=25.2%)	N/A

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Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
		Cumulative incidence of Long COVID-19 after 2-3 months: 20.5% (95% CI 14.3– 27.4%) Cumulative incidence of Long COVID-19 after 4-5 months: 26.9% (21.1–33.3%) (p=0.338 between time periods).	
		0-5 years (n = 202) - At least one Long COVID-19 symptom: 37 (18.3%)	
		6-10 years (n = 235) - At least one Long COVID-19 symptom: 50 (21.3%)	
		11-16 years (n = 192) - At least one Long COVID-19 symptom: 66 (34.3%); P = 0.001	
		Children with pre-existing diseases had a slightly higher cumulative incidence of Long COVID-19 than children without in primary care (19/59=32.2% versus 134/570=23.5%; p=0.152).	
		Abnormal fatigue cumulative incidence was more than doubled in children with than without pre-existing diseases (8/59=13.6% versus 36/570=6.3%).	
		Symptomatic acute COVID-19 infection - At least one symptom: 107/230 (46.5%)	
		Non - Symptomatic acute COVID-19 infection - At least one symptom: 46/399 (11.5%); P <0.001	
Whitaker et al. ⁽⁵⁴⁾	Participants who self-reported having had COVID-19—either suspected or PCR confirmed— and with one or more of 29 symptoms 12 weeks or more before the survey date	65 – 74 years: 3,661 out of 85,297 (4.3%) reported one or more symptoms at 12 weeks from survey (not required to have been COVID-19 positive) (in Main analysis) 74+ years: 1,243 out of 35,713 (3.5%) reported one or more symptoms at 12 weeks from survey (not required to have been COVID-19 positive) (in Main analysis)	N/A

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Auth	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
Bahat al. ⁽⁷⁰			Fatigue All (n = 665) = 93 (14 %) <65 (n = 595) = 85 (14.3 %) ≥65 (n = 70) = 8 (11.4 %)	Chest pain All (n = 665) = 40 (6 %) <65 (n = 595) = 36 (6.1 %) ≥65 (n = 70) = 4 (5.7 %)	Headache All (n = 665) 7 (1.1 %) <65 (n = 595) = 7 (1.2 %) ≥ 65 (n = 70) = 0 (0 %) Forgetfulne ss All (n = 665) = 3 (0.5 %) <65 (n = 595) = 2 (0.3 %) ≥ 65 (n = 70) = 1 (1.4 %)	Dyspnoea All (n = 665) = 80 (12 %) < 65 (n = 595) = 70 (11.8 %) ≥ 65 (n = 70) = 10 (14.3 %) Dry cough All (n = 665) = 76 (11.4 %) < 65 (n = 595) = 69 (11.6 %) ≥ 65 (n = 70) = 7 (10 %)			Loss of smell/taste All (n = 665) = 16 (2.4 %) < 65 (n = 595) = 16 (2.7 %) ≥ 65 (n = 70) = 0 (0 %)		Diarrhoea All (n = 665) = 22 (3.3 %) < 65 (n = 595) =18 (3 %) ≥ 65 (n = 70) =4 (5.7 %) Nausea All (n = 665) =12 (1.8 %) < 65 (n = 595) =11 (1.8 %) ≥ 65 (n = 70) =1 (1.4 %)	

Table 2. Long COVID symptoms in specific age groups.

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	admission											
	that were											
	hospitalized											
	in our											
	center were											
	inquired.											
	We											
	performed											
	a detailed											
	laboratory											
	assessment											
	and a											
	control											
	chest											
	imaging in											
	the follow-											
	up visit.											
	The normal											
	ranges of											
	each											
	parameter											
	were											
	assessed by											
	the											
	laboratory											
	thresholds.											
	We											
	recommend											
	ed chest X-											
	ray for the											
	patients											
	who were considered											
	having low-											
	risk for											
	pulmonary											
	involvement											
	. For those											
	who had											
	higher risk											
	of											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	pulmonary											
	involvement											
	and free of											
	contraindica											
	tions, we performed											
	low dose											
	computed-											
	tomography											
	(CT). Any											
	fibrotic											
	image was											
	noted as a											
	fibrotic											
	sequela.											
	Authors'		1-5 month	1-5 month	1-5 month	1-5 month			1-5 month	1-5 month	1-5 month	1-5
	own design		follow-up	follow-up	follow-up	follow-up			follow-up	follow-up	follow-up	month
	Standardise		n (%):	n (%):	n (%):	n (%):			n (%):	n (%):	n (%):	follow-up
	d ISARIC		Fatigue:	Chest pain:	Headache:	Persistent			Alternated	Persistent	Stomach	n (%):
	COVID-19		79/355	12/355	49/355	cough:			sense of	muscle	abdominal	Skin rash:
	Health and		(22%)	(3.4%)	(14%)	20/355			smell:	pain:	pain:	16/355
	Wellbeing				Insomnia:	(5.6%)			8/355	36/355	29/355	(4.5%)
	Follow-Up		6-9	6-9	33/355	Difficulty			(2.3%)	(10%)	(8.2%)	Bilateral
	Survey for		months n	months n	(9.3%)	breathing			Alternated	Joint pain	Poor	conjunctivit
	Children		(%):	(%):	Confusion	chest			taste:	or swelling:	appetite:	is: 0/207
	Telephone		Fatigue:	Chest pain:	lack of	tightness:			11/355	20/355	22/355	(0%)
Dueneenee	or face to		23/157	10/157	concentrati	14/355			(3.1%)	(5.6%)	(6.2%)	6.0
Buonsenso et al. ⁽³⁴⁾	face to face questionnai		(15%)	(6.4%)	on: 30/355 (8.5%)	(3.9%) Pain on			Loss of smell:	6-9	Diarrhoea: 16/355	6-9 months n
et al.	re		≥12	<10 Years	(8.5%) Hypersomni	breathing:			5/355	months n	(4.5%)	(%):
	The survey		months n	n (%):	a: 11/355	8/326			(1.4%)	(%):	Constipatio	Skin rash:
	assesses		(%):	Chest pain:	(3.1%)	(2.5%)			Loss of	Persistent	n: 17/355	12/156
	the physical		Fatigue:	5/317	Problems	(21370)			taste:	muscle	(4.8%)	(7.7%)
	and		24/154	(1.6%)	speaking or	6-9			7/355 (2%)	pain: 5/157	Weight	Bilateral
	psychosocia		(16%)		communicat	months n			, (=)	(3.2%)	loss: 9/213	conjunctivit
	I health and		. ,	≥10 Years	ing: 2/211	(%):			6-9	Joint pain	(4.2%)	is: 1/136
	wellbeing		<10 Years	n (%):	(0.9%)	Persistent			months n	or swelling:	Feeling	(0.7%)
	and its		n (%):	Chest pain:	Fainting	cough:			(%):	4/157	nauseous:	
	impact on		Fatigue:	21/359	blackouts:	5/157			Alternated	(2.5%)	14/355	≥12
	daily		37/317	(5.8%)	1/355	(3.2%)			sense of		(3.9%)	months n
	functioning,		(12%)		(0.3%)				smell:			(%):

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	behaviour,				Tremor	Difficulty			5/157	≥12	Feeling sick	Skin rash:
	relationship		≥10 Years		shakiness:	breathing			(3.2%)	months n	vomiting:	4/154
	s and daily		n (%):		2/257	chest			Alternated	(%):	5/355	(2.6%)
	living. The		Fatigue:		(0.8%)	tightness:			taste:	Persistent	(1.4%)	
	survey		89/359		Tingling	3/157			4/157	muscle		<10 Years
	documents		(25%)		feeling pins	(1.9%)			(2.5%)	pain: 5/154	6-9	n (%):
	the data on				and	Pain on			Loss of	(3.2%)	months n	Skin rash:
	demographi				needles:	breathing:			smell:	Joint pain	(%):	13/316
	cs, pre-				1/355	4/151			2/157	or swelling:	Stomach	(4.1%)
	existing				(0.3%)	(2.6%)			(1.3%)	4/154	abdominal	Bilateral
	comorbiditi				Cannot fully				Loss of	(2.6%)	pain: 6/157	conjunctivit
	es, acute				move or	≥12			taste:	(10 Yaana	(3.8%)	is: 1/163
	severity				control	months n			1/157	<10 Years	Poor	(0.6%)
	and				movements	(%):			(0.6%)	n (%):	appetite:	
	information				: 1/201	Persistent			>12	Persistent	14/157	\geq 10 Years
	on the				(0.5%)	cough: 5/154			≥12 months n	muscle	(8.9%)	n (%):
	acute phase of the				Seizures	(3.2%)			(%):	pain: 14/317	Diarrhoea:	Skin rash: 20/359
	disease				fits: 1/212 (0.5%)	(3.2%)			Alternated	(4.4%)	4/157 (2.5%)	(5.6%)
	(symptoms,				(0.5%) Dizziness	<10 Years			sense of	Joint pain	(2.5%) Constipatio	(5.0%)
	comorbiditi				light-	<10 rears n (%):			smell:	or swelling:	n: 8/157	
	es and				headedness	Persistent			3/154	7/317	(5.1%)	
	clinical				: 1/355	cough:			(1.9%)	(2.2%)	Weight	
	outcomes)				(0.3%)	21/317			Alternated	(2.270)	loss: 5/141	
	and its				(0.5%)	(6.6%)			taste:	≥10 Years	(3.5%)	
	severity				6-9	Difficulty			2/154	n (%):	Feeling	
	(hospital				months n	breathing			(1.3%)	Persistent	nauseous:	
	admission,				(%):	chest			Loss of	muscle	3/157	
	paediatric				Headache:	tightness:			smell:	pain:	(1.9%)	
	intensive				14/157	7/317			3/154	33/359	Feeling sick	
	care				(8.9%)	(2.2%)			(1.9%)	(9.2%)	vomiting:	
	(PICU/ICU)				Insomnia:	Pain on			Loss of	Joint pain	1/157	
	and				9/157	breathing:			taste:	or swelling:	(0.6%)	
	oxygenation				(5.7%)	3/281:			3/154	23/359		
).				Confusion	(1.1%)			(1.9%)	(6.4%)	≥12	
	Moreover,				lack of	(,			(()	months n	
	data on the				concentrati	≥10 Years			<10 Years		(%):	
	parental				on: 9/157	n (%):			n (%):		Stomach	
	perception				(5.7%)	Persistent			Alternated		abdominal	
	of the					cough:			sense of		pain: 7/154	
	changes in								smell:		(4.5%)	

	Assessme	New onset	General	Cardiovas	Neurologi	Respirator	Autonomi	Psycholog	Ear, Nose	Musculosk	Gastrointe	Dermatol
Author	nt Mode	conditions	Symptoms	cular	С	y	c Nervous	ical/Psych	and	eletal	stinal	ogic
Autio				Symptoms	Symptoms	Symptoms	System	iatric	Throat	Symptoms	Symptoms	Symptom
							Symptoms	Symptoms	Symptoms			S
	their child's				Hypersomni	10/359			1/317		Poor	
	emotional				a: 1/157	(2.8%)			(0.3%)		appetite:	
	and				(0.6%)	Difficulty			Alternated		7/154	
	behavioural				Fainting	breathing			taste:		(4.5%)	
	status,				blackouts:	chest			1/317		Diarrhoea:	
	including				1/157	tightness:			(0.3%)		8/154	
	the reasons				(0.6%)	13/359			Loss of		(5.2%)	
	for the				Tingling	(3.6%)			smell:		Constipatio	
	observed				feeling pins	Pain on			1/317		n: 5/154	
	changes				and	breathing:			(0.3%)		(3.2%)	
	(the direct				needles:	12/320			Loss of		Weight	
	or indirect				1/157	(3.8%)			taste:		loss: 2/77	
	impacts of				(0.6%)				3/317		(2.6%)	
	COVID-19								(0.9%)		Feeling	
	or both),				≥12				. ,		nauseous:	
	persistent				months n				≥10 Years		1/154	
	symptoms				(%):				n (%):		(0.6%)	
	at the				Headache:				Alternated		Feeling sick	
	follow-up				17/154				sense of		vomiting:	
	assessment				(11%)				smell:		1/154	
	, the overall				Insomnia:				16/359		(0.6%)	
	health				8/154				(4.5%)			
	condition				(5.2%)				Alternated		<10 Years	
	compared				Confusion				taste:		n (%):	
	to prior to				lack of				16/359		Stomach	
	the index				concentrati				(4.5%)		abdominal	
	case SARS-				on: 7/153				Loss of		pain:	
	CoV-2				(4.6%)				smell:		18/317	
	diagnosis				Hypersomni				10/359		(5.7%)	
	and				a: 3/154				(2.8%)		Poor	
	mortality.				(1.9%)				Loss of		appetite:	
	Persistent				Problems				taste:		19/317	
	symptoms:				speaking or				8/359		(6%)	
	respiratory,				communicat				(2.2%)		Diarrhoea:	
	neurological				ing: 1/87				Problems		10/317	
	, sensory,				(1.1%)				with		(3.2%)	
	sleep,				Fainting				balance:		Constipatio	
	gastrointest				blackouts:				1/359		n: 22/317	
	inal,				1/154				(0.3%)		(6.9%)	
	general				(0.6%)							
	(including				. ,							

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator Y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	headache,				<10 Years						Weight	
	malaise,				n (%):						loss: 3/175	
	and				Headache:						(1.7%)	
	fatigue),				17/317						Feeling	
	dermatologi				(5.4%)						nauseous:	
	cal,				Insomnia:						3/317	
	cardiovascu				12/317						(0.9%)	
	lar,				(3.8%)						Feeling sick	
	urogenital				Confusion						vomiting:	
	and				lack of						4/317	
	musculoskel				concentrati						(1.3%)	
	etal				on: 14/317							
					(4.4%)						≥10 Years	
					Hypersomni						n (%):	
					a: 4/317						Stomach	
					(1.3%)						abdominal	
					Problems						pain:	
					speaking or						27/358	
					communicat						(7.5%)	
					ing: 2/174						Poor	
					(1.1%)						appetite:	
					Fainting						24/359	
					blackouts:						(6.7%)	
					1/317						Diarrhoea:	
					(0.3%)						20/359	
					Tremor						(5.6%)	
					shakiness:						Constipatio	
					1/204						n: 8/359	
					(0.5%)						(2.2%)	
					Tingling						Weight	
					feeling pins						loss:	
					and						13/261	
					needles:						(5%)	
					1/317						Feeling	
					(0.3%)						nauseous:	
					Seizures						16/359	
					fits: 1/173						(4.5%)	
					(0.6%)						Feeling sick	
											vomiting:	
					≥10 Years						4/359	
					n (%):						(1.1%)	

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
					Headache: 65/359							
					(18%)							
					Insomnia:							
					39/359							
					(11%) Confusion							
					lack of							
					concentrati							
					on: 31/358							
					(8.7%) Hypersomni							
					a: 11/359							
					(3.1%)							
					Problems							
					speaking or communicat							
					ing: 1/268							
					(0.4%)							
					Fainting							
					blackouts:							
					3/359 (0.8%)							
					Tremor							
					shakiness:							
					1/286							
					(0.3%) Tingling							
					feeling pins							
					and							
					needles:							
					1/359 (0.3%)							
					Cannot fully							
					move or							
					control							
					movements							
					: 1/251							
					(0.4%)							

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
			-	-	Dizziness light- headedness : 1/359 (0.3%)			-	-			-
Daitch et al. ⁽⁶⁷⁾	Authors' own design Face to face or telephone questionnai re A designated questionnai re, in which they were asked to rank each symptom on a 0-3 Likert scale (0 – not at all; 1 – mild; 2 – moderate; 3 – severe).		Long COVID symptoms ≥30 days after COVID-19 diagnosis: - Fatigue Total sample (n = 2333): 916 (39.3%) 18 - 65 years (n = 1855): 731 (39.4%) > 65 years (n = 478): 185 (38.7%)	Long COVID symptoms ≥30 days after COVID-19 diagnosis: - Chest pain (recorded for n = 1743) Total sample (n = 1743): 205 (11.8%) 18 - 65 years: 186 (12.6%) > 65 years: 19 (7.5%) - Palpitations Total sample (n = 2333): 111 (4.8%) 18 - 65 years (n = 1855): 102 (5.5%) > 65 years (n =478): 9 (1.9%)	Long COVID symptoms ≥30 days after COVID-19 diagnosis: - Headache Total sample (n = 2333): 159 (6.8%) 18 - 65 years (n = 1855): 143 (7.7%) > 65 years (n = 478): 16 (3.3%) - Concentrati on impairment Total sample (n = 2333): 446 (19.1%) 18 - 65 years (n = 1855): 370 (19.9%) > 65 years (n = 478):76	Long COVID symptoms ≥30 days after COVID-19 diagnosis: - Dyspnoea Total sample (n = 2333): 649 (27.8%) 18 - 65 years (n = 1855): 506 (27.3%) > 65 years (n =478): 143 (29.9%) - Cough Total sample (n = 2333): 265 (11.4%) 18 - 65 years (n = 1855): 197 (10.6%) > 65 years (n =478): 68 (14.2%)		Long COVID symptoms \geq 30 days after COVID-19 diagnosis: - Emotional distress (recorded for n = 1743) Total sample (n = 1743): 401 (23%) 18 - 65 years (n = 1485): 358 (24.1%) >65 years (n = 254): 43 (16.9%)	Long COVID symptoms ≥30 days after COVID-19 diagnosis: - Anosmia Total sample (n = 2333): 363 (15.5%) 18 - 65 years (n = 1855): 299 (16.1%) > 65 years (n =478): 63 (13.2%)	Long COVID symptoms ≥30 days after COVID-19 diagnosis: - Myalgia Total sample (n = 2333): 493 (21.1%) 18 - 65 years (n = 1855): 386 (20.8%) > 65 years (n = 478): 107 (22.4%) - Arthralgia Total sample (n = 2333): 177 (7.6%) 18 - 65 years (n = 1855): 126 (6.8%) > 65 years (n = 478): 51 (10.7%)		Long COVID symptoms ≥30 days after COVID-19 diagnosis: - Hair loss (recorded for 1732) Total sample (n = 1732): 91 (5.3%) 18 - 65 years (n = 1491): 79 (5.3%) > 65 years (n = 250): 12 (4.8%)

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator Y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
					(15.9%) - Memory impairment Total sample (n = 2333): 479 (20.5%) 18 - 65 years (n = 1855): 368 (19.8%) > 65 years (n =478): 111 (23.2%)							
Dumont et al. ⁽⁵⁰⁾	Authors' own design Online questionnai re At the baseline assessment , all children were invited to perform a serological test (by blood drawing) to measure anti-SARS- CoV-2 antibodies (anti-N). One of the parent or		Symptoms lasting 4 to 6 weeks n (%): 0 -5 years (n = 80): 4 (5%) 6 - 11 years (n = 267): 14 (5%) 12 - 17 years (n = 223): 12 (5%) Symptoms lasting 6 to 8 weeks n (%): 0 -5 years (n = 80): 0		(23.2%)							

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	legal guardian (referent parent) was asked to fill out online questionnai res related to health and developmen t for him/herself and for each of his/her children, on the Specchio- COVID19 secured digital platform		(0%) 6 - 11 years (n = 267): 4 (2%) 12 - 17 years (n = 223): 10 (4%) Symptoms lasting 8 to 12 weeks n (%): 0 -5 years (n = 80): 0 (0%) 6 - 11 years (n = 267): 2 (1%) 12 - 17 years (n = 223): 2 (1%) Symptoms lasting over 12 weeks n (%): 0 -5 years (n = 80): 7 (9%) 6 - 11 years (n = 267): 16 (6%) 12 - 17 years (n =									

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
Author Fang et al. ⁽⁶⁵⁾				cular	с	У	c Nervous System	ical/Psych iatric	and Throat	eletal	stinal	ogic Symptom
	sequelae, neurological sequelae, digestive system sequelae), and chronic			lower limbs: 11 (1.4%) Chest tightness: 101 (12.7%)		Non- severe patients n (%): Dyspnoea: 22 (2.8%)			Non- severe patients n (%): Sore throat: 5 (0.6%)		Ànorexia: 7 (0.9%)	

Assessme New onset General Cardiovas Neurologi Respirator Autonomi Psycholog Ear, Nose Musculosk Gastrointe Dermatol c Nervous ical/Psych eletal stinal nt Mode conditions Symptoms cular С and ogic V Author Symptoms Symptoms System iatric Throat Symptoms Symptoms Symptom Symptoms Symptoms Symptoms Symptoms s Palpitations Cough: 37 obstructive Nasal pulmonary : 37 (4.7%) (4.7%) congestion: Expectorati 1 (0.1%) disease on: 27 Smell assessment test (CAT) (3.4%) reduction: 9 (1.1%)score items. Haemoptysi CAT score s: 1 (0.1%) Taste items of Shortness change: 12 which ≥ 10 of breath: (1.5%)(the 23 (2.9%) threshold for maintenanc e treatment in COPD) and >2 (the median value) were treated as categorical outcomes. Authors' All All All All All All All All All children children children children children children children children children own design (n=1884) (n=1884) (n=1884) (n=1884) (n=1884) (n=1884) (n=1884) (n=1884) (n=1884) Telephone Skin interview Number of Symptoms Symptoms Symptoms Symptoms Symptoms Symptoms Symptoms with parent persistent (n %): condition Chest pain: Cough: 13 Anxiety: 7 Muscle, Anorexia, or rash, n or caregiver , new or Mental Runny nose 3 (0.2) `fuzziness' (0.7)(%) recurring (0.4)or joint, or loss of [95%CI]: health Difficulty Depression: Caregivers loss of congestion: body pain: appetite: 7 Funk et were problem Cardiovas focus: 4 breathing, 6 (0.3) 6 (0.3) 4 (0.2) (0.4) 10 (0.5) al.⁽⁷⁷⁾ contacted (n %): cular, n (0.2) short of Other Loss of [0.3-1.0] (%) smell or and asked if 1:65(3.5)Dizziness or breath: 13 psychologic Non-Gastrointe [95%CI]: 2: 25 (1.3) lightheaded their child (0.7) taste: 9 hospitalis stinal, n al Non-3+: 20 hospitalis had any 12 (0.6) : 2 (0.1) Wheeze or symptoms (0.5) ed (%) (1.1)[0.3-1.1] Headache: asthma N=1437 [95%CI]: ed persistent, or 12 (0.6) 7 (0.4) exacerbatio diagnoses: N=1437 new, or returning Symptoms Non-Seizures: 1 n: 8 (0.4) 7 (0.4) Ophthalm Symptoms [0.3-1.1] (n %): hospitalis ologic Skin symptoms (0.1)Other (n %): condition or health Fatigue or ed respiratory Nonand/or Muscle, Non-N=1437 weakness: symptoms hospitalis or rash, n problems otolaryng joint, or hospitalis

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	that may have been associated		21 (1.1) Fever: 9 (0.5)	Symptoms (n %):	Non- hospitalis ed	or diagnoses: 12 (0.6)		ed N=1437	ologic, n (%) [95%CI]:	body pain: 3 (0.2)	ed N=1437	(%) [95%CI]: 9 (0.6)
	with the illness		Other	Chest pain: 3 (0.2)	N=1437	Non-		Symptoms (n %):	4 (0.2) [0.1-0.5]	Hospitalis ed N=447	Symptoms (n %):	[0.3-1.2]
	prompting the initial ED		symptoms or diagnoses,	Cardiovas cular, n	Symptoms (n %): Mental	hospitalis ed N=1437		Anxiety: 3 (0.2) Depression:	Non- hospitalis	Symptoms (n %):	Anorexia, loss of appetite: 7	Hospitalis ed N=447
	evaluation. Post–		n (%) [95%CI]:	(%) [95%CI]:	'fuzziness', loss of	Symptoms		3 (0.2) Other	ed N=1437	Muscle, joint, or	(0.5)	Skin condition
	COVID-19 conditions were not		12 (0.6) [0.3-1.1]	3 (0.2) [0- 0.6]	focus: 3 (0.2) Dizziness or	(n %): Cough: 9 (0.6)		psychologic al symptoms	Symptoms (n %):	body pain: 1 (0.2)	Gastrointe stinal, n (%)	or rash, n (%) [95%CI]:
	present if the		Non- hospitalis ed	Hospitalis ed N=447	lightheaded : 2 (0.1) Headache:	Difficulty breathing, short of		or diagnoses:	Runny nose or		[95%CI]: 4 (0.3)	1 (0.2) [0- 1.2]
	caregiver indicated that these		N=1437	Cardiovas cular, n	3 (0.2)	breath: 10 (0.7)		3 (0.1) Hospitalis	congestion: 4 (0.3) Loss of		[0.1-0.7] Hospitalis	
	symptoms were neither		Number of persistent , new or	(%) [95%CI]: 9 (2.0)	Hospitalis ed N=447	Wheeze or asthma exacerbatio		ed N=447 Symptoms	smell or taste: 7 (0.5)		ed N=447 Gastrointe	
	persistent (i.e.,		, recurring health	[0.9-3.8]	Symptoms (n %):	n: 7 (0.5) Other		(n %): Anxiety: 4	Ophthalm		stinal, n (%)	
	recovered completely prior to 90		problem (n %): 1: 37 (2.6)		Mental `fuzziness', loss of	respiratory symptoms or		(0.9) Depression: 3 (0.7)	ologic and/or otolaryng		[95%CI]: 8 (1.8) [0.8-3.5]	
	days) nor novel (i.e., underlying		2: 17 (1.2) 3+: 12 (0.8)		focus: 1 (0.2) Headache:	diagnoses: 5 (0.4)		Other psychologic al	ologic, n (%) [95%CI]:			
	condition		Symptoms		4 (0.9) Seizures: 1	Hospitalis ed N=447		symptoms or	2 (0.1) [0- 0.5]			
	exacerbatio n). Post– COVID-19		(n %): Fatigue or weakness:		(0.2)	Symptoms (n %):		diagnoses: 4 (0.9)	Hospitalis ed N=447			
	conditions were		14 (1.0) Fever: 7			Cough: 4 (0.9)			Symptoms			
	classified as cardiovascu lar,		(0.5) Other			Difficulty breathing, short of			(n %): Runny nose or			
	dermatologi c,		symptoms or			breath: 3 (0.7)			congestion: 2 (0.5)			

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	ophthalmol		diagnoses,			Wheeze or			Loss of			
	ogic or		n (%)			asthma			smell or			
	otolaryngol		[95%CI]:			exacerbatio			taste: 2			
	ogic,		6 (0.4)			n: 1 (0.2)			(0.5)			
	gastrointest		[0.2-0.9]			Other						
	inal,					respiratory			Ophthalm			
	neurologic,		Hospitalis			symptoms			ologic			
	psychologic		ed N=447			or			and/or			
	al,					diagnoses:			otolaryng			
	respiratory,		Number of			7 (1.6)			ologic, n			
	systemic		persistent						(%)			
	(e.g.,		, new or						[95%CI]: 2 (0.5)			
	fatigue, weakness,		recurring health						[0.1-1.6]			
	fever,		problem						[0.1-1.0]			
	anorexia),		(n %):									
	or other.		1: 28 (6.3)									
	Caregivers		2: 8 (1.8)									
	could		3+: 8 (1.8)									
	indicate the											
	presence of		Symptoms									
	PCCs using		(n %):									
	check		Fatigue or									
	boxes or		weakness:									
	free text.		7 (1.6)									
	The PCC		Fever: 2									
	term also		(0.5)									
	reflected											
	health		Other									
	problems		symptoms									
	reported by children		or									
	who tested		diagnoses, n (%)									
	negative, to		n (%) [95%CI]:									
	permit		6 (1.3)									
	comparison		[0.5-2.9]									
	s.		[0.5 2.5]									

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	Online		0-3 years	0-3 years	Age 4 -11	0-3 years		0-3 years	Age 4 -11	0-3 years	0-3 years	0-3 years
	questionnai		(Cases n	(Cases n	years	(Cases n		(Cases n	years	(Cases n	(Cases n	(Cases n
	re		= 1194,	= 1194,	(Cases n	= 1194,		= 1194,	(Cases n	= 1194,	= 1194,	= 1194,
			Controls N	Controls N	= 5023,	Controls N		Controls N	= 5023,	Controls N	Controls N	Controls
	Validated		= 3855)	= 3855)	Controls N	= 3855)		= 3855)	Controls N	= 3855)	= 3855)	N = 3855)
	scales:		(n/N %)	(n/N %)	= 18372)	(n/N %)		(n/N %)	= 18372)	(n/N %)	(n/N %)	(n/N %)
	Children's		Fatigue:	Trouble	(n/N %)	Cough:		Mood	(n/N %)	Pain in	Nausea:	Rashes:
	Somatic		41/1194	breathing:	Headache:	77/1194		swings:	Sore throat:	muscles or	5/1194	53/1194
	Symptoms		(3.4%);	18/1194	126/5023	(6.4%);		73/1194	29/5023	joints:	(0.4%); 1–	(4.4%);
	Inventory		36/3855	(1.5%);	(2.5%);	55/3855		(6.1%);	(0.6%);	5/1194	4/3855	104/3855
	(CSSI-24)		(0.9%)	12/3855	299/18372	(1.4%)		146/3855	24/18372	(0.4%);	Stomach	(2.7%)
	Pediatric		Fever:	(0.3%)	(1.6%)			(3.8%)	(0.1%)	7/3855	aches:	Dark circles
	Quality of		22/1194		Trouble	0-3 years			Dizziness:	(0.2%)	40/1194	under eyes:
	Life		(1.8%);	Age 4 -11	rememberin	(Often		0-3 years	12/5023		(3.4%);	17/1194
	Inventory		13/3855	years	g and	and		(Often	(0.2%);	Age 4 -11	53/3855	(1.4%);
	(PedsQL)		(0.3%)	(Cases n	concentrati	always		and	13/18372	years	(1.4%)	9/3855
			Cold hands	= 5023,	ng:	results		always	(0.1%)	(Cases n	Loss of	(0.2%)
	Un-		or feet:	Controls N	176/5023	<u>></u> n=5)		results	Chapped	= 5023,	appetite:	Extreme
	validated		14/1194	= 18372)	(3.5%);	At least 2		<u>></u> n=5)	lips:	Controls N	49/1194	paleness:
Kikkenborg	questionn		(1.2%);	(n/N %)	760/18372	months		At least 2	57/5023	= 18372)	(4.1%);	6/1194
Berg et	aires:		12/3855	Chest pain:	(4.1%)	n=1,349,		months	(1.1%);	(n/N %)	42/3855	(0.5%);
al. ⁽⁶⁴⁾	Ancillary		(0.3%)	10/5023	Light	At least 3		n=1,349,	184/18372	Pain in	(1.1%)	5/3855
	questions			(0.2%);	sensitivity:	months		At least 3	(1.0%)	muscles or		(0.1%)
	about long		0-3 years	14/18372	48/5023	n=1,194,		months	Dizziness	joints:	0-3 years	
	COVID		(Often	(0.1%)	(1.0%);	At least 6		n=1,194,	when	72/5023	(Often	0-3 years
	symptoms		and	Trouble	152/18372	months		At least 6	standing:	(1.4%);	and	(Often
	included		always	breathing:	(0.8%)	(n=899):		months	7/5023	199/18372	always	and
	the 23 most		results	31/5023		n (%)		(n=899):	(0.1%);	(1.1%)	results	always
	common		<u>></u> n=5)	(0.6%);	4-11 years	Trouble		n (%)	13/18372		<u>></u> n=5)	results
	symptoms		At least 2	46/18372	(Often	breathing:		Mood	(0.1%)	4-11 years	At least 2	<u>></u> n=5)
	identified		months	(0.3%)	and	13 (1.0), 12		swings: 34		(Often	months	At least 2
	from the		n=1,349,	Palpitations	always	(1.0)		(2.5), 29	4-11 years	and	n=1,349,	months
	Long		At least 3	: 12/5023	results	Cough: 54		(2.4), 12	(Often	always	At least 3	n=1,349,
	COVID Kids		months	(0.2%);	<u>></u> n=5)	(4.0), 42		(1.3)	and	results	months	At least 3
	Rapid		n=1,194,	21/18372	At least 2	(3.5), 23			always	<u>></u> n=5)	n=1,194,	months
	Survey		At least 6	(0.1%)	months	(2.6)		Age 4 -11	results	At least 2	At least 6	n=1,194,
	January		months		n=5,692,			years	<u>></u> n=5)	months	months	At least 6
	2021		(n=899):	4-11 years	At least 3	Age 4 -11		(Cases n	At least 2	n=5,692,	(n=899):	months
			n (%)	(Often	months	years		= 5023,	months	At least 3	n (%)	(n=899):
	Questions		Fatigue: 37	and	n=5,023,	(Cases n		Controls N	n=5,692,	months	Stomach	n (%)
	were		(2.7), 30	always	At least 6	= 5023,			At least 3	n=5,023,	aches: 22	

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	included		(2.5), 15	results	months	Controls N		= 18372)	months	At least 6	(1.6), 16	Rashes: 23
	about sick		(1.7)	<u>></u> n=5)	n=3614: n	= 18372)		(n/N %)	n=5,023,	months	(1.3), 5	(1.7), 20
	leave and		Fever: 16	At least 2	(%)	(n/N %)		Mood	At least 6	n=3614: n	(0.6)	(1.7), 10
	absence		(1.2), 14	months	Headache:	Cough:		swings:	months	(%)	Loss of	(1.1)
	from day		(1.2), 9	n=5,692,	88 (1.5), 76	61/5023		263/5023	n=3614: n	Pain in	appetite: 21	Dark circles
	care or		(1.0)	At least 3	(1.5), 53	(1.2%);		(5.2%);	(%)	muscles/joi	(1.6), 16	under the
	school		Cold	months	(1.5)	119/18372		1332/18372	Sore throat:	nts: 52	(1.3), 7	eyes: (0.8),
	within the		hands/feet:	n=5,023,	Trouble	(0.6%)		(7.3%)	24 (0.4), 19	(0.9), 45	(0.8)	10 (0.8), 7
	past year		5 (0.4), <5,	At least 6	rememberin				(0.4), 14	(0.9), 30		(0.8)
	and height		<5	months	g and	4-11 years		4-11 years	(0.4)	(0.8)	Age 4 -11	
	and weight.			n=3614: n	concentrati	(Often		(Often	Dizziness:		years	Age 4 -11
	The WHO		Age 4 -11	(%)	ng: 53	and		and	14 (0.2), 9	Age 12 -	(Cases n	years
	classificatio		years	Chest pain:	(0.9), 49	always		always	(0.2), 5	14 years	= 5023,	(Cases n
	n of weight		(Cases n	10 (0.2), 5	(1.0), 34	results		results	(0.1)	(Cases n	Controls N	= 5023,
	status in		= 5023,	(0.1), <5	(0.9)	<u>></u> n=5)		<u>></u> n=5)		= 2857,	= 18372)	Controls
	children		Controls N	Palpitations	Dizziness	At least 2		At least 2	Age 12 -	Controls N	(n/N %)	N =
	and		= 18372)	: 11 (0.2),	when	months		months	14 years	= 10789)	Stomach	18372)
	adolescents		(n/N %)	7 (0.1), 5	standing: 8	n=5,692,		n=5,692,	(Cases n	(n/N %)	aches:	(n/N %)
	was used		Fatigue:	(0.1)	(0.1), 6	At least 3		At least 3	= 2857,	Pain in	125/5023	Rashes:
			194/5023		(0.2), 6	months		months	Controls N	muscles or	(2.5%);	94/5023
			(3.9%);	Age 12 -	(0.2)	n=5,023,		n=5,023,	= 10789)	joints:	477/18372	(1.9%);
			418/18372	14 years	Light	At least 6		At least 6	(n/N %)	82/2857	(2.6%)	536/18372
			(2.3%)	(Cases n	sensitivity:	months		months	Sore throat:	(2.9%);	Nausea:	(2.9%)
			Fever:	= 2857,	18 (0.3), 16	n=3614: n		n=3614: n	30/2857	218/10789	39/5023	Dark circles
			9/5023	Controls N	(0.3), 9	(%)		(%)	(1.1%);	(2.0%)	(0.8%);	under eyes:
			(0.2%);	= 10789)	(0.2)	Trouble		Mood	20/10789		112/18372	87/5023
			9/18372	(n/N %)		breathing:		swings: 95	(0.2%)	12-14	(0.6%)	(1.7%);
			(<0.1)	Chest pain:	Age 12 -	24 (0.4), 21		(1.7), 86	Loss of	years	Loss of	214/18372
			Cold hands	23/2857	14 years	(0.4), 11		(1.7), 54	appetite:	(Often	appetite:	(1.2%)
			or feet:	(0.8%);	(Cases n	(0.3)		(1.5)	93/2857	and	105/5023	Extreme
			32/5023	25/10789	= 2857,	Cough: 43			(3.3%);	always	(2.1%);	paleness:
			(0.6%);	(0.2%)	Controls N	(0.8), 34		Age 12 -	288/10789	results	278/18372	17/5023
			101/18372	Palpitations	= 10789)	(0.7), 19		14 years	(2.7%)	<u>></u> n=5)	(1.5%)	(0.3%);
			(0.5%)	: 19/2857	(n/N %)	(0.5)		(Cases n	Dizziness	At least 2		57/18372
			Discoloured	(0.7%);	Headache:			= 2857,	when	months	4-11 years	(0.3%)
			fingers or	41/10789	142/2857	Age 12 -		Controls N	standing:	n=3,281,	(Often	
			toes: 1-	(0.4%)	(5.0%);	14 years		= 10789)	50/2857	At least 3	and	4-11
			4/5023;		346/10789	(Cases n		(n/N %)	(1.8%);	months	always	years
			6/18372	12-14	(3.2%)	= 2857,		Mood	94/10789	n=2,857,	results	(Often
			(0.0%)	years	Dizziness:	Controls N		swings:	(0.9%)	At least 6	<u>></u> n=5)	and
				(Often	50/2857			230/2857		months		always

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
			4-11 years (Often and always results ≥n=5) At least 2 months n=5,692, At least 3 months n=5,023, At least 6 months n=3614: n (%) Fatigue: 173 (3.0), 133 (2.6), 79 (2.2) Fever: 7 (0.1), <5, <5 Cold hands/feet: 10 (0.2), 8 (0.2) Age 12 - 14 years (Cases n = 2857, Controls N = 10789) (n/N %)	Symptoms and always results \geq n=5) At least 2 months n=3,281, At least 3 months n=2,857, At least 6 months n=2367 n (%) Chest pain: 20 (0.6), 16 (0.6), 37 (1.6) Palpitations : 15 (0.5), 10 (0.4)	(1.8%); 83/10789 (0.8%) Trouble rememberin g and concentrati ng: 170/2857 (6.0%); 697/10789 (6.5%) Light sensitivity: 29/2857 (1.0%); 146/10789 (1.4%) 12-14 years (Often and always results ≥n=5) At least 2 months n=3,281, At least 3 months n=2,857, At least 6 months n=2367 n (%)	= 10789) (n/N %) Trouble breathing: 37/2857 (1.3%); 48/10789 (0.4%) Cough: 22/2857 (0.8%); 33/10789 (0.3%) 12-14 years (Often and always results ≥n=5) At least 2 months n=3,281, At least 3 months n=2,857, At least 6 months n=2367 n (%) Trouble breathing: 31 (0.9), 26 (0.9), 16 (0.7)	-			Symptoms n=2367 n (%) Pain in muscles/joi nts: 52 (1.6), 48 (1.7), 34 (1.4)	At least 2 months n=5,692, At least 3 months n=5,023, At least 6 months n=3614: n (%) Stomach aches: 84 (1.5), 72 (1.4), 45 (1.2) Nausea: 28 (0.5), 20 (0.4), 14 (0.4) Loss of appetite: 75 (1.3), 61 (1.2), 34 (0.9) Age 12 - 14 years (Cases n = 2857, Controls N = 10789) (n/N %) Stomach aches: 60/2857 (2.1%);	s results ≥n=5) At least 2 months n=5,692, At least 3 months n=5,023, At least 6 months n=3614: n (%) Rashes: 34 (0.6), 24 (0.5), 16 (0.4) Dark circles under the eyes: 44 (0.8), 38 (0.8), 25 (0.7) Chapped lips: 22 (0.4), 21 (0.4), 17 (0.5) Extreme paleness: 10 (0.2), 7 (0.1), <5 Age 12 - 14 years (Cases n = 2857,
			Fatigue: 285/2857 (10.0%); 807/10 789 (7.5%)		Headache: 83 (2.5), 72 (2.5), 107 (4.5)	Cough: 18 (0.5), 14 (0.5), 8 (0.3)					244/10789 (2.3%) Nausea: 38/2857 (1.3%);	Controls N = 10789) (n/N %)

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			Fever: 1- 4/2857; 5/10789 (0.1%) Cold hands or feet: 79/2857 (2.8%); 272/10789 (2.5%) Discoloured fingers or toes: 1- 4/2857; 10/10789 (0.1%) 12-14 years (0ften and always results $\geq n=5$) At least 2 months n=3,281, At least 3 months n=2,857, At least 6 months n=2367 n (%) Fatigue: 210 (6.4), 135 (6.5), 135 (5.7) Fever: 5 (0.2), <5, <5		Dizziness: 37 (1.1), 32 (1.1), 26 (1.1) Trouble rememberin g and concentrati ng: 68 (2.1), 61 (2.1), 52 (2.2)						118/10789 (1.1%) 12-14 years (Often and always results \geq n=5) At least 2 months n=3,281, At least 3 months n=2,857, At least 6 months n=2367 n (%) Stomach aches: 30 (0.9), 30 (1.1), 44 (1.9) Nausea: 29 (0.9), 24 (0.8), 19 (0.8) Loss of appetite: 83 (2.5), 77 (2.7), 48 (2.0)	Rashes: 81/2857 (2.8%); 293/10789 (2.7%) Dark circles under eyes: 63/2857 (2.2%); 195/10789 (1.8%) Chapped lips: 59/2857 (2.1%); 178/10789 (1.6%) Extreme paleness: 17/2857 (0.6%); 78/10789 (0.7%) 12-14 years (Often and always results ≥n=5) At least 2 months n=3,281, At least 3 months n=2,857, At least 6 months n=2367 n (%)

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
			Cold hands/feet: 25 (0.8), 23 (0.8), 21 (0.9) Light sensitivity: 18 (0.5), 17 (0.6), 11 (0.5)									Rashes: 21 (0.6), 18 (0.6), 10 (0.4) Dark circles under the eyes: 22 (0.7), 21 (0.7), 15 (0.6) Chapped lips: 19 (0.6), 13 (0.5), 13 (0.5), 13 (0.5), 7 (0.3)
	Online questionnai re		Long COVID symptoms	Long COVID symptoms	Long COVID symptoms	Long COVID symptoms		Long COVID symptoms	Long COVID symptoms	Long COVID symptoms	Long COVID symptoms	Long COVID symptoms
Kikkenborg Berg et al. (88)			At least 2 months (n=5978) Fatigue: 661 (11.1%) Fever: 5 (0.1%) Cold hands or feet: 61 (1%) At least 3 months (n=5106)	At least 2 months (n=5978) Chest pain: 85 (1.4%) Palpitations : 82 (1.4%) At least 3 months (n=5106) Chest pain: 70 (1.4%) Palpitations : 69 (1.4%)	At least 2 months (n=5978) Headache: 259 (4.3%) Trouble rememberin g and concentrati ng: 335 (5.6%) Dizziness: 122 (2.0%) Dizziness when	At least 2 months (n=5978) Cough: 72 (1.2%) Trouble breathing: 219 (3.7%) At least 3 months (n=5106) Cough: 52 (1.0%)		At least 2 months (n=5978) Mood swings: 144 (2.4%) At least 3 months (n=5106) Mood swings: 121 (2.4%)	At least 2 months (n=5978) Sore throat: 49 (0.8%) At least 3 months (n=5106) Sore throat: 37 (0.7%) At least 6 months (n=4250)	At least 2 months (n=5978) Pain in muscles or joints: 102 (1.7%) At least 3 months (n=5106) Pain in muscles or joints: 89 (1.7%)	At least 2 months (n=5978) Nausea: 110 (1.8%) Stomach ache: 66 (1.1%) Loss of appetite: 298 (5.0%) At least 3 months (n=5106)	At least 2 months (n=5978) Rashes: 41 (0.7%) Dark circles under eyes: 113 (1.9%) Extreme paleness: 10 (0.2%) Chapped lips: 92 (1.5%) Discoloured

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			Fatigue: 547 (10.7%) Cold hands or feet: 56 (1.1%) At least 6 months (n=4250) Fatigue: 380 (8.9%) Cold hands or feet: 38 (0.9%) At least 9 months (n=1085) Fatigue: 81 (7.5%) Cold hands or feet: 12 (1.1%) At least 12 months (n=242) Fatigue: 8 (3.3)	At least 6 months (n=4250) Chest pain: 43 (1.0%) Palpitations : 49 (1.2%) At least 9 months (n=1085) Chest pain: 10 (0.9%) Palpitations : 13 (1.2%)	standing: 160 (2.7%) Light sensitivity: 62 (1.0%) At least 3 months (n=5106) Headache: 212 (4.2%) Trouble rememberin g and concentrati ng: 300 (5.9%) Dizziness: 97 (1.9%) Dizziness when standing: 135 (2.6%) Light sensitivity: 52 (1.0%) At least 6 months (n=4250) Headache: 141 (3.3%) Trouble rememberin g and concentrati ng: 221 (5.2%)	Trouble breathing: 183 (3.6%) At least 6 months (n=4250) Cough: 35 (0.8%) Trouble breathing: 122 (2.9%) At least 9 months (n=1085) Trouble breathing: 27 (2.5%)		At least 6 months (n=4250) Mood swings: 82 (1.9%) At least 9 months (n=1085) Mood swings: 13 (1.2%)	Sore throat: 22 (0.5%) At least 9 months (n=1085) Sore throat: 5 (0.5%)	At least 6 months (n=4250) Pain in muscles or joints: 59 (1.4%) At least 9 months (n=1085) Pain in muscles or joints: 14 (1.3%)	Nausea: 81 (1.6%) Stomach ache: 55 (1.1%) Loss of appetite: 230 (4.5%) At least 6 months (n=4250) Nausea: 48 (1.1%) Stomach ache: 29 (0.7%) Loss of appetite: 137 (3.2%) At least 9 months (n=1085) Nausea: 14 (1.3%) Loss of appetite: 24 (2.2%)	fingers or toes: 7 (0.1%) At least 3 months (n=5106) Rashes: 34 (0.7%) Dark circles under eyes: 91 (1.8%) Extreme paleness: 8 (0.2%) Chapped lips: 80 (1.6%) Discoloured fingers or toes: 7 (0.1%) At least 6 months (n=4250) Rashes: 19 (0.4%) Dark circles under eyes: 66 (1.6%) Extreme paleness: 6 (0.1%) Chapped lips: 53 (1.2%) Discoloured fingers or

	conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
				Dizziness:							toes: 5
				60 (1.4%)							(0.1%)
				Dizziness when							At least 9
				standing:							months
				93 (2.2%)							(n=1085) Rashes: 5
				Light							(0.5%)
				sensitivity: 33 (0.8%)							Dark circles
				33 (0.8%)							under eyes:
				At least 9							13 (1.2%) Chapped
				months							lips: 11
				(n=1085) Headache:							(1.0%)
				28 (2.6%)							
				Trouble							
				rememberin							
				g and concentrati							
				ng: 53							
				(4.9%)							
				Dizziness:							
				13 (1.2%) Dizziness							
				when							
				standing:							
				20 (1.8%)							
				Light sensitivity:							
				11 (1.0%)							
				(1.0 /0)							
				At least							
				12 months $(n-242)$							
				(n=242) Headache:							
				5 (2.1%)							
				Trouble							
				rememberin g and							

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
			All cases/all controls At least 2 months (Cases n = 5,106, Controls N = 21,640) (n/N %) Fatigue: 1057 (20.7); 4249 (19.6) Fever: 10 (0.2); 27(0.1) Cold hands or	All cases/all controls At least 2 months (Cases n = 5,106, Controls N = 21,640) (n/N %) Chest pain: 125(2.5); 384 (1.8) P value <0.05 Palpitatio ns: 155 (3.0); 632 (2.9) At least 6	concentrati ng: 8 (3.3%) All cases/all controls At least 2 months (Cases n =5,106, Controls N = 21,640) (n/N %) Headache: 610 (12.0); 2166 (10.0) P value <0.0001 Trouble remember ing or concentra ting: 616 (12.1); 2636 (12.2)	All cases/all controls At least 2 months (Cases n = 5,106, Controls N = 21,640) (n/N %) Cough: 99 (1.9); 245 (1.1) P value <0.0001 Trouble breathing: 273 (5.4); 444 (2.1) P value <0.0001				All cases/all controls At least 2 months (Cases n = 5,106, Controls N = 21,640) (n/N %) Pain in muscles or joints: 163 (3.2); 633 (2.9) At least 6 months: (Cases n = 4,250, Controls N = 16,257)	All cases/all controls At least 2 months (Cases n = 5,106, Controls N = 21,640) (n/N %) Nausea: 179 (3.5); 692 (3.2) Stomach ache: 119 (2.3); 626 (2.9) P value <0.05 Loss of appetite: 403 (7.9);	
			feet: 406 (8.0); 2064 (9.5) P value: <0.001	months: (Cases n =4,250, Controls N = 16,257) (n/N %)	Dizziness: 220 (4.3); 696 (3.2) P value <0.001	At least 6 months: (Cases n =4,250, Controls N		Controls N = 16,257) (n/N %) Mood swings: 390	= 16,257) (n/N %) Sore throat: 39 (0.9); 80	(n/N %) Pain in muscles or joints: 110 (2.6); 388 (2.4)	1498 (6.9) P value <0.05 At least 6 months:	<0.0001 Extreme paleness: 32 (0.6); 220 (1.0) P

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
			Discoloure		Dizziness	= 16,257)		(9.2);1646((0.5) P		(Cases n	value
			d fingers		when	(n/N %)		10.1)	value < 0.05		=4,250,	<0.05
			or toes: 16	Chest	standing:						Controls N	
			(0.3); 111	pain:		Cough: 62					= 16,257)	Chapped
			(0.5)	77(1.8);	348 (6.8);	(1.5); 116					(n/N %)	lips: 247
				216 (1.3) P	1387 (6.4)	(0.7) P						(4.8); 1355
			At least 6	value <0.05		value					Nausea:	(6.3) P
			months:		Light	< 0.0001					108 (2.5);	value
				Palpitatio	sensitivity						372 (2.3)	<0.001
			(Cases n	ns:	: 175 (3.4);	Trouble						
			=4,250,	104(2.4);	885 (4.1)	breathing:					Stomach	Discoloured
			Controls N	362 (2.2)	P value	177 (4.2);					ache: 74	fingers or
			= 16,257)		<0.05	281 (1.7) P					(1.7); 367	toes: 16
			(n/N %)			value					(2.3) P	(0.3); 111
					At least 6	<0.0001					value < 0.05	(0.5)
			Fatigue:		months:							
			694 (16.3);		10						Loss of	At least 6
			2395 (14.7)		(Cases n						appetite:	months:
			P value		=4,250,						229 (5.4);	(0
			<0.05		Controls N						719 (4.4) P	(Cases n
			E		= 16,257)						value <	=4,250,
			Fever:1-4;		(n/N %)						0.05	Controls
			19(0.1)		Headache:							N =
			Cold hands		419 (9.9);							16,257)
			or feet: 300									(n/N %)
			(7.1); 1321		1261 (7.8) P value							Rashes:
			(7.1), 1321 (8.1)P value		< 0.0001							26 (2.4);
			<0.05		<0.0001							
			<0.05		Trouble							288 (2.7)
					remember							Dark circles
					ing or							under the
					concentra							eyes: 338
					ting: 457							(8.0); 1657
					ung . 737							(10.2) P
												(10.2)

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
					(10.8); 1706 (10.5)							value <0.0001
					Dizziness: 130 (3.1); 386 (2.4) P value <0.05 Dizziness							Extreme paleness: 21 (0.5); 150 (0.9) P value
					when standing: 239 (5.6); 821 (5.1) Light sensitivity:							<0.05 Chapped lips: 162 (3.8); 756 (4.7) P value < 0.05
					118 (2.8); 578 (3.6) <0.05							Discoloured fingers or toes: 12(0.3); 63 (0.4)
Miller et al. ⁽⁵¹⁾	Online questionnai re Persistent symptoms were defined using data		General: 34/109 (31.19%) Other: 9/109 (8.26%)	Cardiovascu lar: 11/109 (10.09%)	Neurologica I: 20/109 (18.35%)	Respiratory: 24/109 (22.02%)		Psychiatric: 11/109 (10.09%)	ENT: 23/109 (21.10%)	Muscular: 13/109 (11.92%)	Gastrointest inal: 15/109 (13.76%)	Dermatolog ical: 14/109 (12.84%)

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	from weekly											
	surveys											
	Validated		Number of									
	questionnai		symptoms									
	re		:									
	The		0: Total									
	questionnai		population:									
	re included		2968									
	demographi		(41.57%),									
	C		SARS-CoV-2									
	characteristi		negative: 1848									
	cs, elements of		(47.47%),									
	the		SARS-CoV-2									
	Internation		positive:									
	al Severe		1120									
	Acute		(34.50%)									
	Respiratory		1–4: Total									
	and		population:									
	emerging		3496									
Nugawela et al. ⁽⁸⁶⁾	Infection		(48.97%),									
et al.	Consortium (ISARIC)		SARS-CoV-2 negative:									
	Paediatric		1798									
	COVID-19		(46.19%),									
	follow-up		SARS-CoV-2									
	questionnai		positive:									
	re and the		1698									
	recent		(52.31%)									
	Mental		5+: Total									
	Health of		population:									
	Children and Young		675 (9.46%)									
	people in		(9.46%), SARS-CoV-2									
	England		negative:									
	surveys.		247									
	Quality of		(6.34%),									
	life/function		SARS-CoV-2									
	ing before		positive:									
	testing was											

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	measured		428									
	via the EQ-		(13.19%)									
	5D-Y scale,											
	and feelings											
	loneliness											
	by the											
	UCLA											
	Loneliness											
	scale.											
	Telephone		6 month	6 month	6 month	6 month			6 month	6 month	6 month	6 month
	questionnai		follow up	follow up	follow up	follow up			follow up	follow up	follow up	follow up
	re		Fatigue	Cardiovascu	Neurologica	Respiratory			Sensory	Musculoskel	Gastrointest	Dermatolog
	Tier 1 ISARIC		Adults:	lar Adults:	I Adults:	Adults:			Adults:	etal Adults:	inal Adults:	ical Adults:
	Long-term		252/1013 (24.88%);	63/1013	192/1013	223/1013 (22.01%);			36/1013 (3.55%);	87/1013	63/1013	132/1013
	Follow-up		95% CI:	(6.22%);	(18.95%);	95% CI:			95% CI:	(8.59%);	(6.22%);	(13.03%);
	Study CRF		22.21% to	95% CI:	95% CI:	19.45% to			2.47% to	95% CI:	95% CI:	95% CI:
	for adult		27.54%	4.74% to	16.49% to	24.68%			4.74%	6.91% to	4.84% to	11.06% to
	patients		Children:	7.7%	21.32%	Children:			Children:	10.37%	7.8%	15.1%
	- Version 1		34/360	Children:	Children:	7/360			3/360	Children:	Children:	Children:
	of the		(9.44%);	4/360	15/360	(1.94%);			(0.83%);	6/360	14/360	17/360
	ISARIC		95% CI:	(1.11%);	(4.17%);	95% CI:			95% CI:	(1.67%);	(3.89%);	(4.72%);
	COVID-19		6.39% to	95% CI:	95% CI:	0.56% to			0% to	95% CI:	95% CI:	95% CI:
Pazukhina	Health and		12.5%	0.28% to	2.22% to	3.61%			1.94%	0.56% to	1.94% to	2.78% to
et al. ⁽⁶⁶⁾	Wellbeing Follow Up		12 month	2.22% 12 month	6.39%	12 month follow up			12 month	3.06% 12 month	6.11% 12 month	6.94%
	Survey for		follow up	follow up	Sleep	Respiratory			follow up	follow up	follow up	12 month
	Children for		Fatigue	Cardiovascu	Problems	Adults:			Sensory	Musculoskel	Gastrointest	follow up
	paediatric		Adults:	lar	Adults:	96/1013			Adults:	etal	inal	Dermatolog
	patients		122/1013	Adults:	106/1013	(9.48%);			18/1013	Adults:	Adults:	ical
	Both		(12.04%);	12/1013	(10.46%);	95% CI:			(1.78%);	31/1013	13/1013	Adults:
	developed		95% CI:	(1.18%);	95% CI:	7.7% to			95% CI:	(3.06%);	(1.28%);	36/1013
	by the		10.07% to	95%CI:	8.59% to	11.25%			0.99% to	95% CI:	95% CI:	(3.55%);
	ISARIC		14.02%	0.59% to	12.34%	Children:			2.67%	2.07% to	0.59% to	95% CI:
	Global		Children:	1.88%	Children:	4/360			Children:	4.15%	1.97%	2.47% to
	COVID-19		13/360	Children: 1/360	15/360	(1.11%); 95% CI:			1/360	Children:	Children:	4.74% Children:
	follow-up working		(3.61%); 95% CI:	(0.28%);	(4.17%); 95% CI:	95% CI: 0.28% to			(0.28%-); 95% CI:	3/360 (0.83%);	2/360 (0.56%);	7/360
	group and		1.94% to	(0.28%); 95% CI:	2.22% to	2.22%			0% 0.83%	(0.83%); 95% CI:	(0.36%); 95% CI:	(1.94%);
	independen		5.56%	<i>55 /6</i> CI.	6.39%				5 /0 0.05 /0	<i>55 /6</i> CI.	<i>55 /6</i> CI.	95% CI:

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	tly forward and backward translated into Russian. These follow-up assessment s evaluated patients' physical and mental health status and assessed for any newly developed symptoms between hospital discharge and the follow-up assessment , including symptom onset and duration.			0% to 0.83%	12 month follow up Neurologica I Adults: 90/1013 (8.88%); 95% CI: 7.21% to 10.56% Children: 6/360 (1.67%); 95% CI: 0.56% to 3.06% Sleep Problems Adults: 36/1013 (3.55%); 95% CI: 2.47% to 4.74% Children: 2/360 (0.56%); 95% CI: 0% to 1.39%					0% to 1.94%	0% to 1.39%	0.56% to 3.61%
Sørensen et al. ⁽⁵⁶⁾			<i>Previous</i> <i>COVID-19</i> <i>infection</i> <i>(female: n</i> <i>= 93,494;</i> <i>male: n =</i> <i>59,386)</i> <i>Symptoms</i> <i>6-12</i>	<i>Previous</i> <i>COVID-19</i> <i>infection</i> <i>(female: n</i> <i>= 93,494;</i> <i>male: n =</i> <i>59,386)</i> <i>Symptoms</i> <i>6-12</i>	Previous COVID-19 infection (female: n = 93,494; male: n = 59,386) Symptoms 6-12	<i>Previous</i> <i>COVID-19</i> <i>infection</i> <i>(female: n</i> <i>= 93,494;</i> <i>male: n =</i> <i>59,386)</i> <i>Symptoms</i> <i>6-12</i>	19 infection (female: n = 93,494; male: n = 59,386) Symptoms 6-12 months		<i>Previous</i> <i>COVID-19</i> <i>infection</i> <i>(female: n</i> <i>= 93,494;</i> <i>male: n =</i> <i>59,386)</i> <i>Symptoms</i> <i>6-12</i>	<i>Previous</i> <i>COVID-19</i> <i>infection</i> <i>(female: n</i> <i>= 93,494;</i> <i>male: n =</i> <i>59,386)</i> <i>Symptoms</i> <i>6-12</i>	<i>Previous</i> <i>COVID-19</i> <i>infection</i> <i>(female: n</i> <i>= 93,494;</i> <i>male: n =</i> <i>59,386)</i> <i>Symptoms</i> <i>6-12</i>	

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	Assessme	New onset	General	Cardiovas	Neurologi	Respirator	Autonomi	Psycholog	Ear, Nose	Musculosk	Gastrointe	Dermatol
Author	nt Mode	conditions	Symptoms	cular	C	У	c Nervous	ical/Psych	and	eletal	stinal	ogic
				Symptoms	Symptoms	Symptoms	System	iatric	Throat	Symptoms	Symptoms	Symptom
							Symptoms	Symptoms	Symptoms			S
			months	months	months	months	after test, n		months	months	months	
			after test, n	after test, n	after test, n	after test, n	(%)		after test, n	after test, n	after test, n	
			(%)	(%)	(%)	(%)	60 - 69		(%)	(%)	(%)	
			60 - 69	60 - 69	60 - 69	60 - 69	years		60 - 69	60 - 69	60 - 69	
			years	years	years	years	Hot		years	years	years	
			Fatigue/exh	Chest pain:	Dizziness:	Dyspnea:	flushes/swe		Dysosmia:	Muscle/joint	Abdominal	
			austion:	female: 104	female: 164	female: 303	at: female:		female: 407	pain:	pain:	
			female: 525	(2.1); male:	(3.2); male:	(6.0); male:	152 (3.0);		(8.0); male:	female: 241	female: 98	
			(10.4);	87 (1.9)	108 (2.4)	235 (5.3)	male: 74		269 (6.0)	(4.8); male:	(1.9);	
			male: 359		Headache:	Cough:	(1.7)		Dysgeusia:	180 (4.0)	male: 44	
			(8.0)	70 + years	female: 241	female: 204			female: 348	Reduced	(1.0)	
			Chills:	Chest pain:	(4.8); male:	(4.0); male:	70 + years		(6.9); male:	strength	Diarrhoea:	
			female: 46	female: 24	146 (3.3)	117 (2.6)	Hot		221 (5.0)	legs/arms:	female: 74	
			(0.9); male:	(0.8); male:	Sleeping		flushes/swe		Runny	female: 315	(1.5); male:	
			43 (1.0)	33 (1.1)	legs/arms:	70 + years	at: female:		nose:	(6.2); male:	43 (1.0)	
			Fever:		female: 255	Dyspnea:	48 (1.7);		female: 157	234 (5.2)	Nausea:	
			female: 60	Negative	(5.0); male:	female: 76	male: 34		(3.1); male:		female: 72	
			(1.2);	COVID-19	167 (3.7)	(2.7); male:	(1.1)		107 (2.4)	70 + years	(1.4); male:	
			male: 53	test (time-		84 (2.8)			Sore throat:	Muscle/joint	30 (0.7)	
			(0.7)	matched	70 + years	Cough:	Negative		female: 138	pain:	Reduced	
			Red runny	control	Dizziness:	female: 89	COVID-19		(2.7); male:	female: 63	appetite:	
			eyes:	group)	female: 64	(3.2); male:	test (time-		65 (1.5)	(2.2); male:	female: 101	
			female: 59	(female: n	(2.3); male:	81 (2.7)	matched			73 (2.5)	(2.0); male:	
			(1.2); male:	= 93,494;	66 (2.2)		control		70 + years	Reduced	62 (1.4)	
			38 (0.9)	male: n =	Headache:	Negative	group)		Dysosmia:	strength		
				59,386)	female: 59	COVID-19	(female: n		female: 109	legs/arms:	70 + years	
			70 + years	Symptoms	(2.1); male:	test (time-	= 93,494;		(3.9); male:	female: 104	Abdominal	
			Fatigue/exh	6-12	41 (1.4)	matched	male: n =		91 (3.1)	(3.7); male:	pain:	
			austion:	months	Sleeping	control	59,386)		Dysgeusia:	129 (4.3)	female: 23	
			female: 149	after test, n	legs/arms:	group)	Symptoms		female: 114		(0.8); male:	
			(5.3); male:	(%)	female: 81	(female: n	6-12		(4.0); male:	Negative	19 (0.6)	
			146 (4.9)	60 - 69	(2.9); male:	= 93,494;	months		85 (2.9)	COVID-19	Diarrhoea:	
			Chills:	years	87 (2.9)	<i>male: n =</i>	after test, n		Runny	test (time-	female: 25	
			female: 22	Chest pain:		59,386)	(%)		nose:	matched	(0.9); male:	
			(0.8); male:	female: 68	Negative	Symptoms	60 - 69		female: 51	control	19 (0.6)	
			19 (0.6)	(0.6); male:	COVID-19	6-12	years		(1.8);	group)	Nausea:	
			Fever:	48 (0.6)	test (time-	months	Hot		male:48	(female: n	female: 31	
			female: 22		matched	after test, n	flushes/swe		(1.6)	= 93,494;	(1.1); male:	
			(0.8); male:	70+ years	control	(%)	at: female:		Sore throat:	male: n =	14 (0.5)	
			31 (1.0)	Chest pain:	group)	60 - 69	120 (1.1);		female: 43	59,386)	Reduced	
				female: 13	(female: n	years					appetite:	

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
			Red runny eyes: female: 20 (0.7); male: 21 (0.7) <i>Negative</i> <i>COVID-19</i> <i>test (time-</i> <i>matched</i> <i>control</i> <i>group)</i> (<i>female:</i> n = <i>93,494;</i> <i>male:</i> n = <i>59,386</i>) <i>Symptoms</i> <i>6-12</i> <i>months</i> <i>after test,</i> n (%) 60 - 69 years Fatigue/exh austion: female: 212 (1.9); male: 118 (1.5) Chills: female: 20 (0.4) Fever: female: 111 (1.0); male: 53 (0.7) Red runny eyes: female: 53	(0.2); male: 18 (0.3)	= 93,494; male: n = 59,386) Symptoms 6-12 months after test, n (%) 60 - 69 years Dizziness: female: 119 (1.1); male: 52 (0.7) Headache: female: 223 (2.0); male: 138 (1.8) Sleeping legs/arms: female: 109 (1.0); male: 68 (0.9) 70+ years Dizziness: female: 33 (0.6); male: 37 (0.7) Headache: female: 58 (1.1); male: 37 (0.7) Sleeping legs/arms: female: 35 (0.7); male: 38 (0.7)	Dyspnea: female: 68 (0.6); male: 49 (0.6) Cough: female: 316 (2.8); male: 196 (2.5) 70+ years Dyspnea: female: 22 (0.4); male: 20 (0.4)	male: 67 (0.9) 70+ years Hot flushes/swe at: female: 29 (0.5); male: 20 (0.4)		(1.5); male: 37 (1.2) <i>Negative</i> <i>COVID-19</i> <i>test (time-matched</i> <i>control</i> <i>group)</i> <i>(female: n</i> <i>= 93,494;</i> <i>male: n</i> <i>= 93,494;</i> <i>male: n</i> <i>= 93,494;</i> <i>male: n</i> <i>= 93,494;</i> <i>male: n</i> <i>= 59,386)</i> <i>Symptoms</i> <i>6-12</i> <i>months</i> <i>after test, n</i> <i>(%)</i> 60 - 69 years Dysosmia: female: 39 (0.3); male: 19 (0.2) Dysgeusia: female: 46 (0.4); male: 20 (0.3) Runny nose: female: 249 (2.2); male: 151 (1.9) Sore throat: female: 296 (2.7); male: 130 (1.7) 70+ years Dysosmia:	Symptoms 6-12 months after test, n (%) 60 - 69 years Muscle/joint pain: female: 113 (1.0); male: 87 (1.1) Reduced strength legs/arms: female: 75 (0.7); male: 56 (0.7) 70+ years Muscle/joint pain: female: 29 (0.5); male: 37 (0.7) Reduced strength legs/arms: female: 36 (0.7); male: 41 (0.7)	female: 70 (2.5); male: 55 (1.8) <i>Negative</i> <i>COVID-19</i> <i>test (time-matched</i> <i>control</i> <i>group)</i> (<i>female:</i> $n =$ <i>93,494;</i> <i>male:</i> $n =$ <i>59,386</i>) <i>Symptoms</i> <i>6-12</i> <i>months</i> <i>after test,</i> n (%) 60 - 69 years Abdominal pain: female: 107 (1.0); male: 107 (1.0); male: 107 (1.0); male: 107 (1.0); male: 107 (1.0); male: 107 (1.1); male: 107 (1.0); male: 108 (1.1); male: 108 (1.1); male: 108 (1.1); male: 108 (1.1); male: 29 (0.4) Reduced appetite: female: 90 (0.8); male: 35 (0.4)	

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator Y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
			(0.5); male: 41 (0.5) 70+ years Fatigue/exh austion: female: 52 (1.0); male: 51 (0.9) Chills: female: 17 (0.3); male: 12 (0.2) Fever: female: 19 (0.4); male: 14 (0.2) Red runny eyes: female: 15 (0.3); male:						(0.2); male: 10 (0.2) Dysgeusia: female: 15 (0.3); male: 8 (0.1) Runny nose: female: 71 (1.3); male: 85 (1.5) Sore throat: female: 80 (1.5); male: 50 (0.9)		Abdominal pain: female: 30 (0.6); male: 22 (0.4) Diarrhoea: female: 39 (0.7); male: 38 (0.7) Nausea: female: 25 (0.5); male: 16 (0.3) Reduced appetite: female: 33 (0.6); male: 28 (0.5)	
Trapani et al. ⁽³⁶⁾	Primary Care Paediatricia n - Online questionnai re during telephone consultation with parents, or directly in the clinic. Paediatricia n's collected information from the parents of every		18 (0.3) Primary Care (n = 629) Abnormal fatigue: 44 (7.0%) Other symptoms: 4 (0.6%) O-5 years (n = 202) Abnormal fatigue: 4 (2%) Other symptoms: 0	Primary Care (n = 629) Palpitations and cardiac disorders: 5 (0.8%) 0-5 years (n = 202) Palpitations and cardiac disorders: 0 6-10 years (n = 235) Palpitations and cardiac	Primary Care (n = 629) Neurologica I symptoms: 43 (6.8%) 0-5 years (n = 202) Neurologica I symptoms: 3 (1.5%) 6-10 years (n = 235) Neurologica I	Primary Care (n = 629) Respiratory symptoms: 38 (6.0%) 0-5 years (n = 202) Respiratory symptoms: 23 (11.4%) 6-10 years (n = 235) Respiratory symptoms: 9 (3.8%)		Primary Care (n = 629) Psychologic al symptoms: 31 (4.9%) 0-5 years (n = 202) Psychologic al symptoms: 5 (2.5%) 6-10 years (n = 235) Psychologic al	Primary Care (n = 629) Loss of taste/smell: 21 (3.3%) 0-5 years (n = 202) Loss of taste/smell: 0 Deleted: 5 (2.1%) 6-10 years (n = 235) Loss of taste/smell: 5 (2.1%)	Primary Care (n = 629) Muscle and joint pains: 31 (4.9%) 0-5 years (n = 202) Muscle and joint pain: 3 (1.5%) 6-10 years (n = 235) Muscle and joint pain: 12 (5.1%)	Primary Care (n = 629) Gastrointest inal symptoms: 19 (3.0%) 0-5 years (n = 202) Gastrointest inal disorders: 2 (1%) 6-10 years (n = 235) Gastrointest inal	Primary Care (n = 629) Dermatolog ical disorders: 12 (1.9%) 0-5 years (n = 202) Dermatolog ical disorders: 5 (2.5%) 6-10 years (n = 235)

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Assessme New onset General Cardiovas Neurologi Respirator Autonomi Psycholog Ear, Nose Musculosk Gastrointe Dermatol c Nervous ical/Psych eletal nt Mode conditions Symptoms cular С and stinal ogic Author Symptoms Symptoms System iatric Throat Symptoms Symptoms Symptom Symptoms Symptoms Symptoms Symptoms S 6-10 years disorders: 1 11-16 11-16 enrolled symptoms: symptoms: disorders: 8 Dermatolog (n = 235)(0.4%) 15 (6.4%) years (n = 7 (3%) 11-16 years (n = (3.4%) patient ical Abnormal 192) years (n = 192) disorders: 3 regarding: (1.3%)fatique: 12 11-16 11-16 Respiratory 11-16 192) Muscle and 11-16 age and (5.1%)years (n = years (n = symptoms: years (n = Loss of joint pain: years (n = 192) 192) 11-16 sex of the Other 192) 6 (3.1%); P 192) taste/smell: 16 (8.3%); child symptoms: Palpitations Neurologica = 0.001Psychologic 16 (8.3%); P = 0.005Gastrointest years (n = - time 3 (1.3%) and cardiac al P < 0.001 inal 192) disorders: 4 Symptom disorders: 9 Dermatolog elapsed symptoms: Symptom symptoms: 11-16 (2.1%); P 25 (13%); atic acute 19 (9.9%); Symptom atic acute (4.7%); P ical from COVID-19 COVID-19 years (n = = 0.043 P = 0.001atic acute = 0.073 disorders: 4 recovery P < 0.001 from 192) infection COVID-19 infection (2.1%); P = 0.666 COVID-19 Abnormal Symptom Symptom (n = 230)Symptoma infection (n = 230)Symptom atic acute - possible fatigue: 28 atic acute Respiratory tic acute (n = 230) Muscle and atic acute COVID-19 previous (14.6%); P COVID-19 symptoms: COVID-19 Loss of joint pains: COVID-19 Symptom infection infection atic acute chronic < 0.001 20 (8.7%) infection taste or 22 (9.6%) infection Other (n = 230)(n = 230)(n = 230)smell: 20 (n = 230)COVID-19 diseases symptoms: - health Palpitations Neurologica Psychologic (8.7%) Gastrointest infection Non -Non conditions 1(0.5); P =and cardiac Symptom al Symptom inal (n = 230)0.327 disorders: 4 atic acute atic acute Dermatolog following symptoms: symptoms: Non symptoms: clinical (1.7%)33 (14.4%) COVID-19 20 (8.7%) Symptom COVID-19 12 (5.2%) ical recovery Symptom Non infection atic acute infection disorders: 9 COVID-19 (3.9%)from atic acute Symptom Non -(n = 399)Non -(n = 399)Non -COVID-19 infection Muscle and COVID-19. atic acute Symptom Respiratory Symptoma Symptom (n = 399) joint pains: infection COVID-19 tic acute Specifically, atic acute symptoms: atic acute Non the (n = 230)infection COVID-19 18 (4.5%); COVID-19 Loss of 9 (2.3%); P COVID-19 Symptom (n = 399) frequency Abnormal infection P = 0.038infection taste or < 0.001 infection atic acute of fatique: 38 Palpitations (n = 399)(n = 399) smell: 1 (n = 399) COVID-19 (16.5%)and cardiac Neurologica Psychologic (0.25%); P Gastrointest infection respiratory Other disorders: 1 al < 0.001 (n = 399)diseases, inal (0.25%); P aastrointest symptoms: symptoms: symptoms: symptoms: Dermatolog 10 (2.5%); inal 3 (1.3%) = 0.06211 (2.8%); 7 (1.8%); P ical P < 0.001 P = 0.002= 0.026disorders: 3 disorders, social Non -(0.75%); P Symptom = 0.011 anxiety, atic acute depression COVID-19 episodes, infection learning (n = 399) disabilities, Abnormal eating disorders fatigue: 6

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	headache,		(1.5%); P									
	insomnia,		< 0.001									
	tachycardia,		Other									
	muscular		symptoms:									
	and joint		1 (0.25%);									
	pain, abnormal		P = 0.141									
	fatigue,											
	cutaneous											
	manifestati											
	ons, hair											
	loss,											
	ageusia,											
	and											
	anosmia,											
	and											
	potential											
	presence of											
	any other											
	symptoms, are											
	investigated											

Table 3. Quality of Life (QoL) and physical movement and or functioning outcome in specific age groups.

Author, population, sample size (n) and assessment mode	Quality of life and outcome(s)
	Persistent anosmia
Buonsenso et al. ⁽³⁴⁾	 - 11/13 (85%) reported having suffered a reduced or distorted ability to smell since the acute phase of SARS-CoV-2 infection. - 2/13 (15%) started experiencing olfactory dysfunction two months after the positive COVID test. - 10/13 (77%) reported the inability to detect any smell.
Population:	- Four parents firstly noticed that their children were not able to recognize cooking scents or odours. - Anosmia had a mild-moderate impact on their daily routine.
n = 784	- 4/13 (31%) used excessive perfume and deodorant. - 1/13 (8%) could not smell anything and was looking forward to recovering and she was constantly asking her mother when she will be able to
Assessment mode: Interview with parents/caregivers (telephone, survey or	recognize the odours again. - One family reported that their child's loss of smell had a slight impact on their daily activities.
in-person)	 - 1/13 (8%) reported being bothered by some smells. - 2/13 (15%) reported a completely distorted perception of smell.
	- All the parents interviewed shared the same feeling—fear. They were worried about their children's health; they want to know if and when they will recover and if these disorders will have long-term consequences.
	Pre-COVID-19 physical activity recorded for 888 participants
	Total cases (n = 888) (n %) - Inactive: 289 (32.5%) - Partially active: 280 (31.5%) - Fully active: 319 (35.9%)
	- Fully active. 519 (55.9%)
Daitch et al. ⁽⁶⁷⁾	18 - 65 years (n = 706) (n %)
	- Inactive: 199 (28.2%) - Partially active: 238 (33.7%)
Population: Adults with previous COVID- 19 diagnosis, Population further split into	- Fully active: 269 (38.1%)
those aged 18 to 65 years and those > 65 years	>65 years (n = 182) (n %) - Inactive: 90 (49.5%)
n = 2,333	- Partially active: 42 (23.1%) - Fully active: 50 (27.5%)
Assessment mode: Physician collected data (in person or telephone)	Physical activity status at time of visit (N, %) (recorded for n = 1427) - Worsened:
	Total Sample (n = 1427): 385 (26.8%) 18- 65 years (n = 1205): 347 (28.8%)
	> 65 years (n = 233): 38 (16.3%)
	- Remained unchanged: Total Sample (n = 1427): 885 (61.6%)

Author, population, sample size (n) and assessment mode	Quality of life and outcome(s)
	18- 65 years (n = 1205): 758 (63.0%) > 65 years (n = 233): 127 (54.5%)
	- Improved: Total Sample (n = 1427): 167 (11.6%) 18- 65 years (n = 1205): 99 (8.2%) > 65 years (n = 233): 68 (29.2%)
	Significant difference between age groups: P < 0.001
	School attendance status - Across all age groups, cohort group cases reported more sick leave and more absence from school or day-care within the past year than did controls
	 Among children aged 13 months to 3 years: the proportion reporting having at least 16 days of sick leave was higher in cases (382 [28.4%] of 1344) than in controls (647 [18.4%] of 3507, p<0.0001)
	the proportion reporting at least 16 days of absence from day-care or school was higher in cases (321 [23.9%] of 1344 than in controls (494 [14.1%] of 3507, p<0.0001).
Kikkenborg Berg et al. ⁽⁶⁴⁾	- Among children aged 4 – 11 years: the proportion reporting at least 16 days of absence from day-care or school was higher in cases(424 [7.0%] of 6032) than in controls (699
Population: Cohort group: Children aged 0 - 14 years with previous COVID-19 diagnosis. n = 10,997	[3.8%] of 18 372, p<0.0001) the proportion reporting at least 16 days of absence from day-care or school was higher in cases (269 [6.1%] of 4404 vs 450 [3.3%] of 13 508, $p<0.0001$)
Control group: age and sex matched children without previous COVID-19	 Among children aged 12–14 years: the proportion reporting having at least 16 days of sick leave was higher in cases(317 [9.0%] of 3516) than in controls (565 [5.2%] of 10 789, p<0.0001)
diagnosis (1:4 ratio). n = 33,016	the proportion reporting at least 16 days of absence from day-care or school was higher in cases (229 [6.5%] of 3516) than in controls 542 [5.0%] of 10 789, p<0.0001).
Assessment mode: (Paediatric Quality of Life Inventory [PedsQL] and Children's Somatic Symptoms Inventory-24 [CSSI-	Quality of life - Among children aged 13 months to 3 years:
24])	- Among children aged 4 – 11 years: the proportion who often felt scared was lower in cases than in controls (312 [5.2%] of 6032 cases vs 1027 [5.6%] of 18 372 controls, p<0.0001 in
	the 4–11 years age group as was the proportion who often had trouble sleeping (476 [7.9%] of 6032 cases vs 1642 [8.9%] of 18 372 controls, p<0.0001 and who felt worried about what would happen to them (305 [5.1%] of 6032 cases vs 1206 [6.6%] of 18 372 controls, p<0.0001 - Among children aged 12–14 years:
	the proportion who of ten felt scared was lower in cases than in controls 117 [3.3%] of 3516 cases vs 383 [3.5%] of 10 789 controls, p<0.0001 in the 12–14 years age group
	as was the proportion who often had trouble sleeping 275 [7.8%] of 3516 cases vs 911 [8.4%] of 10 789 controls, p<0.0001

Author, population, sample size (n) and assessment mode	Quality of life and outcome(s)
	and who felt worried about what would happen to them 209 [5.9%] of 3516 cases vs 883 [8.2%] of 10 789 controls, p<0.0001
	 Health-related quality of life Among children aged 13 months to 24 months: For PedsQL scores, small but clinically relevant differences (reflected by Hedges' g scores >0.2) were found for children aged 13–24 months on the physical symptoms scale, with lower scores, indicating worse health-related quality of life, reported in cases (mean 84.9 [SD 12.9]) than in controls (89.1 [9.7]; p<0.0001 [Wilcoxon signed rank test]), and on the emotional functioning scale, with lower scores reported in cases (73.6 [16.2]) than in controls (77.0 [12.8]; p<0.0001). Among children aged 4 – 14 years: However, in older age groups (ages 4–14 years), cases had higher health-related quality of life scores than did controls on some scales of the PedsQL. Among children aged 4 – 11 years: Among children aged 4–11 years, a small difference was found in emotional functioning scores, with higher scores reported in cases (78.2 [19.1]) than in controls (73.3 [18.0]; p<0.0001). Among children aged 12–14 years: Among children aged 12–14 years:
	controls (79.2 [19.2]; p<0.0001). Sick days during the past 12 months for the long COVID groups age group [13 months - 4 years (n = 391), 5-11 years (n = 1,505), 12-14 years (n = 1,077)] (N %) 0-5 days: 89 (22.8); 703 (46.7); 411 (38.2) 6-10 days: 83 (21.2); 370 (24.6); 283 (26.3) 11-15 days: 53 (13.6); 191 (12.7); 181 (16.81) 16 days -1 month: 116 (29.7); 210 (13.9); 161 (15.0) more than 1 month: 50 (12.8); 31 (2.1); 41 (3.8)
	Absence from day-care/school because of illness* by age group [13 months - 4 years (n = 391), 5-11 years (n = 1,505), 12-14 years (n = 1,077)] (N %) 0-5 days: 116 (29.7); 589 (52.6); 516 (47.9) 6-10 days: 84 (21.5); 260 (23.2); 273 (25.4) 11-15 days: 50 (12.8); 135 (12.1); 148 (13.7) 16 days -1 month: 110 (28.1); 120 (10.7); 111 (10.3) more than 1 month: 31 (7.9); 16 (1.4); 29 (2.7) * For the age group 5-11 years the question about absence from school is only reported for children aged 8-11 due to a technical error in the questionnaire. The results percentages reported are calculated from 1120 cases.
	Sick leave perceived to be related to COVID by age group [13 months - 4 years (n = 391), 5-11 years (n = 1,505), 12-14 years (n = 1,077)] (N %) 0-5 days: 247 (63.2); 1,032 (68.6); 623 (57.9)

Author, population, sample size (n) and assessment mode	Quality of life and outcome(s)
	6-10 days: 66 (16.9); 266 (17.7); 245 (22.8) 11-15 days: 35 (9.0); 102 (6.8); 117 (10.9) 16 days -1 month: 29 (7.4); 90 (5.9); 69 (6.4) more than 1 month: 14 (3.6); 15 (1.0); 23 (2.1)
	Sick leave during the past 12 months (COVID population Compared with Controls, split by age): 13 months-3 years: COVID population (n = 1 344): Sick leave past 12 months (N %): 0-5 days: 405 (30.1), 6-10 days: 351 (26.1), 11-15 days: 206 (15.3), 16 days -1 month: 296 (22.0), more than 1 month 86 (6.4) Absence from day-care/school because of illness (N %): 0-5 days: 480 (35.7), 6-10 days: 352 (26.2), 11-15 days: 191 (14.2), 16 days -1 month: 272 (20.2), more than 1 month: 49 (3.7) Sick leave perceived to be related to COVID (N %): 0-5 days: 1,041 (77.5), 6-10 days: 178 (13.2), 11-15 days: 67 (4.9), 16 days -1 month: 41 (3.1),
	Sick leave perceived to be related to COVID (N %): 0.5 days. 1,041 (77.5), 0.10 days. 170 (13.2), 11.15 days. 07 (4.5), 10 days. 11 (0.17), more than 1 month: 17 (1.3) Controls (n = 3 507): Sick leave past 12 months (N %): 0-5 days: 1,487 (42.4), 6-10 days: 886 (25.3), 11-15 days: 487 (13.9), 16 days -1 month: 545 (15.5), more than 1 month: 102 (2.9) Absence from day-care/school because of illness (N %): 0-5 days: 1,768 (50.4), 6-10 days: 811 (23.1), 11-15 days: 434 (12.4), 16 days-1 month: 418 (11.9), more than 1 month: 76 (2.2), Sick leave perceived to be related to COVID (N %): NA
	4-11 years: COVID population (n = 6 032): Sick leave past 12 months (N %): 0-5 days: 3,845 (63.7), 6-10 days: 1,228 (20.4), 11-15 days: 535 (8.9), 16 days -1 month:, 378 (6.3) more than 1 month: 46 (0.8) Absence from day-care/school because of illness (N %): 0-5 days: 2,972 (67.5), 6-10 days: 803 (18.2), 11-15 days: 360 (8.2), 16 days -1 month: 242 (5.5), more than 1 month: 27 (0.6) Sick leave perceived to be related to COVID (N %): 0-5 days: 5,008 (83.0), 6-10 days: 672 (11.1), 11-15 days: 201 (3.3), 16 days -1 month: 127 (2.1), more than 1 month: 24 (0.4),
	Controls (n = 18 372) Sick leave past 12 months (N %): 0-5 days: 14,420 (78.5), 6-10 days: 2,446 (13.3), 11-15 days: 807 (4.4), 16 days -1 month: 587 (3.2), more than 1 month: 112 (0.6) Absence from day-care/school because of illness (N %): 0-5 days: 11,108 (82.2), 6-10 days: 1,480 (11.0),, 11-15 days: 470 (3.5), 16 days -1 month: 333 (2.5),, more than 1 month: 117 (0.9), Sick leave perceived to be related to COVID (N %): NA
	12-14 years: COVID population (n = 3 516)

Author, population, sample size (n) and assessment mode	Quality of life and outcome(s)
	Sick leave past 12 months (N %): 0-5 days: 1,987 (56.5), 6-10 days: 823 (23.4), 11-15 days: 389 (11.1), 16 days -1 month: 266 (7.6), more than 1 month: 51 (1.5) Absence from day-care/school because of illness (N %): 0-5 days: 2,264 (64.4), 6-10 days: 706 (20.1), 11-15 days: 317 (9.0), 16 days -1 month: 185 (5.3), more than 1 month: 44 (1.3) Sick leave perceived to be related to COVID (N %): 0-5 days: 2,661 (75.7) , 6-10 days: 550 (15.6), 11-15 days: 191 (5.4), 16 days -1 month: 86 (2.45), more than 1 month: 27 (0.8)
	Controls (n = 10 789) Sick leave past 12 months (N %): 0-5 days: 8,214 (76.1), 6-10 days: 1,514 (14.0), 11-15 days: 496 (4.6), 16 days -1 month: 403 (3.7), more than 1 month: 162 (1.5)
	Absence from day-care/school because of illness (N %): 0-5 days: 8,630 (80.0), 6-10 days: 1,233 (11.4), 11-15 days: 384 (3.6), 16 days -1 month:, 359 (3.3), more than 1 month: 183 (1.7) Sick leave perceived to be related to COVID (N %): NA
	Symptom burden and health-related quality of life in COVID-19 cases and controls PedsQL score
	Emotional functioning 1 - 12 months: Cases (n= 105): Mean (SD) 75.5 (16.9); Median (IQR) 75.0 (64.6 – 89.6) Controls (n= 325): Mean (SD) 75.8 (13.7); Median (IQR) 79.2 (68.8 – 85.4) 13 - 24 months:
	Cases (n= 427): Mean (SD) 73.6 (16.2) ; Median (IQR) 75.0 (62.0 – 85.4) Controls (n= 1062): Mean (SD) 77.0 (12.8); Median (IQR) 77.1 (68.8 – 87.5) 2-3 years:
	Cases (n= 917): Mean (SD) 75.5 (18.1); Median (IQR) 75.0 (65.0 – 90.0) Controls (n= 2445): Mean (SD) 73.5 (15.4); Median (IQR) 75.0 (65.0 – 85.0) 4-11 years: Cases (n= 6032): Mean (SD) 78.2 (19.1) ; Median (IQR) 80.0 (65.0 – 95.0)
	Controls (n= 18372): Mean (SD) 73.3 (18.0); Median (IQR)75.0 (60.0 – 85.0) 12-14 years: Cases (n= 3516): Mean (SD) 83.2 (19.5); Median (IQR) 90.0 (70.0 – 100.0) Controls (n= 10789): Mean (SD) 79.2 (19.2); Median (IQR) 85.0 (65.0 – 95.0)
	Social functioning 1 - 12 months: Cases (n= 105): Mean (SD) 94.7 (9.3); Median (IQR) 100.0 (93.8–100.0) Controls (n= 325): Mean (SD) 93.0 (11.4); Median (IQR) 100.0 (87.5–100.0) 13 - 24 months:

Author, population, sample size (n) and assessment mode	Quality of life and outcome(s)
	Cases (n= 427): Mean (SD) 93.3 (11.0); Median (IQR) 100.0 (90.0–100.0) Controls (n = 1062): Mean (SD) 93.0 (9.9); Median (IQR) 95.0 (90.0–100.0) 2-3 years: Cases (n= 917): Mean (SD) 93.8 (10.8) ; Median (IQR) 100.0 (90.0–100.0) Controls (n= 2445): Mean (SD) 93.0 (10.8); Median (IQR) 100.0 (90.0–100.0) 4-11 years: Cases (n= 6032): Mean (SD) 92.3 (13.3); Median (IQR) 100.0 (90.0–100.0) Controls (n= 18372): Mean (SD) 89.6 (15.0); Median (IQR) 95.0 (85.0–100.0) 12-14 years: Cases (n= 3516): Mean (SD) 91.4 (15.4); Median (IQR) 100.0 (90.0–100.0) Controls (n= 10789): Mean (SD) 87.9 (17.5); Median (IQR) 95.0 (80.0–100.0)
	School functioning 1 - 12 months: Cases (n= 105): Mean (SD) NA; Median (IQR) NA Controls (n= 325): Mean (SD)NA; Median (IQR) NA 12 - 24 months: Cases (n= 427): Mean (SD) NA; Median (IQR) NA Controls (n= 1062): Mean (SD) NA; Median (IQR) NA 2-3 years: Cases (n= 917): Mean (SD) 92.9 (12.1); Median (IQR) 100.0 (90.0–100.0) Controls (n= 2445): Mean (SD) 93.0 (11.3); Median (IQR) 100.0 (91.7–100.0) 4-11 years: Cases (n= 6,032): Mean (SD) 86.8 (15.3); Median (IQR) 90.0 (80.0–100.0) Controls (n= 18,372): Mean (SD) 84.2 (15.4); Median (IQR) 90.0 (75.0–95.0) 12-14 years: Cases (n= 3,516): Mean (SD) 83.7 (18.0); Median (IQR) 90.0 (75.0–100.0)
	Controls (n = 10,789): Mean (SD) 80.9 (17.8); Median (IQR) 85.0 (70.0-95.0) Cognitive functioning 1 - 12 months: Cases (n = 105): Mean (SD) 87.7 (17.4); Median (IQR) 100.0 (75.0-100.0) Controls (n = 325): Mean (SD) 88.6 (16.0); Median (IQR) 100.0 (75.0-100.0) 12 - 24 months: Cases (n = 427): Mean (SD)87.3 (16.5) ; Median (IQR) 94.4 (77.8-100.0) Controls (n = 1,062): Mean (SD) 84.7 (16.3); Median (IQR) 88.9 (75.0-100.0) 2-3 years: Cases (n = 917): Mean (SD) NA; Median (IQR) NA Controls (n = 2,445): Mean (SD)NA ; Median (IQR) NA 4-11 years:

Author, population, sample size (n) and assessment mode	Quality of life and outcome(s)
	Cases (n = 6,032): Mean (SD)NA; Median (IQR) NA Controls (n = 18,372): Mean (SD) NA; Median (IQR) NA 12-14 years: Cases (n = 3,516): Mean (SD) NA; Median (IQR) NA Controls (n = 10,789): Mean (SD) NA ; Median (IQR) NA Follow up physical activity levels: Physical functioning (PedSQL) 1-12 months: Cases (n=105), Mean (SD): 93.7 (11.2), Median (IQR): 100.0 (91.7–100.0) Controls (n=348), Mean (SD): 87.8 (12.2), Median (IQR): 91.7 (79.2–100.0) 13–24 months : Cases (n=427), Mean (SD): 94.2 (9.1), Median (IQR): 100.0 (91.7–100.0) Controls (n=1062), Mean (SD): 87.3 (12.0), Median (IQR): 88.9 (80.6–97.2) 2–3 years*: Cases (n=917) Mean (SD): 94.8 (10.2), Median (IQR): 100.0 (93.8–100.0) Controls (n=2445), Mean (SD): 94.8 (8.2), Median: 100.0 (90.6–100.0), 4–11 years: Cases (n=6032) Mean (SD): 94.7 (11.4), Median (IQR): 100.0 (93.8–100.0) Controls (n=18 372), Mean (SD): 92.9 (11.8), Median (IQR): 96.9 (90.6–100.0), 12–14 years: Cases (n=3516) Mean (SD): 93.0 (13.0), Median (IQR): 100.0 (90.6–100.0) Controls (n=10 789), Mean (SD): 91.2 (13.3), Median (IQR): 96.9 (87.5–100.0) *Missing school functioning scores: 27 cases, 77 controls Months since positive SARS-CoV-2 test
Kikkenborg Berg et al. ⁽⁸⁸⁾	CSSI-24 score
Population: Cohort group: Adolescents aged 15 – 18 years with previous COVID- 19 diagnosis. n = 6630 Control group: age and sex matched adolescents without previous COVID-19 diagnosis (1:4 ratio). n = 21640 Assessment mode: (Paediatric Quality of Life Inventory [PedsQL] and Children's Somatic Symptoms Inventory-24 [CSSI- 24])	1 Month (n=366): Mean (SD) 11.2 (11.6), Median (IQR) 8.0 (3.0–16.0) Up to 3 months (n=1158): Mean (SD) 10.1 (10.7), Median (IQR) 7.0 (2.0–14.0) Up to 6 months (n=856): Mean (SD) 11.0 (11.8), Median (IQR) 8.0 (2.0–15.5) Up to 9 months (n=3165): Mean (SD) 10.4 (10.9), Median (IQR) 7.0 (2.0–15.0) Up to 12 months (n=843): Mean (SD) 11.2 (12.6), Median (IQR) 7.0 (2.0–16.0) More than 12 months (n=242): Mean (SD) 13.4 (14.4), Median (IQR) 9.0 (3.0–20.0) Total Case group (n=6630): Mean (SD) 10.7 (11.4), Median (IQR): 7.0 (2.0–15.0) Control group (n=21640): Mean (SD) 11.9 (10.6), Median (IQR): 9.0 (4.0–17.0) PedsQL score Physical functioning 1 Month (n=366): Mean (SD) 88.4 (14.6), Median (IQR) 93.8 (84.4–100.0) Up to 3 months (n=1158): Mean (SD) 89.7 (12.6), Median (IQR) 93.8 (84.4–100.0) Up to 6 months (n=856): Mean (SD) 88.0 (14.9), Median (IQR) 93.8 (81.4–100.0)

Author, population, sample size (n) and assessment mode	Quality of life and outcome(s)
	Up to 9 months (n=3165): Mean (SD) 88.9 (13.6), Median (IQR) 93.8 (81.3–100.0) Up to 12 months (n=843): Mean (SD) 88.3 (14.8), Median (IQR) 93.8 (78.1–100.0) More than 12 months (n=242): Mean (SD) 86.0 (16.5), Median (IQR) 93.8 (78.1–100.0)
	Total Case group (n=6630): Mean (SD) 88.7 (13.9), Median (IQR): 93.8 (84.4–100.0)
	Control group (n=21640): Mean (SD) 86.5 (14.3), Median (IQR): 90.6 (81.3–96.9)
	Emotional functioning 1 Month (n=366): Mean (SD) 78.6 (19.4), Median (IQR) 80.0 (65.0–95.0) Up to 3 months (n=1158): Mean (SD) 78.2 (19.9), Median (IQR) 80.0 (65.0–95.0) Up to 6 months (n=856): Mean (SD) 77.8 (20.5), Median (IQR) 80.0 (65.0–95.0) Up to 9 months (n=3165): Mean (SD) 76.4 (20.1), Median (IQR) 80.0 (65.0–95.0) Up to 12 months (n=843): Mean (SD) 77.6 (20.9), Median (IQR) 80.0 (65.0–95.0) More than 12 months (n=242): Mean (SD) 75.2 (23.4), Median (IQR) 80.0 (60.0–100.0)
	Total Case group (n=6630): Mean (SD) 77.1 (20.3), Median (IQR): 80.0 (65.0–95.0)
	Control group (n=21640): Mean (SD) 71.7 (21.4), Median (IQR): 75.0 (60.0–90.0)
	Social functioning 1 Month (n=366): Mean (SD) 93.4 (12.2), Median (IQR) 100.0 (90.0–100.0) Up to 3 months (n=1158): Mean (SD) 94.7 (11.0), Median (IQR) 100.0 (95.0–100.0) Up to 6 months (n=856): Mean (SD) 92.1 (13.9), Median (IQR) 100.0 (90.0–100.0) Up to 9 months (n=3165): Mean (SD) 92.8 (12.5), Median (IQR) 100.0 (90.0–100.0) Up to 12 months (n=843): Mean (SD) 93.4 (12.5), Median (IQR) 100.0 (90.0–100.0) More than 12 months (n=242): Mean (SD) 92.0 (14.8), Median (IQR) 100.0 (90.0–100.0)
	Total Case group (n=6630): Mean (SD) 93.1 (12.5), Median (IQR): 100.0 (90.0–100.0)
	Control group (n=21640): Mean (SD) 88.4 (16.2), Median (IQR): 95.0 (80.0-100.0)
	School functioning 1 Month (n=366): Mean (SD) 69.6 (21.3), Median (IQR) 70.0 (55.0–85.0) Up to 3 months (n=1158): Mean (SD) 68.5 (21.6), Median (IQR) 70.0 (55.0–85.0) Up to 6 months (n=856): Mean (SD) 67.0 (22.3), Median (IQR) 70.0 (50.0–85.0) Up to 9 months (n=3165): Mean (SD) 66.6 (22.7), Median (IQR) 65.0 (50.0–85.0) Up to 12 months (n=843): Mean (SD) 65.1 (23.1), Median (IQR) 65.0 (50.0–85.0) More than 12 months (n=242): Mean (SD) 65.2 (24.2), Median (IQR) 65.0 (50.0–80.0)

Author, population, sample size (n) and assessment mode	Quality of life and outcome(s)
	Total Case group (n=6630): Mean (SD) 66.9 (22.6), Median (IQR): 65.0 (60.0–85.0)
	Control group (n=21640): Mean (SD) 62.9 (22.1), Median (IQR): 65.0 (50.0–80.0)
Miller et al. ⁽⁵¹⁾	- 43.9% of children with a history of SARS-CoV-2 infection who experienced persistent symptoms (18/41) reported that these symptoms had an impact on regular activities.
Population: Children aged ≤17 years participating in VirusWatch (a household cohort study).	- 46.1% of children without a history of SARS-CoV-2 infection (35/76) reported their persistent symptoms impacted regular activities.
n = 5,032 children (1,062 evidence of past or present COVID-19 infection)	
Assessment mode: Online questionnaire	
Nugawela et al. ⁽⁸⁶⁾	Pre-COVID mobility (N, %): Mobility:
Population: Cohort group: Children aged 11 -17 years with previous COVID-19	No problems: Total population: 6800 (95.25%), SARS-CoV-2 negative: 3694(94.89%), SARS-CoV-2 positive: 3106 (95.69%) Some/a lot of problems: Total population: 339 (4.75%), SARS-CoV-2 negative: 199 (5.11%), SARS-CoV-2 positive: 140 (4.31%)
diagnosis,	Post-COVID mobility (follow-up time was 14.9 (13.1 - 18.9) weeks after RT-PCR test) : Median (25th – 50th percentile)
Control group: month of PCR test, age, sex and geographical area matched children with negative COVID-19 diagnosis	Mobility: No problems: Total population: 6683 (93.61%), SARS-CoV-2 negative: 3680 (94.53%), SARS-CoV-2 positive: 3003 (92.51%) Some/a lot of problems: Total population: 456 (6.39%), SARS-CoV-2 negative: 213 (5.47%), SARS-CoV-2 positive: 243 (7.49%) Looking after self:
Cohort group: n = 3,246, Control group: n = 3,893	No problems: Total population: 6819 (95.52%), SARS-CoV-2 negative: 3709 (95.27%), SARS-CoV-2 positive: 3110 (95.81%) Some/a lot of problems: Total population: 320 (4.48%), SARS-CoV-2 negative: 184 (4.73%), SARS-CoV-2 positive: 136 (4.19%) Doing usual activities:
Assessment mode: EQ-5D-Y scale	No problems: Total population: 6099 (85.43%), SARS-CoV-2 negative: 3376 (86.72%), SARS-CoV-2 positive: 2723 (83.89%) Some/a lot of problems: Total population: 1040 (14.57%), SARS-CoV-2 negative: 517 (13.28%), SARS-CoV-2 positive: 523 (16.11%)
Sorensen et al. ⁽⁵⁶⁾	See Appendix 6 General population, Table 3

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
US CDC ⁽⁷⁸⁾ Population: Children and adolescents n = varies depending on symptom or condition	Analysis: Selected potential post-COVID-19 symptoms and conditions among children and adolescents aged 2–17 years with and without COVID-19, by age group Wethod: Adjusted hazard ratios (adjusted for presence of COVID-19, age (continuous variable), sex, race, U.S. Census Bureau region, payer type, previous medical complexity, and previous hospitalization). Symptom (aHR (95% CI)) - - Smell and taste disturbances: Aged 2 - 4 years: 1.22 (0.70-2.15) Aged 2 - 17 years: 1.23 (1.16-1.31) - - Circulatory signs and symptoms Aged 5 - 11 years: 1.21 (1.12-1.23) Aged 2 - 4 years: 1.11 (1.08-1.13) - - 17 years: 1.04 (1.02-1.06) - - Malaise and fatigue Aged 2 - 4 years: 1.10 (1.05-1.22) Aged 2 - 17 years: 1.06 (1.05-1.12) - Aged 2 - 17 years: 1.06 (1.05-1.22) - Aged 2 - 17 years: 1.00 (0.99-1.01) - - Musculoskeletal pain - Aged 2 - 4 years: 1.10 (0.09-1.01) - - Dizenses and syntope - Aged 2 - 4 years: 1.00 (0.99-1.02) - - Gastrointestinal and esophageal disorders - Aged 2 - 17 years: 1.00 (0.99-1.02) - - Gastrointestinal and esophageal disorders - Aged 2 - 11 years: 1.00 (0.99-1.02) - </td

Table 4. Summary of association analysis extracted from primary research studies focusing on specific age groups.

	- Symptoms of mental conditions
	Aged 2 – 4 years: 1.03 (0.97–1.10)
	Aged $5 - 11$ years: 0.92 (0.90-0.95) [†]
	Aged 12 – 17 years: 0.32 (0.36–0.93)
	Aged 12 - 17 years. 0.09 (0.00-0.91)
	Condition
	<u>Condition</u>
	- Acute pulmonary embolism
	Aged 2 – 4 years: N/A
	Aged 5 – 11 years: N/A
	Aged 12 – 17 years: 2.03 (1.61–2.56)
	- Myocarditis and cardiomyopathy
	Aged 2 – 4 years: 2.39 (1.57–3.65)
	Aged 5 – 11 years: 2.84 (2.39–3.37)
	Aged 12 – 17 years: 1.66 (1.48–1.88)
	- Venous thromboembolic event
	Aged 2 – 4 years: N/A
	Aged 5 – 11 years: 2.69 (1.73–4.19)
	Aged 12 – 17 years: 1.52 (1.22–1.91)
	- Acute and unspecified renal failure
	Aged 2 – 4 years: 1.52 (1.07–2.14)
	Aged 5 – 11 years: 1.38 (1.16–1.63)
	Aged 12 – 17 years: 1.27 (1.15–1.40)
	- Type 1 diabetes
	Aged 2 – 4 years: 1.01 (0.57–1.78)
	Aged 5 – 11 years: 1.31 (1.13–1.53)
	Aged 12 – 17 years: 1.20 (1.09–1.33)
	- Coagulation and haemorrhagic disorders
	Aged 2 – 4 years: 1.47 (1.20–1.80)
	Aged $5 - 11$ years: 1.28 (1.15-1.43)
	Aged 12 – 17 years: 1.10 (1.03–1.19)
	- Type 2 diabetes
	Aged 2 – 4 years: 1.24 (0.85–1.81)
	Aged 5 – 11 years: 1.14 (1.02–1.28)
	Aged 12 – 17 years: 1.18 (1.11–1.24)
	- Cardiac dysrhythmias
	Aged 2 – 4 years: 1.44 (1.22–1.70)
	Aged 5 – 11 years: 1.23 (1.14–1.32)
	Aged 12 – 17 years: 1.12 (1.08–1.17)
	- Cerebrovascular disease
	Aged 2 – 4 years: 1.66 (0.85–3.23)
	Aged 5 – 11 years: 1.14 (0.79–1.64)
	Aged 12 – 17 years: 1.18 (0.93–1.48)
	- Chronic kidney disease
	Aged 2 – 4 years: 0.86 (0.54–1.36)
	Aged 5 – 11 years: 1.04 (0.83–1.31)
•	

	Aged 12 – 17 years: 1.12 (0.96–1.31)
	- Asthma
	Aged 2 – 4 years: 1.12 (1.07–1.18)
	Aged 5 – 11 years: 1.02 (1.00–1.05)
	Aged 12 – 17 years: 0.96 (0.94–0.98)
	- Muscle disorders
	Aged 2 – 4 years: 0.87 (0.77–0.98)
	Aged 5 – 11 years: 0.86 (0.82–0.91)
	Aged 12 – 17 years: 0.96 (0.93–0.99)
	- Neurological conditions
	Aged 2 – 4 years: 0.98 (0.93–1.04)
	Aged 5 – 11 years: 0.96 (0.93–0.98)
	Aged 12 – 17 years: 0.91 (0.89–0.93)
	- Anxiety and fear-related disorders
	Aged 2 – 4 years: 0.91 (0.83–1.00)
	Aged 5 – 11 years: 0.86 (0.83–0.88)
	Aged 12 – 17 years: 0.84 (0.82–0.85) - Mood disorders
	Aged $2 - 4$ years: 0.82 (0.62–1.08)
	Aged $5 - 11$ years: 0.73 (0.69–0.77)
	Aged 12 – 17 years: 0.80 (0.77–0.83)
US CDC ⁽⁷⁹⁾	Aged 12 17 years. 0.00 (0.77 0.05)
05 000	
Population: Adult COVID-19 Survivors	See Appendix & Constal Deputation Table 4
aged 18–64 and ≥65 Years	See Appendix 6 General Population, Table 4.
n = 353164 (case group)	
n = 1,640,776 (control group)	Analysia, Analysia of independent visit fortawa fay lang COVID fatigue among alder adulta
	Analysis: Analysis of independent risk factors for long COVID fatigue among older adults Method: Multivariate generalized estimating equations.
	Method. Multivariate generalized estimating equations.
	- Age: >65 years: OR: 0.779; 95% CI: 0.538 - 1.129; p = 0.187
Daitch et al. ⁽⁶⁷⁾	- Females: OR: 2.073; 95% CI: 1.572 - 2.734; p <0.001
	- Smoker (n = 2007): OR: 1.086; 95% CI: 0.787 - 1.498; $p = 0.617$
Population: Adults with previous COVID-19	- Obesity (n = 1465): OR: 1.586; 95% CI: 1.115 - 2.255; p = 0.010
diagnosis	- Hypertension (n = 1985): OR: 1.185; 95% CI: 0.819 - 1.716; p = 0.368
	- Less than 60 days from COVID-19 diagnosis to clinic visit (n = 1688): OR: 1.594; 95% CI: 1.054 - 2.410; p = 0.027
Population further split into those aged 18	
to 65 years and those $>$ 65 years	Analysis: Analysis of independent risk factors for long COVID dyspnoea among older adults
	Method: Multivariate generalized estimating equations.
n = 2,333 and or varies by variable	
	- Age: >65 years: OR: 0.695; 95% CI: 0.476 - 1.013; p = 0.063
	- Females: OR: 1.674; 95% CI: 1.261 - 2.222; p <0.001
	- Pre-COVID-19 physical activity (n = 890):

	Fully active: 1 (Reference)
	Inactive: OR: 1.078; 95% CI: 0.769 - 1.512; p = 0.663
	Partially active: OR: 1.632; 95% CI: 1.163 - 2.290; p = 0.005
	Background illnesses:
	Obesity (n = 1,465): OR: 1.690; 95% CI: 1.198 - 2.382; p = 0.003
	Chronic kidney disease (n = 1,491): OR: 2.233; 95% CI: 0.847 - 5.887; p = 0.104
	Chronic pulmonary disease (n = 1,734): OR: 1.983; 95% CI: 1.179 - 3.334; p = 0.010
	- Disease severity according to the WHO (n = 2209)
	Asymptomatic, mild or moderate: 1 (Reference)
	Severe: OR: 1.121; 95% CI: $0.540 - 2.331; p = 0.759$
	Critical: OR: 1.958; 95% CI: $0.979 - 3.915$; p = 0.057
	- Less than 60 days from COVID-19 diagnosis to clinic visit (n = 1,688): OR: 2.071; 95% CI: 1.386 - 3.094; p < 0.001
	Analysis: Prevalence ratio of symptoms lasting over 12 weeks (all participants, n = 1034)
	Method: Mixed-effect Poisson regression with robust variance, based on the sandwich estimator, was used to estimate prevalence ratio and
	correct for potential dependence between participants as some children were siblings (adjusted for age, sex, or both according to independent
	variable, using a two-sided Likelihood Ratio Test, without adjustments for multiple comparisons).
	- Sex:
	Female: 1 (Reference)
	Male: aPR: 1.1; 95% CI: 0.8 - 1.6; p = 0.665
	- Age (years): aPR: 1.1; 95% CI: 1.0 - 1.2; p = 0.012
	- Serological status:
	Seronegative: 1 (Reference)
	Seropositive: aPR: 1.8; 95% CI: 1.2 - 2.8; p < 0.01
	- Chronic condition:
Dumont et al. ⁽⁵⁰⁾	No: 1 (Reference)
Dunione et un	Yes: aPR: 3.6; 95% CI: 2.3 - 5.5; p < 0.01
Population: Children and adolescents 6	- Parental education:
months to 17 years old (COVID-19	Tertiary: 1 (Reference)
diagnosis not required)	Secondary: aPR: 1.2; 95% CI: 0.7 - 2.0; p = 0.471
n = 1,034 (570 tested positive for COVID-	Primary: aPR: 1.9; 95% CI: 0.8 - 4.7; p = 0.365
19)	- Financial situation:
	High: 1 (Reference)
	Average to poor: aPR: 2.5 95% CI: 1.4 - 4.6; p < 0.05
	Analysis: Prevalence ratio of symptoms lasting over 12 weeks in seropositive participants ($n = 570$)
	Method: Mixed-effect Poisson regression with robust variance, based on the sandwich estimator, was used to estimate prevalence ratio and
	correct for potential dependence between participants as some children were siblings (adjusted for age, sex, or both according to independent
	variable, using a two-sided Likelihood Ratio Test, without adjustments for multiple comparisons).
	- Sex:
	Female: 1 (Reference)
	Male: aPR: 1.1; 95% CI: 0.7 - 1.8; p = 0.723
	- Age (years): aPR: 1.1; 95% CI: 1.0 - 1.3; p = 0.021
	- Serological status:

	Seronegative: -
	Seropositive: -
	- Chronic condition:
	No: 1 (Reference)
	Yes: aPR: 3.5; 95% CI: 2.0 - 6.1; p <0.01
	- Parental education:
	Tertiary: 1 (Reference)
	Secondary: aPR: 1.3; 95% CI: $0.6 - 2.5$; p = 0.469
	Primary: aPR: 1.7; 95% CI: 0.5 - 5.2; $p = 0.369$
	- Financial situation:
	High: 1 (Reference)
	Average to poor: aPR: 3.0; 95% CI: 1.5 - 6.2; p < 0.05
	Analysis: Prevalence ratio of symptoms lasting over 12 weeks in seronegative participants (n = 464)
	Method: Mixed-effect Poisson regression with robust variance, based on the sandwich estimator, was used to estimate prevalence ratio and
	correct for potential dependence between participants as some children were siblings (adjusted for age, sex, or both according to independent
	variable, using a two-sided Likelihood Ratio Test, without adjustments for multiple comparisons).
	- Sex:
	Female: 1.0 (ref)
	Male: aPR: 0.9 ; 95% CI: $0.4 - 1.9$; p = 0.875
	- Age (years): aPR: 1.1; 95% CI: $0.9 - 1.2$; p = 0.261
	- Serological status:
	Seronegative: -
	Seropositive: -
	- Chronic condition:
	No: 1 (Reference)
	Yes: aPR: 2.9; 95% CI: 1.3 – 6.5; p <0.01
	- Parental education:
	Tertiary: 1 (Reference)
	Secondary: aPR: 1.2; 95% CI: 0.7 - 2.0; p = 0.469
	Primary: aPR: 1.9; 95% CI: 0.8 - 4.6; p = 0.369
	- Financial situation:
	High: 1 (Reference)
	Average to poor: aPR: 1.2; 95% CI: 0.9 – 3.4; p =0.501
	Analysis: Independent risk factors associated with any post-sequelae, CAT scores ≥ 10 or >2 .
Fang et al. ⁽⁶⁵⁾	Method: Multivariate logistic regression
rang et al.	
	Post-sequelae
Population: COVID-19 hospitalised	- Severity during hospitalization: OR: 1.46; 95% CI: $1.15 - 1.84$; p = 0.002
patients \geq 60 years (post discharge)	- Time from discharge to follow-up, per month: OR: 0.71; 95% CI: 0.50 – 0.99; $p = 0.043$
n = 1,233	Emerging seguelae
	- Severity during hospitalization: OR: 1.33; 95% CI: $1.03 - 1.71$; p = 0.029

CAT≥10
- Age , per year: OR: 1.07; 95% CI: 1.04 – 1.09; $p = <0.001$
- Severity during hospitalization: OR: 1.81; 95% CI: 1.23 – 2.67; p = 0.003
CAT >2
- Age, per year: OR: 1.08; 95% CI: 1.06 – 1.10; p < 0.001
- Time from discharge to follow-up, per month: OR: 0.66; 95% CI: 0.47 – 0.93; $p = 0.017$
- Time from discharge to follow-up, per month: OR: 0.66, 95% CI: $0.47 - 0.95$, $\beta = 0.017$
Analysis: Significant risk factors for systemic/general sequelae.
Method: Logistic regression.
- Severity during hospitalization: OR: 1.52; 95% CI: 1.19 - 1.94; p = 0.001
Analysis: Significant risk factors for respiratory sequelae.
Method: Logistic regression.
- Age, per year: OR: 1.04; 95% CI: 1.02 - 1.07; p = 0.001
- Smoking: OR: 1.39; 95% CI: 1.01 - 1.92; $p = 0.044$
- Severity during hospitalization: OR: 1.73; 95% CI: 1.18 - 2.53; p = 0.005
Analysis: Significant risk factors for cardiovascular sequelae.
Method: Logistic regression.
- Age , per year: OR: 1.03; 95% CI: 1.01 - 1.05; p = 0.003
- Severity during hospitalization: OR: 1.66 ; 95% CI: 1.24 - 2.23; p = 0.001
- Time from discharge to follow-up, per month: OR: 0.50; 95% CI: 0.33 - 0.77; $p = 0.002$
Analysis: Risk factors for neurological sequelae
Method: Logistic regression
- Gender, male: OR: 0.78; 95% CI: 0.61 - 0.99; p = 0.049
- Severity during hospitalization: OR: 1.31; 95% CI: 1.01 - 1.70; p = 0.041
Analysis: Stratified analyses of associations between any post-sequelae and corticosteroid-related therapy by disease severity during
hospitalization.
Method: Multivariate logistic regression.
Total patients
- Corticosteroid-related therapy:
No: 1 (Reference)
Yes: OR: 2.78; 95% CI: 1.77 - 4.35; p <0.001
Severe COVID-19 patients
- Corticosteroid-related therapy:
No: 1 (Reference)

	Yes: OR: 4.15; 95% CI: 2.10 - 8.21; p <0.001
	165. UK. 4.13, 3570 CI. 2.10 - 0.21; μ <0.001
	Non-severe COVID-19 patients
	- Corticosteroid-related therapy:
	No: 1 (Reference)
	Yes: OR:1.52; 95% CI: 0.80 - 2.90; p < 0.199
	Analysis: Stratified analyses of associations between emerging sequelae and corticosteroid-related therapy by disease severity during
	hospitalization
	Method: Multivariate logistic regression.
	Total patients
	- Corticosteroid-related therapy:
	No: 1 (Reference)
	Yes: OR: 2.82; 95% CI: 1.87 - 4.24; p <0.001
	Severe COVID-19 patients
	- Corticosteroid-related therapy:
	No: 1 (Reference)
	Yes: OR: 3.23; 95% CI: 1.86 - 5.58; p <0.001
	Non-severe COVID-19 patients - Corticosteroid-related therapy:
	No: 1 (Reference)
	Yes: OR: 2.08; 95% CI: 1.09 - 3.98; $p = 0.027$
Funk et al. ⁽⁷⁷⁾	Analysis: Factors associated with reporting of persistent, new, or recurring health problems in 1,875 SARS-CoV-2-positive children with complete
	data.
Cohort group: Children < 18 years with	Method: Multiple logistic regression. Variables included in the model were country of enrollment, sex, age, chronic underlying condition (excluding
previous COVID-19 diagnosis	asthma), number of symptoms at the index ED visit (categorized as 0, 1-3, 4-6, or \geq 7, with cut points selected to evenly distribute participants
n = 1884	across categories), hospitalization as a 3-level categorical variable incorporating length of stay (none, <48 hours, or \geq 48 hours), and month of
	enrollment. Least absolute shrinkage and selection operator via 10-fold cross-validation with 100 lambdas for variable selection. Multiple logistic
Control group: children < 18 years without	regression model with the variables selected by least absolute shrinkage and selection operator to obtain the adjusted odds ratio (aOR).
previous COVID-19 diagnosis	
-	- Region:
Population is further split into hospitalised	United States: 1 (Reference)
and non-hospitalised	Costa Rica: aOR: 0.70; 95% CI: 0.33 - 1.46); p = 0.34
	Canada: aOR: 1.61; 95% CI: 0.87 - 2.98; p = 0.13
Hospitalised =	Spain: aOR: 0.60; 95% CI: 0.18 - 2.01; p = 0.41
Cohort group: n = 391; Control group: n	Other: aOR: Excluded
= 380;	- Sex:
	Male: 1 (Reference)
Non – hospitalised =	Female: aOR: 1.38; 95% CI: 0.92 - 2.08; p = 0.12
Cohort group: $n = 1,295$; Control group: n	- Age, years:
= 1,321	<1.0: 1 (Reference)
	1.0 to <2.0: aOR: 0.84; 95% CI: 0.34 - 2.06; p = 0.71

	2.0 to <5.0: aOR: 0.84; 95% CI: 0.37 - 1.92; p = 0.68
	5.0 to <10.0: aOR: 1.40; 95% CI: 0.71 - 2.75; $p = 0.33$
	10.0 to <14.0: aOR:1.91; 95% CI: 0.97 - 3.76; p = 0.06
	14.0 to <18.0: aOR: 2.67; 95% CI: 1.43 - 4.99; p = 0.002
	- Chronic condition (other than asthma):
	No: 1 (Reference)
	Yes: aOR: 1.04; 95% CI: 0.62 - 1.76; p = 0.88
	- No. of symptoms at ED presentation:
	Asymptomatic: aOR: 1.35; 95% CI: 0.44 - 4.19; p = 0.60
	1-3: 1 (Reference)
	4-6: aOR: 2.35; 95% CI: 1.28 - 4.31; p = 0.006
	≥7: aOR: 4.59; 95% CI: 2.50 - 8.44; p <0.001
	- Hospitalised for acute illness:
	No: 1 (Reference)
	Yes, <48 h: aOR: 2.07; 95% CI: 0.99 - 4.32; $p = 0.05$
	Yes, ≥48 h: aOR: 2.67; 95% CI: 1.63 - 4.38; p < 0.001
	- Season of infection:
	Spring 2020 (Mar-May): aOR: 0.47 ; 95% CI: $0.19 - 1.18$; p = 0.11
	Summer 2020 (Jun-Aug): 1 (Reference)
	Fall 2020 (Sep-Nov): aOR: 1.25; 95% CI: 0.74 - 2.09; p = 0.41
	Winter 2020-2021 (Dec-Jan): aOR: 1.22; 95% CI: 0.69 - 2.14; p = 0.50
	Analysis: The association of SARS-CoV-2 positivity with categories of reported 90-Day persistent, new or recurring health problems. Method: Multiple logistic regression (covariates included: any reported persistent, new or recurring health problem: SARS-CoV-2 test result, country of enrolment, sex, age category, having a chronic condition other than asthma acute hospitalization, # of acute symptoms, season of infection; respiratory: SARS-CoV-2 test result, country of enrolment, age category, # of acute symptoms; systemic: SARS-CoV-2 Test Result, having a chronic condition other than asthma, sex, age category, acute hospitalization, # of acute symptoms; neurologic: SARS-CoV-2 test result and age category; psychological: SARS-CoV-2 test result, sex, age category, acute hospitalization, # of acute symptoms; gastrointestinal: SARS-CoV-2 test result).
	Any converted power terms in a converting boolth problem, $cOD(1, 62)$ OF($CI(1, 14, 2, 25)$ $n = 0.009$
	 Any reported persistent, new or recurring health problem: aOR: 1.63; 95% CI: 1.14 - 2.35; p = 0.008 Respiratory: aOR: 0.88; 95% CI: 0.52 - 1.48; p = 0.62
	- Systemic: aOR: 2.44; 95% CI: 1.19 - 5.00; p = 0.02
	- Neurologic: aOR: 1.29; 95% CI: 0.56 - 2.99; p = 0.55
	- Psychological: aOR: 1.96; 95% CI: $0.74 - 5.18$; p = 0.17
	- Gastrointestinal: aOR 1.35; 95% CI: 0.57 - 3.21; p = 0.50
Kikkenborg Berg et al. ⁽⁶⁴⁾	Analysis: The odds or reporting at least one long COVID symptom lasting more than 8 months
	Method: Logistic regression (adjusted for age and sex)
Population: Cohort group: Children aged 0	
 – 14 years with previous COVID-19 	<u>Age 0-3 years</u>
diagnosis	- one long COVID symptom lasting more than 8 months:
	Sex:
Control group: age and sex matched	Male: Cohort group: 1 (Reference); Control group: 1 (Reference)
children without previous COVID-19	Female: Cohort group: OR: 1.10; 95% CI: 0.88 - 1.38; Control group: OR: 0.91; 95% CI: 0.79 - 1.05
diagnosis (1:4 ratio)	Age 4 – 11 years

	and long COVID summteen lecting mays then 9 mentles
	- one long COVID symptom lasting more than 8 months:
n = varies depending on analysis	Sex:
	Male: Cohort group: 1 (Reference); Control group: 1 (Reference)
	Female: Cohort group: OR: 1.14; 95% CI: 1.02 - 1.27; Control group: OR: 1.15; 95% CI: 1.08 - 1.23
	Age 12 – 14 years
	- one long COVID symptom lasting more than 8 months:
	Sex:
	Male: Cohort group: 1 (Reference); Control group: 1 (Reference)
	Female: Cohort group: OR: 1.70; 95% CI: 1.47 - 1.97; Control group: OR: 1.47; 95% CI: 1.36 - 1.59
	Analysis: The odds or reporting at least one long COVID symptom lasting more than 2 months in children aged 0 – 14 years with previous
	COVID-19 diagnosis, compared to controls.
	Method: Logistic regression (adjusted for age and sex).
	<u>Age 0 – 3 years</u> (cases, n = 1,194; controls, n = 3,855)
	- one long COVID symptom lasting more than 2 months: OR: 1.78; 95% CI: 1.55 – 2.04; p <0.0001
	<u>Age 4–11 years (cases, n = 5,023; controls, n = 18,372)</u>
	- one long COVID symptom lasting more than 2 months: OR: 1.23; 95% CI: 1.15 – 1.31; p <0.0001
	Age 12 – 14 years (cases, n = 2,857; controls, n = 10,789)
	- one long COVID symptom lasting more than 2 months: OR: 1.21; 95% CI: 1.11 – 1.32; p <0.0001
	Analysis: The odds or reporting at least one long COVID symptom lasting more than 3 months in children aged 0 – 14 years with previous
	COVID-19 diagnosis, compared to controls.
	Method: Logistic regression (adjusted for age and sex).
	<u>Age 0 – 3 years (cases, n = 1,194; controls, n = 3,855)</u>
	- one long COVID symptom lasting more than 3 months: OR: 1.94; 95% CI: 1.68 – 2.23; p <0.0001
	<u>Age 4–11 years (cases, n = 5,023; controls, n = 18,372)</u>
	- one long COVID symptom lasting more than 3 months: OR: 1.28; 95% CI: 1.19 – 1.37; p <0.0001
	<u>Age 12 – 14 years (cases, n = 2,857; controls, n = 10,789)</u>
	- one long COVID symptom lasting more than 3 months: OR: 1.26; 95% CI: 1.11 – 1.32; p <0.0001
	Analysis: The odds of reporting a long COVID symptom in children aged 0 – 14 years with previous COVID-19 diagnosis, compared to controls.
	Method: Logistic regression (adjusted for age and sex).
	<u>Age 0 - 3 years (cases, n = 1,194; controls, n = 3,855)</u>
	- Stomach aches: OR: 2.48; 95% CI: 1.63 – 3.77; p <0.0001
	- Fatigue: OR: 3.50; 95% CI: 2.21 – 5.55); p <0.0001
	- Pain in muscles or joints: OR: 1.84; 95% CI: 0.54 – 6.30); $p = 0.33$
	- Rashes: OR: 1.57; 95% CI: 1.11 – 2.22; $p = 0.010$
	- Mood swings: OR: 1.63 ; 95% CI: $1.22 - 2.19$; $p = 0.0011$
	- Nausea: OR: 8.30; 95% CI: 1.61 – 42.91; p = 0.011
	- Fever: OR: 5.89; 95% CI: 2.95 – 11.77; p <0.0001

	- Loss of appetite: OR: 3.72; 95% CI: 2.44 – 5.67; p <0.0001
	- Trouble breathing: OR: 4.40; 95% CI: 2.13 – 9.11; p <0.0001
	- Dark circles under eyes: OR: 6.15; 95% CI: 2.60 – 14.55; p <0.0001
	- Palpitations: - (Groups too small for analysis)
	- Cold hands or feet: OR: 3.94; 95% CI: 1.81 – 8.56; p = 0.0005
	- Cough: OR: 4.65; 95% CI: 3.27 – 6.64; p <0.0001
	- Chapped lips: - (Groups too small for analysis)
	- Discoloured fingers or toes: - (Groups too small for analysis)
	- Extreme paleness: OR: 3.25; 95% CI: 0.94 – 11.24; p = 0.063
	<u>Age 4 -11 years (cases, n = 5,023; controls, n = 18,372)</u>
	- Stomach aches: OR: 0.95; 95% CI: 0.78 – 1.17; p = 0.67
	- Chest pain: OR: 2.66; 95% CI: 1.18 – 6.00; p = 0.018
	- Headache: OR: 1.66; 95% CI: 1.34 – 2.05; p <0.0001
	- Fatigue: OR: 1.80; 95% CI: 1.51 – 2.14; p <0.0001
	- Pain in muscles or joints: OR: 1.38; 95% CI: 1.05 – 1.81; p = 0.021
	- Sore throat: OR: 4.56; 95% CI: 2.65 – 7.85; p <0.0001
	- Dizziness: OR: 4.07; 95% CI: 1.82 – 9.10; p = 0.0006
	- Rashes: OR: 0.64; 95% CI: 0.51 – 0.80; p < 0.0001
	- Mood swings: OR: 0.72; 95% CI: 0.63 – 0.83; p <0.0001
	- Nausea: OR: 1.33; 95% CI: 0.92 – 1.93; p = 0.13
	- Fever: OR: 3.21; 95% CI: 1.24 – 8.34; p = 0.016
	- Loss of appetite: OR: 1.44 ; 95% CI: $1.15 - 1.81$; p = 0.0018
	- Trouble breathing: OR: 2.61; 95% CI: 1.65 – 4.14; p <0.0001
	- Dark circles under eyes: OR: 1.53; 95% CI: 1.19 – 1.97; p = 0.0009
	- Palpitations: OR: 2.31; 95% CI: $1.13 - 4.73$; p = 0.022
	- Trouble remembering and concentrating: OR: 0.86 ; 95% CI: $0.73 - 1.02$; $p = 0.081$
	- Cold hands or feet: OR:1.23; 95% CI: $0.82 - 1.83$; p = 0.31
	- Cough: OR: 1.83; 95% CI: 1.34 – 2.49; $p = 0.0001$
	- Chapped lips: OR: 1.17; 95% CI: $0.87 - 1.58$; p = 0.30
	- Dizziness when standing: OR: 2.05; 95% CI: $0.82 - 5.16$; p = 0.13
	- Light sensitivity: OR: 1.18; 95% CI: 0.85 – 1.64; p = 0.31
	- Discoloured fingers or toes: OR: 0.61; 95% CI: 0.07 – 5.11; p = 0.65
	- Extreme paleness: OR: 1.17; 95% CI: 0.68 – 2.01; p = 0.58
	Age 12 - 14 years (cases, $n = 2,857$; controls, $n = 10,789$)
	- Stomach aches: OR: 0.91; 95% CI: $0.68 - 1.22$; p = 0.54
	- Chest pain: OR: 3.53; 95% CI: 2.00 – 6.24; p < 0.0001
	- Headache: OR: 1.55; 95% CI: 1.27 – 1.90; p <0.0001
	- Fatigue: OR: 1.39; 95% CI: 1.21 – 1.60; p <0.0001
	- Pain in muscles or joints: OR: 1.47 ; 95% CI: $1.13 - 1.90$; p = 0.0036
	- Sore throat: OR: 5.32; 95% CI: 2.99 – 9.46; p <0.0001
	- Dizziness: OR: 2.32; 95% CI: 1.63 – 3.31; p <0.0001
	- Rashes: OR: 1.03 ; 95% CI: $0.81 - 1.33$; p = 0.79
<u> </u>	- Mood swings: OR: 0.75; 95% CI: 0.65 – 0.88; p = 0.0002

	- Nausea: OR: 1.25; 95% CI: 0.86 – 1.81; p = 0.24
	- Fever: OR: 2.98; 95% CI: 0.80 – 11.10; p = 0.10
	- Loss of appetite: OR: 1.22; 95% CI: 0.96 – 1.54; p = 0.11
	- Trouble breathing: OR: 2.94; 95% CI: 1.91 – 4.53; p <0.0001
	- Dark circles under eyes: OR: 1.24; 95% CI: 0.93 – 1.65; p = 0.15
	- Palpitations: OR: 1.66; 95% CI: 0.95 – 2.90; p = 0.073
	- Trouble remembering and concentrating: OR: 0.91 ; 95% CI: $0.76 - 1.08$; $p = 0.29$
	- Cold hands or feet: OR: 1.12; 95% CI: 0.87 – 1.44; p = 0.40
	- Cough: OR: 2.39; 95% CI: 1.38 – 4.15; p = 0.0018
	- Chapped lips: OR: 1.26; 95% CI: 0.94 – 1.70; p = 0.12
	- Dizziness when standing: OR: 2.10; 95% CI: 1.48 – 2.97; p <0.0001
	- Light sensitivity: OR: 0.74; 95% CI: 0.49 – 1.11; p <0.0001
	- Discoloured fingers or toes: OR: 1.51; 95% CI: 0.47 – 4.81; p = 0.14
	- Extreme paleness: OR: 0.82; 95% CI: 0.48 – 1.38; p = 0.45
	Analysis: The odds of reporting at least one long COVID symptom lasting more than two months
	Method: Logistic regression (adjusted for age and sex)
	Age 15-18 years
	- one long COVID symptom lasting more than 2 months:
	Sex:
	Male: Cohort group: 1 (Reference); Control group: 1 (Reference)
	Female: Cohort group: OR: 2.70; 95% CI: 2.40 – 3.03; Control group: OR: 2.56; 95% CI: 2.42 – 2.70
	Analysis: The odds or reporting at least one long COVID symptom lasting more than 2 months in adolescents aged 15 - 18 years with previous
Kikkenborg Berg et al. ⁽⁸⁸⁾	COVID-19 diagnosis, compared to controls
Population: Cohort group: Adolescents	Method: Logistic regression (adjusted for age and sex)
aged 15 – 18 years with previous COVID-	
19 diagnosis	
	<u>Age 15 – 18 years</u> (cases, n = 3,159; controls, n = 12,340)
Control group: age and sex matched	- one long COVID symptom lasting more than 2 months: OR: 1.22; 95% CI: 1.15 – 1.30; p <0.0001
adolescents without previous COVID-19	
diagnosis (1:4 ratio)	Analysis: The odds of reporting a long COVID symptom in adolescents aged 15 – 18 years with previous COVID-19 diagnosis, compared to
	controls.
n = varies depending on analysis	Method: Logistic regression (adjusted for age and sex)
	<u>Age 15 - 18 years (cases, n = 6,630; controls, n = 21,640)</u>
	- Stomach aches: OR: 0.79; 95% CI: 0.65 – 0.97; p = 0.029
	- Chest pain: OR: 1.38; 95% CI: 1.12 – 1.69; p = 0.0021
	- Headache: OR: 1.22; 95% CI: 1.10 – 1.34; p <0.0001
	- Fatigue: OR: 1.06; 95% CI: 0.98 – 1.14; p = 0.086
	- Pain in muscles or joints: OR: 1.09; 95% CI: 0.91 – 1.30; p = 0.31
	- Sore throat: OR: 1.59; 95% CI: 1.21 – 2.10; p = 0.0007
	- Dizziness: OR: 1.36; 95% CI: 1.16 – 1.59; p = 0.0001
	- Rashes: OR: 0.72; 95% CI: 0.60 – 0.87; p = 0.0009
	- Mood swings: OR: 0.82; 95% CI: 0.74 – 0.91; p = 0.0002
	How shings on 0.2, 5570 Ct 0.71 0.51, p = 0.002

	- Nausea: OR: 1.09; 95% CI: 0.92 – 1.29; p = 0.27
	- Fever: OR: 1.53; 95% CI: 0.74 – 3.16; p = 0.22
	- Loss of appetite: OR: 1.15; 95% CI: 1.02 – 1.29; p = 0.015
	- Trouble breathing: OR: 2.70; 95% CI: 2.31 – 3.15; p <0.0001
	- Dark circles under eyes: OR: 0.72; 95% CI: 0.65 – 0.80; p <0.0001
	- Palpitations: OR: 1.22; 95% CI: 1.10 – 1.36; p = 0.0001
	- Trouble remembering and concentrating: OR: 1.04 ; 95% CI: $0.97 - 1.12$; $p = 0.17$
	- Cold hands or feet: OR: 0.89; 95% CI: 0.81 – 0.97; p = 0.015
	- Cough: OR: 1.63; 95% CI: 1.43 – 1.85; p <0.0001
	- Chapped lips: OR: 0.82; 95% CI: 0.74 – 0.90; p = 0.0001
	- Dizziness when standing: OR: 1.18; 95% CI: 1.08 – 1.28; p = 0.0002
	- Light sensitivity: OR: 0.94; 95% CI: 0.84 – 1.06; p = 0.40
	- Discoloured fingers or toes: OR: 0.48; 95% CI: 0.32 – 0.70; p = 0.0002
	- Extreme paleness: OR: 0.64; 95% CI: 0.51 – 0.82; p = 0.0004
Kildegaard et al. ⁽⁵⁵⁾	Analysis: Adjusted risk differences (RD) and risk ratios (RR) for hospital-based, diagnosis-based outcomes, and initiation of new medication during 1 – 6 month follow-up in COVID-19 positive children, compared to the reference cohort
Population: Cohort group: Children < 18 years with a COVID-19 diagnosis or BNT162b2 vaccination	Methods: Propensity-score weighted estimates (adjusted for age, sex, calendar time, immigration status, gestational age, comorbidities and current drug use).
n = 44,072 - 48,948 (dependent on	- Long-COVID: RD: 0.11; 95% CI: 0.08 - 0.14; RR: 18.61; 95% CI: 12.31 - 28.12
variable)	- Short-acting beta-2 agonists: RD: 0.16; 95% CI: 0.05 - 0.27; RR: 1.14; 95% CI: 1.05 - 1.24
valiabley	- Inhaled corticosteroids: RD: 0.08; 95% CI: 0.00 - 0.15; RR: 1.14; 95% CI: 1.01 - 1.29
	- Paracetamol: RD: -0.01; 95% CI: -0.09 - 0.07; RR: 0.98; 95% CI: 0.88 - 1.10
Population is further split into hospitalised	- NSAIDs: RD: 0.01; 95% CI: -0.08 - 0.09; RR: 1.01; 95% CI: 0.98 - 1.10
and non-hospitalised	- Antibiotics for respiratory tract infections: RD: 0.33; 95% CI: 0.17 - 0.49; RR: 1.13; 95% CI: 1.06 - 1.19
and non-nospitalised	- Other antibiotics: RD: 0.17; 95% CI: 0.05 - 0.29; RR: 1.11; 95% CI: 1.04 - 1.20
Deference groups rendem comple of	- Other antibiotics. RD. 0.17, 95% CI. 0.05 - 0.29, RR. 1.11, 95% CI. 1.04 - 1.20
Reference group: random sample of	
children < 18 years tested for COVID-19	Analysis: Adjusted risk differences (RD) and risk ratios (RR) for hospital-based, diagnosis-based outcomes, and initiation of new medication
n = 546,159 - 607,990 (dependent on	during 1 – 6 month follow-up in COVID-19 positive children, compared to the control group.
variable)	Method: Propensity-score weighted estimates (adjusted for age, sex, calendar time, immigration status, gestational age, comorbidities and
	current drug use).
	- Long-COVID: RD: 0.11; 95% CI: 0.08 - 0.14; RR: 18.15; 95% CI: 11.46 - 28.74
Control groups your of birth and an billion	- Short-acting beta-2 agonists: RD: 0.03; 95% CI: -0.08 - 0.14; RR: 1.02; 95% CI: 0.94 - 1.11
Control group: year of birth, sex and time	- Inhaled corticosteroids: RD: -0.06; 95% CI: -0.14 - 0.02; RR: 0.91; 95% CI: 0.81 - 1.03
matched children < 18 years with a	- Paracetamol: RD: -0.07; 95% CI: -0.16 - 0.01; RR: 0.90; 95% CI: 0.81 - 1.01
negative COVID-19 test result (ratio 10:1)	- NSAIDs: RD: -0.11; 95% CI: -0.200.02; RR: 0.90; 95% CI: 0.81 - 0.99
	- Antibiotics for respiratory tract infections: RD: 0.11; 95% CI: -0.06 - 0.28; RR: 1.04; 95% CI: 0.98 - 1.10
n = 435,225 – 489,318 (dependent on	- Other antibiotics: RD: 0.04; 95% CI: -0.08 - 0.17; RR: 1.03; 95% CI: 0.95 - 1.10
variable)	
Kostev et al. ⁽⁶⁹⁾	Analysis: Association between demographic variables, chronic conditions, and post-COVID-19 condition in children and adolescents diagnosed
Population: Children < 18 years who	with COVID-19 in Germany.
attended a general practitioner (GP) or	Method: Poisson regression (adjusted with all covariates included).

paediatric practice with a COVID-19	- Age:
diagnosis, and had a 12-month follow-up.	≤5: 1 (Reference)
	6-9 years: RR: 1.39; 95% CI: 0.64 – 3.06; p = 0.408
n = 6,568	10-12 years: RR: 1.74; 95% CI: 0.87 – 3.49; p = 0.115
11 = 0,500	13-17 years: RR: 3.14; 95% CI: 1.71 – 5.78; p <0.001
	- Sex:
	Girls: 1 (Reference)
	Boys: RR: 0.85; 95% CI: 0.59 – 1.24; p = 0.398
	- Chronic conditions diagnosed in at least 1% of patients in the year prior to the index date:
	Dermatitis and eczema: RR: 1.47; 95% CI: 0.91 – 2.37; p = 0.117
	Disorders of psychological development: RR: 0.83 ; 95% CI: $0.29 - 2.41$; $p = 0.729$
	Chronic bronchitis: RR: 0.67; 95% CI:0.31 – 1.46; p = 0.309
	Asthma: RR: 1.38; 95% CI: 0.72 – 2.63; p = 0.338
	Allergic rhinitis: RR: 2.02; 95% CI: 1.10 – 3.82; p = 0.013
	Overweight and obesity: RR: 0.80 ; 95% CI: $0.34 - 1.87$; $p = 0.609$
	Urticaria: RR: 0.89; 95% CI: 0.35 – 2.30; p = 0815
	Sleep disorders: RR: 0.72 ; 95% CI: $0.22 - 2.41$; p = 0.601
	Somatoform disorders: RR: 2.11; 95% CI: 1.02 – 4.39; p = 0.045
	Gastritis and duodenitis: RR: 0.74; 95% CI: $0.23 - 2.39$; p = 0.614
	Reaction to severe stress, and adjustment disorder: RR: 0.82 ; 95% CI: $0.25 - 2.74$; $p = 0.752$
	Chronic otitis media: RR: 0.64 ; 95% CI: $0.15 - 2.68$; p = 0.539
	Vitamin D deficiency: RR: 0.86; 95% CI: 0.21 $-$ 3.56; p = 0.834
	Anxiety disorders: RR: 2.53; 95% CI 1.05 – 6.11; $p = 0.038$
Kostev et al. ⁽⁶⁹⁾	See Appendix 6 General population, Table 1
	Analysis: Adjusted odds ratios for children experiencing persistent symptoms.
Miller et al. ⁽⁵¹⁾	Method: A random effects logistic regression model when a) excluding children who were identified through serology only and whose blood was
Miller et al.	taken after symptom onset and assumed infection occurred before persistent symptom onset, and b) excluding children with a missing gender.
	taken alter symptom onset and assumed infection occurred before persistent symptom onset, and b) excluding children with a missing gender.
Population: Children aged ≤ 17 years	A
participating in VirusWatch (a household	- Age:
cohort study). Participants were not	1. Excluding serology only:
required to have had a previous COVID-19	<2 years: OR: 1.74; 95% CI: 0.67 - 4.49
infection, but must have answered a	2-11: 1 (Reference)
question about persistent symptoms or completed surveys which allowed enough	12-17: OR: 2.38; 95% CI: 1.43 - 3.96
	2. Excluding missing gender:
follow-up time persistent symptoms to	<2: OR: 1.69; 95% CI: 0.78 - 3.66
	2-11: 1 (Reference)
develop	12-17: OR: 2.16; 95% CI: 1.47 - 3.18
	- Sex:
n = 5,032 children (1,062 evidence of past	1. Excluding serology only:
or present COVID-19 infection)	Male: 1 (Reference)
	Female: OR: 1.48; 95% CI: 0.93 - 2.36
	Missing: OR: 0.24; 95% CI: 0.06 – 0.94
	2. Excluding missing gender:
	Male: 1 (Reference)
	Female: OR: 1.48; 95% CI: 0.93 - 2.36

	- IMD Quartile:
	1. Excluding serology only:
	1st (most deprived): OR: 0.65; 95% CI: 0.25 - 1.70
	2 nd : OR: 0.85; 95% CI: 0.39 - 1.82
	3 rd : OR: 0.85; 95% CI: 0.42 - 1.73
	4 th : OR: 0.57; 95% CI: 0.42 - 1.73
	5th (least deprived): 1 (Reference)
	2. Excluding missing gender:
	1 st : (most deprived): OR: 0.73; 95% CI: 0.36 - 1.47
	2 nd : OR: 0.93; 95% CI: 0.54 - 1.59
	3 rd : OR: 0.82; 95% CI: 0.50 - 1.37
	4 th : OR: 0.66; 95% CI: 0.40 - 1.09
	5th (least deprived): 1 (Reference)
	- Long term condition's reported:
	1. Excluding serology only: OR: 2.53; 95% CI: 1.34 - 4.79
	2. Excluding missing gender: OR: 2.03; 95% CI: 1.30 - 3.17
	- History of SARS-CoV-2 infection before symptom onset:
	1. Excluding serology only: OR: 1.55; 95% CI: 0.91 – 2.63
	2. Excluding missing gender: OR: 1.73; 95% CI: 1.18 – 2.55
	Analysis: Associations between potential predictors and long COVID 3 months after a PCR test, in the total population (n = 7,139)
	Method: Univariate odds ratios.
Nugawela et al. ⁽⁸⁶⁾	- SARS-CoV-2 status:
5	Negative: 1 (Reference)
	Positive: OR: 1.48; 95% CI: 1.33 - 1.66
Population: Cohort group: Children aged	- Sex:
	Male: 1 (Reference)
11 -17 years with previous COVID-19	Female: OR: 2.02; 95% CI: 1.78 - 2.30
diagnosis	- Age (years):
	11–13: 1 (Reference)
n = 3,246	14–15: OR: 1.54; 95% CI: 1.32 - 1.80
	16–17: OR: 1.73; 95% CI: 1.50 - 1.99
Control group: month of PCR test, age,	- Index of Multiple Deprivation:
sex and geographical area matched	Quintile 1 (most deprived): 1 (Reference)
	Quintile 2: OR: 0.99; 95% CI: 0.83 - 1.17
children with negative COVID-19 diagnosis	Quintile 3: OR: 0.88; 95% CI: 0.74 - 1.05
	Quintile 4: OR: 0.79; 95% CI: 0.66 - 0.94
n = 3,893	Quintile 5 (least deprived): OR: 0.72; 95% CI: 0.60 - 0.86
	- Ethnicity:
	White: 1 (Reference)
	Asian/Asian British: OR: 0.93; 95% CI: 0.79 - 1.09
	Black/African/Caribbean: OR: 1.11; 95% CI: 0.83 - 1.48
	Mixed: OR: 1.38; 95% CI: 1.09 - 1.76
	Others: OR: 0.70; 95% CI: 0.43 - 1.16
	Preferred not to say: 0.96; 95% CI: 0.49 - 1.87

- Self-rated physical health:
Very good: 1 (Reference)
Good: OR: 2.06; 95% CI: 1.77 - 2.39
Okay: OR: 3.57; 95% CI: 3.04 - 4.20
Poor/very poor: OR: 7.60; 95% CI: 5.41 - 10.68
- Self-rated mental health:
Very good: 1 (Reference)
Good: OR: 2.12; 95% CI: 1.75 - 2.56
Okay: OR: 3.91; 95% CI: 3.23 - 4.73
Poor/very poor: OR: 12.72; 95% CI: 10.17 - 15,91
- Loneliness:
Never: 1 (Reference)
Hardly ever: OR: 1.75; 95% CI: 1.45 - 2.11
Occasionally: OR: 3.91; 95% CI: 3.23 - 4.73
Some of the time: OR: 4.81; 95% CI: 3.98 - 5.80
Often/always: OR: 7.98; 95% CI: 6.34 - 10.04
- Number of symptoms at testing:
0: 1 (Reference)
1–4: OR: 0.43; 95% CI: 0.32 - 0.57
5+: OR: 1.88; 95% CI: 1.62 - 2.19
- Mobility:
No problems: 1 (Reference)
Some/a lot of problems: OR: 6.81; 95% CI: 5.42 - 8.55
- Looking after self:
No problems: 1 (Reference)
Some/a lot of problems: OR: 8.89; 95% CI: 6.92 - 11.40
- Doing usual activities:
No problems: 1 (Reference)
Some/a lot of problems: OR: 6.52; 95% CI: 5.57 - 7.64
- Having pain:
No problems: 1 (Reference)
Some/a lot of problems: OR: 9.84; 95% CI: 8.51 - 11.38
- Feeling worried/sad:
No problems: 1 (Reference)
A bit: OR: 4.05; 95% CI: 3.56 - 4.60
Very worried/sad: OR: 15.12; 95% CI: 12.20 - 18.75
Analysis: Associations between potential predictors and long COVID 3 months after a PCR test, in those SARS-CoV-2 negative (n = 3,893)
Method: Univariate odds ratios.
- Sex:
Male: 1 (Reference)
Female: OR: 2.11; 95% CI: 1.75 - 2.54
- Age (years):
 11–13: 1 (Reference)

	14–15: OR: 1.71; 95% CI: 1.37 - 2.13
	16–17: OR: 1.73; 95% CI: 1.42 - 2.12
	- Index of Multiple Deprivation:
	Quintile 1 (most deprived): 1 (Reference)
	Quintile 2: OR: 0.82; 95% CI: 0.64 - 1.05
	Quintile 3: OR: 0.79; 95% CI: 0.62 - 1.02
	Quintile 4: OR: 0.69; 95% CI: 0.53 - 0.89
	Quintile 5 (least deprived): OR: 0.72; 95% CI: 0.56 - 0.93
	- Ethnicity:
	White: 1 (Reference)
	Asian/Asian British: OR: 0.93; 95% CI: 0.73 - 1.18
	Black/African/Caribbean: OR: 1.36; 95% CI: 0.92 - 2.01
	Mixed: OR: 1.43; 95% CI: 1.03 - 2.00
	Others: OR: 1.00; 95% CI: 0.50 - 2.00
	Preferred not to say: OR: 0.59; 95% CI: 0.18 - 1.97
	- Self-rated physical health:
	Very good: 1 (Reference)
	Good: OR: 2.49; 95% CI: 1.98 - 3.13
	Okay: OR: 4.51; 95% CI: 3.54 - 5.76
	Poor/very poor: OR: 14.91; 95% CI: 9.32 - 23.85
	- Self-rated mental health:
	Very good: 1 (Reference)
	Good: OR: 2.55; 95% CI: 1.87 - 3.81
	Okay: OR: 5.50; 95% CI: 4.06 - 7.46
	Poor/very poor: OR: 17.46; 95% CI: 12.43 - 24.53
	- Loneliness:
	Never: 1 (Reference)
	Hardly ever: OR: 2.16; 95% CI: 1.59 - 2.93
	Occasionally: OR: 5.28; 95% CI: 3.91 - 7.14
	Some of the time: OR: 6.86; 95% CI: 5.10 - 9.22
	Often/always: OR: 13.41; 95% CI: 9.56 - 18.80
	- Number of symptoms at testing
	0: 1 (Reference)
	1–4: OR: 0.41; 95% CI: 0.24 - 0.70
	5+: OR: 2.20; 95% CI: 1.55 - 3.12
	- Mobility:
	No problems: 1 (Reference)
	Some/a lot of problems: OR: 8.82; 95% CI: 6.53 - 11.91
	- Looking after self:
	No problems: 1 (Reference)
	Some/a lot of problems: OR: 10.58; 95% CI: 7.65 - 14.62
	- Doing usual activities:
	No problems: 1 (Reference)
	Some/a lot of problems: OR: 10.31; 95% CI: 8.26 - 12.88
	- Having pain:
L	

No problems: 1 (Reference)
Some/a lot of problems: OR: 14.66; 95% CI: 11.94 - 18.00
- Feeling worried/sad:
No problems: 1 (Reference)
A bit: OR: 5.11; 95% CI: 4.21 - 6.21
Very worried/sad: OR: 17.54; 95% CI: 13.17 - 23.36
Very worneu/sau. OR. 17.54, 95% CI. 15.17 - 25.56
Analysis: Associations between potential predictors and long COVID 3 months after a PCR test, in those SARS-CoV-2 positive (n = 3,246).
Method: Univariate odds ratios.
- Sex:
Male: 1 (Reference)
Female: OR: 1.96; 95% CI: 1.65 - 2.34
- Age (years):
11–13: 1 (Reference)
14–15: OR: 1.36; 95% CI: 1.09 - 1.70
16–17: OR: 1.70; 95% CI: 1.40 - 2.07
- Index of Multiple Deprivation:
Quintile 1 (most deprived): 1 (Reference)
Quintile 2: OR: 1.18; 95% CI: 0.93 - 1.49
Quintile 3: OR: 1.00; 95% CI: 0.78 - 1.28
Quintile 4: OR: 0.90; 95% CI: 0.70 - 1.16
Quintile 5 (least deprived): OR: 0.72; 95% CI: 0.56 - 0.93
- Ethnicity:
White: 1 (Reference)
Asian/Asian British: OR: 0.90; 95% CI: 0.72 - 1.13
Black/African/Caribbean: OR: 0.89; 95% CI: 0.57 - 1.38
Mixed: OR: OR: 1.36; 95% CI: 0.95 - 1.93
Others: 0.49; 95% CI: 0.24 - 1.00
Preferred not to say: OR: 1.23; 95% CI: 0.54 - 2.83
- Self-rated physical health:
Very good: 1 (Reference)
Good: OR: 1.80; 95% CI: 1.47 - 2.20
Okay: OR: 3.00; 95% CI: 2.40 - 3.74
Poor/very poor: OR: 3.71; 95% CI: 2.23 - 6.19
- Self-rated mental health:
Very good: 1 (Reference)
Good: OR: 1.92; 95% CI: 1.50 - 2.46
Okay: OR: 3.06; 95% CI: 2.39 - 3.93
Poor/very poor: OR: 10.54; 95% CI: 7.72 - 14.40
- Loneliness:
Never: 1 (Reference)
Hardly ever: OR: 1.54; 95% CI: 1.21 - 1.96
Occasionally: OR: 3.30; 95% CI: 2.56 - 4.26
Some of the time: OR: 3.82; 95% CI: 2.97 - 4.91

	Often/always: OR: 5.23; 95% CI: 3.75 - 7.30
	- Number of symptoms at testing:
	0: 1 (Reference)
	1–4: OR: 0.37; 95% CI: 0.26 - 0.52
	5+: OR: 1.49; 95% CI: 1.24 - 1.79
	- Mobility:
	No problems: 1 (Reference)
	Some/a lot of problems: OR: 5.17; 95% CI: 3.65 - 7.34
	- Looking after self:
	No problems: 1 (Reference)
	Some/a lot of problems: OR: 7.61; 95% CI: 5.13 - 11.28
	- Doing usual activities:
	No problems: 1 (Reference)
	Some/a lot of problems: OR: 4.04; 95% CI: 3.22 - 5.08
	- Having pain:
	No problems: 1 (Reference)
	Some/a lot of problems: OR: 6.65; 95% CI: 5.40 - 8.18
	- Feeling worried/sad:
	No problems: 1 (Reference)
	A bit: OR: 3.35; 95% CI: 2.81 - 3.99
	Very worried/sad: OR: 15.38; 95% CI: 10.90 - 21.70
	Analysis: Risk factors associated with post-COVID-19 condition in adults at 6 month follow-up.
	Method: Multivariable logistic regression with "COVID-19 severity" variable as exposure, "post-COVID-19 condition" as an outcome, comorbidities
	as covariates, gender, and age as effect modifiers.
	Service CONTR 10: 00: 00: 00: 00: 00: 00: 00: 00: 00:
	- Severe COVID-19: OR: 1.08; 95% CI: 0.49 - 2.43; p = 0.85
	- Sex:
Pazukhina et al. ⁽⁶⁶⁾	Male: 1 (Reference)
	Female: OR: 2.04; 95% CI: 1.57 - 2.65; p < 0.001
Population: COVID-19 hospitalised	- Age: OR: 1.00; 95% CI: 0.99 to 1.01; P = 0.56
patients (post discharge)	- Chronic cardiac disease: OR: 1.44; 95% CI: 0.99 - 2.10; p = 0.06
	- Hypertension: OR: 1.178; 95% CI: 0.87 - 1.58; p = 0.29
Population further split into adults ≥ 18	- History of peripheral or cardiac revascularisation: OR: 0.65; 95% CI: 0.34 - 1.21; p = 0.18
years old and children < 18 years old	- Chronic pulmonary disease (not asthma): OR: 1.24; 95% CI: 0.77 - 2.02; p = 0.38
	- Asthma (physician diagnosed): OR: 1.08; 95% CI: 0.59 - 1.99; p = 0.81
$n = 1,013$ adults ≥ 18 years old	- Chronic kidney disease: OR: 1.13; 95% CI: 0.62 - 2.07; p = 0.69
	- Chronic neurological disorder: OR: 0.73; 9% CI: 0.41 - 1.32; p = 0.30
n = 360 children < 18 years old	- Malignant neoplasm: OR: 0.86; 95% CI: 0.45 - 1.63; p = 0.64
	- Diabetes Mellitus: OR: 1.04; 95% CI: 0.71 - 1.51; p = 0.85
	Analysis: Risk factors associated with post-COVID-19 condition in adults at 12-month follow-up
	Method: Multivariable logistic regression with "COVID-19 severity" variable as exposure, "post-COVID-19 condition" as an outcome, comorbidities
	as covariates, gender, and age as effect modifiers.

	- Severe COVID-19: OR: 1.16; 95% CI: 0.50 - 2.57; p = 0.72
	- Severe COVID-13: OK. 1.10, 95% CI. 0.50 - 2.57, p = 0.72
	Male: 1 (Reference)
	Female: OR: 2.04; 95% CI: 1.54 - 2.69; p < 0.001
	- Age: OR: 1.00; 95% CI: 0.98 - 1.01; p = 0.40
	- Chronic cardiac disease: OR: 1.16; 95% CI: 0.79 - 1.70; p = 0.45
	- Hypertension: OR: 1.42; 95% CI: 1.04 - 1.94; p = 0.03
	- History of peripheral or cardiac revascularisation: OR: 1.04 ; 95% CI: $0.54 - 1.97$; $p = 0.91$
	- Chronic pulmonary disease (not asthma): OR: 1.32; 95% CI: 0.80 - 2.16; p = 0.27
	- Asthma (physician diagnosed): OR: 1.17; 95% CI: 0.62 - 2.14; p = 0.62
	- Chronic kidney disease: OR: 1.03; 95% CI: 0.56 - 1.88; p = 0.91
	- Chronic neurological disorder: OR: 0.70; 95% CI: 0.37 - 1.29; $p = 0.27$
	- Malignant neoplasm: OR: 1.15; 95% CI: 0.59 - 2.18; p = 0.68
	- Diabetes Mellitus: OR: 1.02; 95% CI: 0.69 - 1.50; $p = 0.92$
	- Diabetes Pielitus. OK. 1.02, 35% Ci. 0.05 - 1.30, $p = 0.32$
	Analyzian Dick factors associated with part COVID 10 condition in children at 6 month follow up
	Analysis: Risk factors associated with post-COVID-19 condition in children at 6 month follow-up.
	Method: Multivariable logistic regression with "COVID-19 severity" variable as exposure, "post-COVID-19 condition" as an outcome, comorbidities
	as covariates, gender, and age as effect modifiers.
	- Severe COVID-19: OR: 1.93; 95% CI: 0.47 - 6.66; p = 0.32
	- Sex:
	Male: 1 (Reference)
	Female: OR: 1.31; 95% CI: 0.77 - 2.26; p =0.32
	- Age: OR: 1.02; 95% CI: 0.98 - 1.07; p = 0.30
	- Heart diseases: OR: 1.58; 95% CI: 0.37 - 5.60; p = 0.50
	- Allergic respiratory disease: OR: 1.76; 95% CI: 0.77 - 3.85; p =0.16
	- Neurological disorder: OR: 4.38; 95% CI: 1.36 - 15.67; $p = 0.02$
	- Gut problems: OR: 1.40; 95% CI: 0.50 - 3.59; p = 0.50
	- Gut problems. OK. 1.40, 35% CI. 0.50 - 5.55, $p = 0.50$
	Analysis: Risk factors associated with post-COVID-19 condition in children at 12-month follow-up.
	Method: Multivariable logistic regression with "COVID-19 severity" variable as exposure, "post-COVID-19 condition" as an outcome, comorbidities
	as covariates, gender, and age as effect modifiers.
	- Severe COVID-19: OR: 2.70; 95% CI: 0.46 - 11.58; p = 0.22
	- Sex:
	Male: 1 (Reference)
	Female: OR: 1.17; 95% CI: 0.58 - 2.42; p = 0.66
	- Age: OR: 1.05; 95% CI: 0.99 - 1.12; p = 0.10
	- Heart diseases: OR: 0.29; 95% CI: 0.01 - 2.21; p = 0.32
	- Allergic respiratory disease: OR: 2.66; 95% CI: 1.04 - 6.47; p = 0.03
	- Neurological disorder: OR: 8.96; 95% CI: 2.55 - 34.82; p < 0.001
	- Gut problems: OR: 2.26; 95% CI: 0.71 - 6.39; p = 0.14
Sørensen et al. ⁽⁵⁶⁾	See Appendix 6 General population, Table 4

	Analysis Independent offset of sender as any suisting discoses and sumstand during CARC (s)/2 infection on Long COURD 10 superhease in
	Analysis: Independent effect of gender, age, pre-existing diseases, and symptoms during SARS-CoV-2 infection on Long COVID-19 symptoms in
	the primary care setting.
	Method: Multivariable logistic regression.
	<u>At least one long COVID symptom (n = 153)</u>
	- Sex:
	Male: 1 (Reference):
	Female: OR: 1.18, 95% CI: $0.79 - 1.76$; p = 0.421
	- Age (years):
	0–5 years: 1 (Reference)
	6–10 years: OR: 1.41; 95% CI: 0.84 – 2.37; p = 0.194
	11–16 years: OR: 2.18; 95% CI: 1.31 – 3.62; p = 0.003
	- Pre-existing diseases:
	No: 1 (Reference)
	Yes: OR: 1.11, 95% CI: 0.58 – 2.12; p = 0.746
	- Symptomatic acute infection:
	No: 1 (Reference)
Trapani et al. ⁽³⁶⁾	Yes: OR: 6.57; 95% CI: 4.36 – 9.9; p <0.001
- F	Absorbed fations (n 44)
	<u>Abnormal fatigue (n = 44)</u>
Population: Children aged 0 – 16 years old	- Sex:
with a previous COVID-19 diagnosis	Male: 1 (Reference)
	Female: OR: 1.31; 95% CI: 0.67 – 2.55; p = 0.424
n = 689	- Age:
	1–5 years: 1 (Reference)
	6–10 years: OR: 2.85; 95% CI: 0.87 – 9.34; p = 0.083
	11–16 years: OR: 7.05; 95% CI: 2.35 – 21.12; p <0.001
	- Pre-existing diseases:
	No: 1 (Reference)
	Yes: OR: 1.52; 95% CI: 0.62 – 3.74; p = 0.355
	- Symptomatic acute infection:
	No. 1 (Reference)
	Yes: OR: 12.22; 95% CI: 5.01 – 29.78; p <0.001
	No velocical symptoms $(n = 42)$
	<u>Neurological symptoms (n = 43)</u>
	- Sex:
	Male: 1 (Reference)
	Female: OR: 1.67; 95% CI: 0.85 – 3.24; p = 0.132
	- Age (years):
	1–5 years: 1 (Reference)
	6–10 years: OR: 5.27; 95% CI: 1.47 – 18.94; p = 0.011
	11–16 years: OR: 8.73; 95% CI: 2.54 – 29.98; p = 0.001
	- Pre-existing diseases:
	No: 1 (Reference)

Yes: OR: 0.79; 95% CI: 0.28 – 2.18; p = 0.646
- Symptomatic acute infection:
No: 1 (Reference)
Yes: OR: 6.61; 95% CI: 3.13 – 13.94; p <0.001
Respiratory symptoms (n = 38)
-Sex:
Male: 1 (Reference)
Female: OR: 0.98; 05% CI: 0.5 – 1.91; p = 0.954
- Age (years):
0–5 years: 1 (Reference)
6–10 years: OR: 0.32; 95% CI: 0.14 – 0.72; p = 0.006
11–16 years: OR: 0.23; 95% CI: 0.09 – 0.58; p = 0.002
- Pre-existing diseases:
No: 1 (Reference)
Yes: OR: 1.14; 95% CI: 0.32 – 4.03; p = 0.840
- Symptomatic acute infection:
No: 1 (Reference)
Yes: OR: 2.11; 95% CI: 1.07 – 4.13; p = 0.030
Psychological symptoms (n=31)
-Sex:
Male: 1 (Reference)
Female: OR: 1.61; 95% CI: 0.75 – 3.43; p = 0.217
- Age (years):
1–5 years: 1 (Reference) 6–10 years: OR: 1.28; 95% CI: 0.39 – 4.16; p = 0.682
11-16 years: OR: 3.79 ; $95%$ CI: $1.36 - 10.52$; $p = 0.011$
- Pre-existing diseases:
No: 1 (Reference)
Yes: OR: 0.78 ; 95% CI: $0.22 - 2.74$; p = 0.699
- Symptomatic acute infection:
No: 1 (Reference)
Yes: $OR: 3.08; 95\%$ CI: $1.42 - 6.67; p = 0.004$
Analysis: Independent effect of gender, age, allergic diseases, and symptoms during SARS-CoV-2 infection on respiratory symptoms in the
primary care setting.
Method: Multivariable logistic regression.
Respiratory symptoms (n=38)
- Sex:
Male: 1 (Reference)
Female: OR: 2.48; 95% CI: 0.06 – 108.85: p = 0.638
- Age (years):

0-5 years: 1 (Reference)
6–10 years: OR: 0.07; 95% CI: 0 – 2.84: p = 0.162
11–16 years: -
- Allergic diseases:
No: 1 (Reference)
Yes: OR: 1.29; 95% CI: 0.04 – 39.72; p = 0.883
- Symptomatic acute infection:
No: 1 (Reference)
Yes: OR: 2.15; 95% CI: 0.07 – 61.42; p = 0.654
Analysis: Independent effect of setting, gender, age, and symptoms during SARS-CoV-2 infection on the Long COVID-19 symptoms.
Method: Multivariable logistic regression.
At least one long COVID-19 symptom (cases=188)
- Setting:
Primary care: 1 (Reference)
Hospital: OR: 2.49; 95% CI: 1.36 - 4.54; p = 0.003
- Sex:
Male: 1 (Reference)
Female: OR: 1.89; 95% CI: 0.81 - 1.73; p = 0.369
- Age (years):
0-5 years: 1 (Reference)
6-10 years: OR: 1.76; 95% CI: 1.08 - 2.88; p = 0.023
11-16 years: OR: 2.86; 95% CI: 1.78 - 4.59; p <0.001
- Symptoms during infection:
No: 1 (Reference)
Yes: OR: 6.16; 95% CI:4.14 - 9.18; p <0.001
Respiratory disorders (cases=49)
- Setting:
Primary care: 1 (Reference)
Hospital: OR: 2.27; 95% CI: 1.02 - 5.03; p = 0.044
- Sex:
Male: 1 (Reference)
Female: OR: 0.89; 95% CI: 0.49 - 1.61; p = 0.699
- Age (years):
0-5 years: 1 (Reference)
6-10 years: OR: 0.60; 95% CI: 0.29 - 1.24; p = 0.169
11-16 years: OR: 0.54; 95% CI: 0.26 - 1.13; p = 0.102
- Symptomatic acute infection:
No: 1 (Reference)
Yes: OR: 1.96; 95% CI: 1.03 - 5.04; p = 0.044
Psychological disorders (cases n = 52)

- Setting:
Primary care: 1 (Reference)
Hospital: OR: 15.21; 95% CI: 6.98 - 33.14; p <0.001
- Sex:
Male: 1 (Reference)
Female: OR: 1.61; 95% CI: 0.83 - 3.09; p = 0.155
- Age (years):
1-5 years: 1 (Reference)
6-10 years: OR: 1.66; 95% CI: 0.62 - 4.4; p = 0.311
11-16 years: OR: 4.37; 95% CI: 1.83 - 10.38; p = 0.001
- Symptomatic acute infection:
No: 1 (Reference)
Yes: OR: 2.55; 95% CI: 1.28 - 5.08; p = 0.008
Neurological symptoms (cases $n = 50$)
- Setting:
Primary care: 1 (Reference)
Hospital: OR: 1.56; 95% CÍ: 0.62 - 3.93; p = 0.34
- Sex:
Male: 1 (Reference)
Female: OR: 2.06; 95% CI: 1.1 - 3.86; p = 0.024
- Age (years):
1-5 years: 1 (Reference)
6-10 years: OR: 2.91; 95% CI: 1.09 - 7.8; p = 0.033
11-16 years: OR: 4.74; 95% CI: 1.88 - 11.97; $p = 0.001$
- Symptomatic acute infection:
No: 1 (Reference)
Yes: OR: 6.91; 95% CI: 3.32 - 14.43; p <0.001

Appendix 8. Medically vulnerable

Table 1. Long COVID prevalence and or incidence in the medically vulnerable.

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
Belkacemi et al. ⁽⁷¹⁾	Not Reported	At 6 months, 216 (17.7%) patients reported having some long-lasting clinical symptoms. Population with long lasting clinical symptoms n=216 00-44: n=14 (6.5%) 45-64: n=55 (25.5%) 65-74: n=71 (32.9%) 75-84: n=46 (21.3%)	N/A
Garjani et al. ⁽⁴⁶⁾	Not Reported	At least 165 participants (29.7%) had long- standing COVID-19 symptoms for \geq 4 weeks and 69 (12.4%) for \geq 12 weeks.	N/A

Author	Assessment Mode	General Symptoms	Cardiovasc ular Symptoms	Neurologic Symptoms	Respirator y Symptoms	Psychological/P sychiatric Symptoms	Ear, Nose and Throat Symptoms	Musculoskeletal Symptoms	Gastrointestinal Symptoms
Belkacemi et al. ⁽⁷¹⁾	Authors' own design National registry data entered into survey by nephrologists and research assistants and not based on standardised form directly filled in by the patients The information collected concerned the absence or presence of the following persistent clinical symptoms: extreme fatigue headache muscle loss or weight loss > 5% not recovered respiratory sequelae tachycardia chest pain joint or muscle pain persistent anosmia or ageusia diarrhea sensory disorders neuro-cognitive disorders	6-month follow-up n (%): One symptom: 137 (63.4%) Two symptoms: 47 (21.8%) Three symptoms: 18 (8.3%) Four symptoms: 9 (6%) Five symptoms: 1 (0.5%) Extreme fatigue: 68 (31.5%) Other: 7 (3.2%)	6-month follow-up n (%): Respiratory symptoms or chest pain: 32 (14.8%) Tachycardia: 6 (2.8%)	6-month follow-up n (%): Sensory disorders: 19 (8.8%) Neuro- cognitive disorders: 11 (5.1%) Headache: 19 (8.8%)	6-month follow-up n (%): Respiratory symptoms or chest pain: 32 (14.8%)	6-month follow- up n (%): Post-traumatic distress syndrome, depression, anxiety: 28 (13.0%)	6-month follow-up n (%): Persistent anosmia or ageusia: 5 (2.3%)	6-month follow- up n (%): Joint or muscle pain: 20 (9.3%)	6-month follow-up n (%): Muscle loss or weight loss > 5% not recovered at 6 months: 114 (52.8%) Diarrhoea: 13 (6.0%)

Table 2. Long COVID symptoms in the medically vulnerable.

Author	Assessment Mode	General Symptoms	Cardiovasc ular Symptoms	Neurologic Symptoms	Respirator y Symptoms	Psychological/P sychiatric Symptoms	Ear, Nose and Throat Symptoms	Musculoskeletal Symptoms	Gastrointestinal Symptoms
Garjani et al. ⁽⁴⁶⁾	post-traumatic stress syndrome depression anxiety other sequelae. Authors' own design Online questionnaire UKMSR study participants used online questionnaires to regularly update their COVID-19 symptoms, recovery status, and duration of symptoms for those who fully recovered. Participants were asked "Have you recovered from your coronavirus?" Possible answers included: Yes, I	Symptoms ≥4 post- COVID-19: New or worse fatigue: 60/95 (63.2%) Fever: 3/95 (3.2%) Symptoms ≥12 post- COVID-19: New or worse fatigue: 41/60 (68.3%)			Symptoms ≥4 post- COVID-19: Lower respiratory tract symptoms included coughs, shortness of breath, or heaviness in the chest: 46/95 (48.4%) Symptoms ≥12 post- COVID-19: Lower respiratory tract symptoms			Symptoms ≥4 post-COVID-19: New muscle pain: 34/95 (35.8%) Symptoms ≥12 post-COVID-19: New muscle pain: 27/60 (45%)	Symptoms ≥4 post- COVID-19: Gastrointestinal symptoms included diarrhoea, nausea or vomiting, or stomach pain: 33/95 (34.7%) Symptoms ≥12 post- COVID-19: Gastrointestinal symptoms included diarrhoea, nausea or vomiting, or stomach pain: 25/60 (41.7%)
	have fully recovered; I am mostly recovered; No, I am still experiencing symptoms. Participants were considered fully recovered when they chose option 1 in the above question.	Fever: 3/60 (5%)			included coughs, shortness of breath, or heaviness in the chest: 35/60 (58.3%)		throat, nasal congestion, or sneezing: 15/60 (25%) Change in smell or taste: 17/60 (28.3%)		

Author	Assessment Mode	General Symptoms	Cardiovasc ular Symptoms	Neurologic Symptoms	Respirator y Symptoms	Psychological/P sychiatric Symptoms	Ear, Nose and Throat Symptoms	Musculoskeletal Symptoms	Gastrointestinal Symptoms
	Participants were asked how many days were they affected by the virus. They were asked which of the following symptoms they still have (list includes High temperature, Coughs, Breathing difficulties, Chest tightness, Sore throat, Runny nose, Sneezing, Headache, Change of taste or smell, Feeling queasy or throwing up, Diarrhoea, Stomach ache, New or worse fatigue, New								

Table 3. Summary of association analysis extracted from primary research studies focusing on the	medically
vulnerable.	

Author, population and risk analysis sample size (n)	Risk analysis type and outcome(s)
Belkacemi et al. ⁽⁷¹⁾ Population: Patients on dialysis who contracted COVID-19 and were alive and still on dialysis 6 months after acute COVID-19 illness n = 216/1,217 (those with long- lasting clinical symptoms) n = 160/1,217 (those with impaired general condition)	Analysis: Factors associated with long-lasting clinical symptoms or impaired general condition (extreme fatigue or weight loss) at 6 months Method: Logistic regression Long-lasting clinical symptoms - Highest degree of acute COVID-19 severity: Midit: 1 (Reference) Moderate: OR: 1.64; 95% CI: 1.16 - 2.33 Severe: OR: 5.03; 95% CI: 0.19 - 0.83 45-46; OR: 0.49; 95% CI: 0.28 - 0.85 45-44; OR: 0.65; 95% CI: 0.28 - 0.85 45-44; OR: 0.649; 95% CI: 0.49 - 1.14 • Time on dialysis before infection (years): OR:1.03; 95% CI:1.01 - 1.06 • Diabetes: OR: 1.70; 95% CI: 0.68 - 4.24 18.55.23; OR: 1.70; 95% CI: 1.06 - 2.17 BMI (kg/m ³); 23-25: 1 (Reference) 30: OR: 2.35; 95% CI: 1.00 - 3.52 >30: OR: 2.35; 95% CI: 1.30 - 4.26 - Coronary artery disease: - - Myocardial infarction: - Impaired general condition - Highest degree of severity: Mid: 1 (Reference) Moderate: OR: 1.47; 95% CI: 0.09 - 2.18

Author, population and risk analysis sample size (n)	Risk analysis type and outcome(s)
	- Time on dialysis before infection (years): OR: 1.03; 95% CI: 1.00 – 1.05
	- Diabetes: OR: -
	- BMI (kg/m ²): 23-25: 1 (Reference)
	<18.5: OR: 3.57; 95% CI: 1.23 – 10.33
	18.5-23: OR: 2.74; 95% CI: 1.24 – 6.05
	25-30: OR: 3.47; 95% CI: 1.61 – 7.49
	>30: OR: 4.99; 95% CI: 1.30 - 10.83
	- Coronary artery disease: OR: 1.31; 95% CI: 0.80 – 2.14 - Myocardial infarction: OR: 2.05; 95% CI: 1.18 – 3.57
	Analysis: Pre-COVID-19 factors associated with recovery from COVID-19
	Method: Univariable and multivariable Cox Regression (unadjusted for age, sex, ethnicity and MS disease duration; adjusted for age and MS type for
	taking a disease modifying therapy (DMT); adjusted for age, gender and MS disease duration for MS type; adjusted for age, gender, MS disease duration
	and MS type for web-based Expanded Disability Status Scale (Web-EDSS); adjusted for age, gender, ethnicity and Web-EDSS categories for anxiety and
	or depression).
	- Age (n = 556): aHR: 0.996; 95% CI: 0.988 - 1.005
	- Sex (n = 556)
Garjani et al. ⁽⁴⁶⁾	Male: 1 (Reference)
	Female: aHR: 0.756; 95% CI: 0.609 - 0.937
Population: Those with multiple	- Ethnicity (n = 556) White: 1 (Reference)
sclerosis (MS) and a previous	All other ethnicities: aHR: 1.374; 95% CI: 0.937 - 2.016
diagnosis of COVID-19	- MS disease duration (n = 538): aHR: 0.995; 95% CI: 0.983 - 1.008
	- Anxiety and or depression (n = 314): aHR: 0.708; 95% CI: 0.533 - 0.941
n = varies by variable	- Web-EDSS Score (n = 318):
	0-0.25: 1 (Reference)
	3-3.5: aHR: 1.123; 95% CI: 0.783 - 1.610 4-5.5: aHR: 0.751; 95% CI 0.542 - 1.040
	6-6.5: aHR: 0.698; 95% CI 0.485 - 1.006
	>7: aHR: 0.614; 95% CI 0.381 - 0.989
	- MS type (n = 538):
	Relapsing-remitting multiple sclerosis: 1 (Reference)
	Secondary progressive multiple sclerosis: aHR: 1.049; 95% CI: 0.765 - 1.438 Primary progressive multiple sclerosis: aHR: 1.212; 95% CI: 0.798 - 1.841
	- Taking a DMT (n = 556): aHR: 0.985 ; 95% CI: $0.788 - 1.232$

Appendix 9. Those with a history of severe COVID-19 illness

Table 1. Long COVID prevalence and or incidence in those with a history of severe COVID-19 illness.

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence		
Asadi-Pooya et al. ⁽¹¹⁸⁾	Symptoms, complaints, or problems that the patients did not experience before their COVID19 diagnosis, but have persistently had during the seven days prior to the follow-up.	2,915 (62.3%) over both time periods 3-6 month follow up: 1,774 (66%) 6-12 month follow up: 1,141 (57%)	N/A		
Bahat et al. ⁽⁷⁰⁾	Not Reported	Not Reported	N/A		
Barreto et al. ⁽³⁷⁾	None provided. All participants were recruited as "long COVID" cases. Some were physician referred after hospitalisation of COVID. Those that were self-referred in (outpatients) were only included if they had persistent COVID-19 symptoms (at least one month post the acute infection).	All participants were recruited as long COVID	N/A		
Battistella et al. ⁽³⁸⁾	Not Reported	Post-COVID- 19 Functional Status (PCFS) scale results revealed that 70.86% of participants (567 of 800) reported limitations in daily activities, which were severe for 5.62% (45 of 800) of them.	N/A		
Boglione et al. ⁽³⁰⁾	Not Reported	30 day follow-up: 322 (71.7%) 180 day follow-up: 206 (45.9%)	N/A		
Buonsenso et al. ⁽³⁴⁾	All the symptoms lasting more than 1 month in children with a specific analysis of symptoms persisting >6 months post- SARS- CoV-2 infection	All Observations n (%) Fully recovered scale (1 not recovered, 10 fully recovered) 1-4: 17 (2.6%) 5-7: 73 (11%) 8-10: 576 (86%) 1-5 Months n (%) Fully recovered scale (1 not recovered, 10 fully recovered) 1-4: 14 (4%) 5-7: 46 (13%) 8-10: 288 (83%) 6-9 Months n (%)	N/A		

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
		Fully recovered scale (1 not recovered, 10 fully recovered) 1-4: 2 (1.3%) 5-7: 7 (4.6%) 8-10: 144 (94%)	
		≥12 Months n (%) Fully recovered scale (1 not recovered, 10 fully recovered) 1-4: 1 (0.7%) 5-7: 15 (9.9%) 8-10: 136 (89%)	
Buttery et al. ⁽⁴⁴⁾	Not Reported	The population all had (self-reported) long COVID	N/A
Comelli et al. ⁽³¹⁾	Not Reported	91.7% (418) of patients reported at least one persisting symptom/sequela 12 months after hospital discharge and 69.6% (317) reported two or more symptoms.	N/A
Damiano et al. ⁽³⁹⁾	Not Reported	Individual symptom prevalence reported – See Appendix 9 Severe COVID-19, Table 2	N/A
de Oliveira et al. ⁽⁴⁰⁾	The persistence of at least one physical and/or mental health symptom 4 or more weeks after disease onset.	Long COVID was prevalent in 84% of the participants (369/439)	N/A
Evans et al. ⁽⁴⁵⁾	Not Reported	Any symptom at 1-year follow up: 773/817 (94.6%) Symptom count: median 10 (4-16)	N/A
Fang et al. ⁽⁶⁵⁾	Not Reported. However, patients were asked to report any sustained, intermittent, and emerging symptoms, respectively. The patient's current symptoms were carefully documented and evaluated by specialists to distinguish from their pre-disease status or other underlying diseases that were not associated with COVID-19.	Any one of long COVID post-sequelae: Total patients: 630 (51.1%) Severe: 252 (57.5%) Non-severe: 378 (47.5%)	N/A
Feldman et al. ⁽⁸⁵⁾	The primary outcome is presence of long COVID, defined by the response to the following question: "Have you made a full recovery or are you still troubled by symptoms?"	Symptoms reported at least 2 months post- COVID-19 hospitalisation in persons who were discharged home: - Long COVID (troubled by persistent symptoms) (N = 124) 31.5% - No symptoms whatsoever: 104 (26.3%) - Fully recovered had recovered and were no longer troubled by symptoms and on average, recovery occurred within 2 months: 270	N/A

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
Fernández-de-las-Peñas et al. ⁽²³⁾	Not reported	(68.5%) - The proportion at 12 weeks for those troubled by persisting symptoms: 31.8%. - The proportion complaining of any symptom at both 8 weeks and 12 weeks: 73.7% Not reported	N/A
Fernández-de-las-Peñas et al. ⁽²⁶⁾	Not reported	Not reported	N/A
Fernández-de-las-Peñas et al. ⁽²⁵⁾	Not reported	Not reported	N/A
Fernández-de-las-Peñas et al. ⁽²⁸⁾	Not reported	Not reported	N/A
Fernández-de-las-Peñas et al. ⁽²⁷⁾	Long COVID patients include those with presence of post–COVID-19 symptoms 2 years after acute SARS-CoV-2 infection.	Patients who experiences at least 1 symptom post-COVID infection (n %) Hospitalised: 215 (59.7%) Non-hospitalised: 208 (67.5%)	N/A
Fernández-de-las-Peñas et al. ⁽²⁴⁾	Not reported	Not reported	N/A
Ferreira et al. ⁽⁴¹⁾	Not reported	618 (83%) of participants had at least one of the ten symptoms measured with standardised instruments	N/A
Frontera et al. ⁽¹¹⁷⁾	Post-acute symptoms of COVID-19 was defined according to Centre for Disease Control and Prevention (CDC) criteria as new or persistent symptoms occurring ≥4 weeks after SARS-CoV-2 infection.	90% of patients at 6 months and 87% of patients at 12 months had abnormalities on at least one of the metrics assessed (e.g. functional status and disability, activities of daily living, global cognition, quality of life).	N/A
Funk et al. ⁽⁷⁷⁾	The term long COVID was not utilised however Post Covid-19 Conditions (PCCs) were the focus. Post–COVID-19 conditions were present if the caregiver indicated at the 90-day interview that the participant had any persistent, new, or returning symptoms or health problems. Post–COVID-19 conditions were not present if the caregiver indicated that these symptoms were neither persistent (i.e., recovered completely prior to 90 days) nor novel (i.e., underlying condition without exacerbation). Post–COVID-19 conditions were classified as cardiovascular, dermatologic, ophthalmologic or otolaryngologic, gastrointestinal, neurologic, psychological, respiratory, systemic (e.g., fatigue, weakness, fever, anorexia), or other. Caregivers could indicate the presence of PCCs using check boxes or	110/1884 SARS-CoV-2–positive children (5.8% [95% CI, 4.8%-7.0%]) reported 90- day post–COVID-19 conditions 66/1437 of non-hospitalised SARS-CoV-2– positive children (4.6%; 95% CI, 3.6%-5.8%) 44/447 of hospitalised SARS-CoV-2–positive children (9.8%; 95% CI, 7.4%-13.0%)	N/A

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
	free text. For the latter, 1 author (A.L.F.) blinded to SARS-CoV-2 test status performed narrative review and grouping. The PCC term also reflected health problems reported by children who tested negative, to permit comparisons.		
Gonzalez-Islas et al. ⁽⁷³⁾	Post-COVID-19 syndrome is characterised by diverse symptoms and abnormalities that persist beyond 12 weeks from the onset of acute COVID-19 and not attributable to alternative diagnoses.	Not Reported	N/A
Heightman et al. ⁽⁴⁷⁾	Long COVID not defined. The post-COVID-19 service accepted referrals from: (1) post hospitalised (PH): postadmission to UCLH with COVID-19; (2) non-hospitalised (NH): individuals referred from primary care with suspected long COVID ≥6 weeks post-SARS-CoV-2 infection; (3) post emergency department (PED): referral for individuals with persistent symptoms at 4–6 weeks after attendance.	 Full sample (n=1325): median symptoms: 2 (1-4). Time since symptom onset, days (IQR): 108 (61–197) Hospitalised (n=547): median symptoms: 1 (0-2). Time since symptom onset, days (IQR): 69 (51–111) Non-hospitalised (n=566): median symptoms: 3 (2-5). Time since symptom onset, days (IQR): 194 (118–298) 	N/A
Huang et al. ⁽⁵²⁾	Sequelae symptoms are defined as those that are newly occurring and persistent, or worse than the status before getting COVID-19, and that cannot be explained by an alternative disease. COVID-19 survivors with long COVID symptoms are defined as having at least one sequelae symptom, which is largely consistent with the case definition of post-COVID-19 condition.	Any symptoms Total (n=1192) 6 months after symptom onset: 777/1149 (68%) 12 months after symptom onset: 583/1188 (49%) 2 years after symptom onset: 650/1190 (55%) Scale 3: not requiring supplemental oxygen (n=295) 6 months after symptom onset: 194/286 (68%) 12 months after symptom onset: 194/286 (68%) 12 months after symptom onset: 141 (48%) 2 years after symptom onset: 158/294 (54%) Scale 4: requiring supplemental oxygen (n=806) 6 months after symptom onset: 509/774 (66%)	N/A

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
		12 months after symptom onset: 395/802 (49%) 2 years after symptom onset: 440/805 (55%)	
		Scale 5-6: requiring high-flow nasal cannula, non-invasive mechanical ventilation, or invasive mechanical ventilation (n=91) 6 months after symptom onset: 74/89 (83%) 12 months after symptom onset: 47 (52%)	
		2 years after symptom onset: 52 (57%)	
Kildegaard et al. ⁽⁵⁵⁾		See Appendix 7 Age, Table 1	
Meza-Torres et al. ⁽⁴⁸⁾	Referred to as 'post COVID-19'	See Appendix 6 General population, Table 1	
Norgard et al. ⁽⁷⁵⁾	It is a matter of discussion how to define "long-term", and there is no strict definition of "long-term" in terms of post COVID-19 symptoms. For those who were survivors among the first infected in the start of 2020, we now have approximately 1½ years of follow-up data (as of August 2021). This length of follow up provides us at least with some evidence related to post COVID consequences, but of course not on consequences after many years. Therefore, in this paper we prefer to use the term "post COVID-19".	N/A	N/A
Özcan et al. ⁽¹¹⁹⁾	No definition stated	N/A	N/A
Pazukhina et al. ⁽⁶⁶⁾	Post-COVID-19 condition was defined as the presence of any symptom which started no later than three months after hospital discharge and lasted for at least 2 months as per the WHO case definition.	6 Month Follow Up Adults: 508/1013 (50.15%); 95% CI: 47.09 - 53.31 Children: 72/360 (20%); 95% CI: 15.83 - 24.17	N/A
	Symptom duration was calculated from the time of the hospital discharge in the absence of reliable objective medical record data regarding date of first symptoms appearance.	12 Month Follow Up Adults: 345/1013 (34.06%); 95% CI: 31.19 - 36.92 Children: 40/360 (11.11%); 95% CI: 8.06 - 14.44	
Rivera-Izquierdo et al. ⁽²²⁾	No definition is formally given. Within the intro a very broad definition is mentioned: "Post-discharge syndrome has	Prevalence of sequelae or persistent symptoms 12 months after discharge n (%)	Incidences of sequelae or persistent symptoms after discharge n (cumulative incidence)

Author	Long COVID Definition	Long COVID Prevalence	Long COVID Incidence
	been defined as the persistence of symptoms in the most severe cases (i.e., those requiring hospitalisation) of COVID-19 after hospital discharge".	Exposed cohort (hospitalised due to COVID- 19) (n = 453): 163 (36.1). Non-exposed cohort (hospitalised due to other causes) (n = 453): 160 (35.3). P-value: 0.797	Exposed cohort (hospitalised due to COVID- 19) ($n = 453$): 120 (26.5). Non-exposed cohort (hospitalised due to other causes) ($n =$ 453): 105 (23.2). Risk ratio (95% CI) 1.14 (0.91 to 1.43)
Sorenson et al. ⁽⁵⁶⁾	See Appendix 6 General population, Table 3		
Spinicci et al. ⁽³²⁾	No definition stated	At least one persistent symptom: 325 patients (76%) More than two persistent symptoms: 154 (36%) More than three persistent symptoms: 92 (21%)	N/A
Yoo et al. ⁽⁷⁴⁾	Patients were characterised as having PASC (post-acute sequelae of SARSCoV-2 (PASC) if they noted persistent COVID-19 symptoms on the 90-day post-discharge survey (or the 60-day survey if the 90-day survey was incomplete).	 309/1038 patients (29.8%) reported persistent symptoms on the follow-up survey at least 60 days after the acute illness. 246/800 patients (30.8%) who received treatment for COVID-19 in the hospital, developed PASC 63/238 (26.5%) high-risk outpatients developed PASC. 309/879 (35.2%) participants who completed the 60-day or 90-day survey developed PASC 	N/A

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
Asadi- Pooya et al. ⁽¹¹⁸⁾	Telephone Questionnai re developed by research team in collaboratio n with participants . Expert validation. Information required: - demographi c - confirmator y - if the patient had noticed any problems (cough, fatigue, muscle or joint pain, and headache), or was suffering from any conditions (chronic problems) in the prior week compared	Not specified to a follow up time point: New-onset Diabetes Mellitus: 18 (0.35%) New-onset chronic renal failure: 1 (0.02%)	3-6 month follow up: Fatigue: 847 (32%) 6-12 month follow up: Fatigue: 493 (25%) Long COVID participan ts: Pre-existing chronic medical problems: 1105 (38%)	3-6 month follow up: Chest pain: 303 (11%) Palpitation: 304 (11%) 6-12 month follow up: Chest pain: 175 (9%) Palpitation: 166 (8%) Additional (not specified to a follow up time point): New-onset Hypertensio n: 11	3-6 month follow up: Headache: 316 (12%) Dizziness: 205 (8%) Brain fog: 319 (12%) Sleep difficulty: 453 (17%) 6-12 month follow up: Headache: 207 (10%) Dizziness: 125 (6%) Brain fog: 161 (8%) Sleep difficulty: 254 (13%) Long COVID participan ts: Neurologica I problems at onset: 520 (18%)	3-6 month follow up: Shortness of breath: 563 (21%) Cough: 272 (10%) Excess sputum: 171 (6%) 6-12 month follow up: Shortness of breath: 347 (17%) Cough: 139 (7%) Excess sputum: 123 (6%) Long COVID participan ts: Respiratory problems at onset: 2647 (91%)	3-6 month follow up: Excess sweating: 232 (9%) Exercise intolerance: 694 (26%) Walking intolerance: 587 (22%) 6-12 month follow up: Excess sweating: 149 (7%) Exercise intolerance: 396 (20%) Walking intolerance: 396 (20%) Walking intolerance: 315 (16%) Additional (not specified to a follow up time point): Loss of libido:2	3-6 month follow up: Anorexia: 104 (4%) 6-12 month follow up: Anorexia: 65 (3%)	3-6 month follow up: Loss of smell: 123 (5%) Loss of taste: 78 (3%) Sore throat: 124 (5%) 6-12 month follow up: Loss of smell: 92 (5%) Loss of taste: 54 (3%) Sore throat: 74 (4%)	3-6 month follow up: Weakness: 543 (20%) Muscle pain: 562 (21%) Joint pain: 491 (18%) 6-12 month follow up: Weakness: 278 (14%) Muscle pain: 291 (15%) Joint pain: 296 (15%)	3-6 month follow up: Diarrhoea: 73 (3%) Abdominal pain: 88 (3%) Weight loss: 251 (9%) Weight gain: 147 (5%) 6-12 month follow up: Diarrhoea: 42 (2%) Abdominal pain: 56 (3%) Weight loss: 130 (7%) Weight gain: 101 (5%) Long COVID participan ts: Gastrointest inal problems at onset: 455 (16%)	Additional (not specified to a follow up time point): Hair loss: 102 (2%)

Table 2. Long COVID symptoms in those with a history of severe COVID-19 illness.

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	with their pre-COVID- 19 conditions (any symptoms, complaints, or problems that they did not have before their COVID-19 diagnosis, but appeared after the illness and specifically during the						Symptoms	Symptoms	Symptonis			
	past seven days). Asked participants the severity of their complaints (1. Mild and tolerable; 2. Moderate; 3. Severe and disabling). In the third part of the questionnai re (five questions),											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	asked the											
	patients to											
	compare											
	their											
	current											
	status (on											
	five											
	items) with											
	their pre-											
	COVID-19											
	status											
	based											
	on a Likert											
	scale (1.											
	Much											
	worse; 2.											
	Somewhat											
	worse; 3.											
	The same as before;											
	4;											
	Somewhat											
	better; 5.											
	Much											
	better).											
	; The											
	following											
	were also											
	asked: 1.											
	ability to											
	perform the											
	activity of											
	daily											
	living; 2.											
	concentrati											
	on and											
	mind											
	workability;											
	3.											
	studying											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	and reading ability; 4. quality of life; 5. hope for the future. Face to face assessment Authors' own design We recorded the clinical characteristi cs, lifestyle factors, vaccination status, and physical examination	conditions	Fatigue All (n = 665) = 93 (14 %) <65 (n = 595) =85 (14.3 %) ≥65 (n = 70) =8 (11.4 %)	Symptoms Chest pain All (n = 665) =40 (6 %) <65 (n = 595) =36 (6.1 %) ≥65 (n = 70) = 4 (5.7 %)	Symptoms Headache All (n = 665) 7 (1.1 $\%$) <65 (n =					Symptoms	Diarrhoea All (n = 665) = 22 (3.3 %) <65 (n = 595) =18 (3 %) ≥65 (n = 70) =4 (5.7 %) Nausea All (n = 665) =12 (1.8 %) <65 (n = 595) =11	
Bahat et al. ⁽⁷⁰⁾	examination findings (respiratory rate, peripheral oxygen saturation, heart rate and blood pressure) with a structured form within the electronic data- collecting system. In addition,				 	595) =69 (11.6 %) ≥65 (n = 70) =7 (10 %)					595) =11 (1.8 %) ≥65 (n = 70) =1 (1.4 %)	

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	the											
	symptoms											
	of the											
	patients on											
	admission											
	that were											
	hospitalized											
	in our											
	center were											
	inquired.											
	We											
	performed											
	a detailed											
	laboratory											
	assessment											
	and a											
	control											
	chest											
	imaging in											
	the follow-											
	up visit.											
	The normal											
	ranges of											
	each											
	parameter											
	were											
	assessed by											
	the											
	laboratory											
	thresholds.											
	We											
	recommend											
	ed chest X-											
	ray for the											
	patients											
	who were											
	considered											
	having low-											
	risk for											
	pulmonary											
	involvement											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	. For those who had higher risk of pulmonary involvement and free of contraindica tions, we performed low dose computed- tomography (CT). Any fibrotic image was noted as a fibrotic sequela.											
Barreto et al. ⁽³⁷⁾	Validated questionnai res and authors' own design (standardis ed form) Face to face questionnai res administere d by trained physicians and nurses mMRC scale for dyspnoea		*Long COVID complaint s are usually initiated at the acute stage of disease, persisting as residual symptoms * Number of persistent symptoms (median IQR): 4.0 (2.0-6.0)	Chest pain: 525/1162 (45.2%) Persistent symptoms separated by sex and disease severity at the acute phase. Mild (male n = 89, female n = 262) (N %) Chest pain: Male: 53 (59.6)	Headache: 411/1112 (37%) Dizziness: 212/602 (35.2%) Memory loss: 332/603 (55.1%) Insomnia: 317/603 (52.6%) Motor disabilities: 193/1028 (18.8%) Persistent symptoms separated by sex	Cough: 453/1163 (39%) Dyspnoea: 790 (67.9%) mMRC ≥ 2 (Only applied to patients reporting dyspnoea): 361/744 (48.5%) Oxygen Saturation (Pulse Oximetry) (Median IQR): 97 (96-98)			Dysphagia: 55/1143 (4.8%) Dysphonia: 61/1143 (5.3%) Olfactory dysfunction : 174/1006 (17.3%) Persistent symptoms separated by sex and disease severity at the acute phase. Mild (male n = 89,	Myalgia (excluding Chest pain): 457/1163 (39.3%) Persistent symptoms separated by sex and disease severity at the acute phase. Mild (male n = 89, female n = 262) (N %)	Gustatory dysfunction : 167/1029 (16.2%) Loss of appetite: 176/1148 (15.3%) Persistent symptoms separated by sex and disease severity at the acute phase. Mild (male n = 89, female n	Hair loss: 230/594 (38.7%) Persistent symptoms separated by sex and disease severity at the acute phase. Mild (male n = 89, female n = 262) (N %)

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	Sociodemog		Fatigue:	Female:	and	Persistent			female n	Myalgia	= 262) (N	Hair loss:
	raphic and		738/1163	149 (56.9)	disease	symptoms			= 262) (N	(excluding	%)	Male:
	clinical		(63.5%)	. ,	severity at	separated			%)	Chest	Gustatory	2/37 (5.4)
	characteristi		、 <i>,</i>	Moderate	the acute	by sex			Dysphagia:	pain):	dysfunction	Female:
	cs were		Persistent	(male n =	phase.	and			Male: 4/88	Male: 26	:	44/95
	recorded,		symptoms	Ì55,	Mild (male	disease			(4.5)	(29.2)	Male: 9/84	(46.3)
	including		separated	female n	n = 89,	severity at			Female:	Female:	(10.7)	
	respiratory		by sex	= 183) (N	female n	the acute			17/259	106 (40.5)	Female:	Moderate
	(dyspnoea,		and	%)	= 262) (N	phase.			(6.6)		73/249	(male n =
	cough),		disease	Chest pain:	%)	Mild (male			Dysphonia:	Moderate	(29.3)	155,
	neurological		severity at	Male: 54	Headache:	n = 89,			Male: 3/88	(male n =	Loss of	female n
	(headache,		the acute	(34.8)	Male: 32	female n			(3.4)	155,	appetite:	= 183) (N
	gustatory		phase.	Female:	(36.0)	= 262) (N			Female:	female n	Male: 7	%)
	and		Mild (male	88/182	Female:	%)			13/257	= 183) (N	(7.9)	Hair loss:
	olfactory		n = 89,	(48.4)	131/260	Cough:			(5.1)	%)	Female:	Male:
	dysfunction,		female n	(-)	(50.4)	Male: 35			Olfactory	Myalgia	53/259	12/83
	dizziness,		= 262) (N	Severe	Dizziness:	(39.3)			dysfunction	(excluding	(20.5)	(14.5)
	memory		%)	(male n =	Male:	Female:			:	Chest	· · /	Female:
	loss), pain		Number of	262,	12/37	97 (37.0)			Male:	pain):	Moderate	53/93 (57)
	(chest pain,		persistent	female n	(32.4)	Dyspnoea:			13/82	Male: 44	(male n =	, , ,
	myalgia),		symptoms	= 213) (N	Female:	Male: 58			(15.9)	(28.4)	Ì55,	Severe
	and		(median	%)	44/97	(65.2)			Female:	Female:	female n	(male n =
	constitution		ÌQR):	Chest pain:	(45.4)	Female:			76/245	96 (52.5)	= 183) (N	262,
	al (fatigue,		Male: 3.0	Male:	Memory	178 (67.9)			(31.0)		%)	female n
	insomnia)		(2.0-5.0)	84/261	loss:	mMRC ≥ 2			. ,	Severe	Gustatory	= 213) (N
	symptoms,		Female:	(32.2)	Male:	(Only			Moderate	(male n =	dysfunction	%)
	as well as		5.0 (3.0-	Female:	16/37	applied to			(male n =	262,	:	Hair loss:
	anthropome		7.0)	97 (45.5)	(43.2)	patients			155,	female n	Male:	Male:
	tric		Fatigue:		Female:	reporting			female n	= 213) (N	8/138 (5.8)	28/151
	parameters,		Male: 53	New	60/98	dyspnoea):			= 183) (N	%)	Female:	(18.5)
	oxygen		(59.6)	symptoms	(61.2)	Male: 22			%)	Myalgia	28/158	Female:
	saturation,		Female:	after	Insomnia:	(37.9)			Dysphagia:	(excluding	(17.7)	90/134
	comorbiditi		194 (74.0)	recovery	Male:	Female:			Male:	Chest	Loss of	(67.2)
	es, social			from	18/37	75 (44.6)			7/153 (4.6)	pain):	appetite:	
	habits		Moderate	acute	(48.6)	Oxygen			Female:	Male:	Male:	Clinical
	(smoking		(male n =	illness (n,	Female:	Saturation			7/182 (3.8)	85/261	13/153	presentati
	habit,		155,	N %)	62/98	(Pulse			Dysphonia:	(32.6)	(8.5)	on of
	alcohol use,		female n	Chest pain:	(63.3)	Oximetry)			Male:	Female:	Female:	LONG
	physical		= 183) (N	514/809	Motor	(Median			6/153 (3.9)	100 (46.9)	31/182	COVID by
	exercise		%)	(63.5%)	disabilities:	IQR):			Female:		(17.0)	calendar
	frequency),				Male: 5/83	Male: 97.0			6/182 (3.3)			time

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	current/pas		Number of	Clinical	(6.0)	(97.0-98.0)			Olfactory	New	Severe	according
	t		persistent	presentati	Female:	Female:			dysfunction	symptoms	(male n =	to variant
	treatments		symptoms	on of	37/248	98.0 (97.0-			:	after	262,	predomin
	(e.g.,		(median	LONG	(14.9)	99.0)			Male:	recovery	female n	ance
	corticostero		IQR):	COVID by					10/131	from	= 213) (N	distributio
	ids).		Male: 3.0	calendar	Moderate	Moderate			(7.6)	acute	%)	n
			(1.0-5.0)	time	(male n =	(male n =			Female:	illness (n,	Gustatory	
			Female:	according	155,	155,			32/154	N %)	dysfunction	Ancestral
			5.0 (3.0-	to variant	female n	female n			(20.8)	Myalgia:	:	(n = 736)
			7.0)	predomin	= 183) (N	= 183) (N				583/807	Male:	Period
			Fatigue:	ance	%)	%)			Severe	(72.2%)	24/221	August
			Male: 77	distributio	Headache:	Cough:			(male n =		(10.9)	2020 to
			(49.7)	n	Male:	Male: 56			262,	Clinical	Female:	January
			Female:		36/151	(36.1)			female n	presentati	25/179	2021
			121 (66.1)	Ancestral	(23.8)	Female:			= 213) (N	on of	(14.0)	(n/N %)
			-	(n = 736)	Female:	75 (41.0)			%)	LONG	Loss of	Hair Loss:
			Severe	Period	77/175	Dyspnoea:			Dysphagia:	COVID by	appetite:	65/181
			(male n =	August	(44.0)	Male: 98			Male:	calendar	Male:	(35.9%)
			262,	2020 to	Dizziness:	(63.2)			4/255 (1.6)	time	34/258	
			female n	January	Male:	Female:			Female:	according	(13.2)	Gama
			= 213) (N	2021 (n/N	15/84	128 (69.9)			16/206	to variant	Female:	Variant (n
			%)	%)	(17.9)	mMRC ≥ 2			(7.8)	predomin	37/207	= 249)
			Number of	Chest Pain:	Female:	(Only			Dysphonia:	ance	(17.9)	Period
			persistent	337/734	36/93	applied to			Male:	distributio		March
			symptoms	(45.9%)	(38.7)	patients			15/257	n	New .	2021 to
			(median		Memory	reporting			(5.8)		symptoms	July 2021
			IQR):	Gama	loss:	dyspnoea) :			Female:	Ancestral	after	(n/N %)
			Male: 3.0	Variant (n	Male:	Male: 36			19/206	(n = 736)	recovery	Hair Loss:
			(2.0–5.0)	= 249)	38/85	(38.3)			(9.2)	Period	from	97/238
			Female:	Period	(44.7) Famalai	Female:			Olfactory	August 2020 to	acute	(40.8%)
			5.0 (3.0-	March	Female:	56 (46.7)			dysfunction		illness (n,	
			7.0)	2021 to	66/93 (71)	Oxygen			: Male:	January	N%)	
			Fatigue: Male:	July 2021 (n/N %)	Insomnia: Male:	Saturation (Pulse			Male: 20/219	2021 (n/N %)	Diarrhoea: 329/809	
			Male: 143/261(54	(n/N %) Chest Pain:	Male: 32/84	(Puise Oximetry)			(9.1)	Myalgia:	(40.7%)	
			.8)	95 (38.2%)	(38.1)	(Median			(9.1) Female:	273/735	(40.7%) Vomiting/N	
			.o) Female:	93 (30.270)	(36.1) Female:	IQR):			23/175	(37.1%)	ausea:	
			150 (70.4)		60/93	Male: 97.0			(13.1)	(37.1%)	293/809	
			130 (70.4)		(64.5)	(96.0–98.0)			(13.1)	Gama	(36.2%)	
			New		(04.5) Motor	(96.0–98.0) Female:			New	Variant (n	(30.2%) Gustatory	
			symptoms		disabilities:	Female:			symptoms	variant (n = 249)	dysfunction	

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			after		Male:	97.0 (96.0-			after	Period	: 475/809	
			recovery		14/138	98.0)			recovery	March	(58.7%)	
			from		(10.1)	,			from	2021 to	. ,	
			acute		Female:	Severe			acute	July 2021	Clinical	
			illness (n,		37/158	(male n =			illness (n,	(n/N %)	presentati	
			N %)		(23.4)	262,			N %)	Myalgia:	on of	
			Number of			female n			Olfactory	106	LONG	
			symptoms		Severe	= 213) (N			dysfunction	(42.6%)	COVID by	
			(Median		(male n =	%)			: 473/808		calendar	
			IQR): 8.0		262,	Cough:			(58.5%)		time	
			(6.0		female n	Male:					according	
	1		10.0%)		= 213) (N	101/261			Clinical		to variant	
			Fever:		%)	(38.7)			presentati		predomin	
			514/808		Headache:	Female:			on of		ance	
			(63.6%)		Male:	89 (41.8)			LONG		distributio	
			Fatigue/Mu		58/236	Dyspnoea:			COVID by		n	
			scle		(24.6)	Male: 188			calendar		A	
			weakness:		Female:	(71.8)			time		Ancestral	
			668/809		76/201	Female:			according		(n = 736)	
			(82.6%)		(37.8) Dizziness:	139 (65.3) mMRC ≥ 2			to variant predomin		Period	
			Clinical		Male:	(Only)			ance		August 2020 to	
			presentati		44/155	applied to			distributio		January	
			on of		(28.4)	patients			n		2021 (n/N	
			LONG		Female:	reporting					%)	
			COVID by		61/136	dyspnoea) :			Ancestral		Appetite	
			calendar		(44.9)	Male:			(n = 736)		Loss:	
			time		Memory	93/172			Period		121/734	
			according		loss:	(54.1)			August		(16.5%)	
			to variant		Male:	Female:			2020 to		Gustatory	
			predomin		68/154	78/131			January		dysfunction	
			ance		(44.2)	(59.5)			2021 (n/N		: 124/622	
			distributio		Female:	Oxygen			%)		(19.9%)	
			n		83/136 (61)	Saturation			Dysphagia:		Ì Í	
					Insomnia:	(Pulse			36/734		Gama	
			Ancestral		Male:	Öximetry)			(4.9%)		Variant (n	
	1		(n = 736)		70/155	(Median			Dysphonia:		= 249)	
			Period		(45.2)	IQR):			39/734		Period	
			August		Female:	Male: 97.0			(5.3%)		March	
	1		2020 to		76/136	(96.0–98.0)			Smell Loss:		2021 to	
			January		(55.9)	Female:						

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
			2021 (n/N		Motor	97.0 (96.5–			130/620		July 2021	
			%)		disabilities: Male:	98.0)			(21.0%)		(n/N %)	
			Fatigue: 466/735		Male: 51/222	New			Gama		Appetite Loss:	
			(63.4%)		(23.0)	symptoms			Variant (n		33/237	
			(001170)		Female:	after			= 249)		(13.9%)	
			Gama		50/179	recovery			Period		Gustatory	
			Variant (n		(27.9)	from			March		dysfunction	
			= 249)			acute			2021 to		: 17/233	
			Period March		New symptoms	illness (n, N %)			July 2021 (n/N %)		(7.3%)	
			2021 to		after	Cough:			Dysphagia:			
			July 2021		recovery	633/809			9/233			
			(n/N %)		from	(78.2%)			(3.9%)			
			Fatigue:		acute	Dyspnoea:			Dysphonia:			
			140		illness (n,	672/809			12/234			
			(56.2%)		N%)	(83.1%)			(5.1%)			
					Headache: 565/809	Clinical			Smell Loss: 23/232			
					(69.8%)	presentati			(9.9%)			
					(051070)	on of			(51570)			
					Clinical	LONG						
					presentati	COVID by						
					on of	calendar						
					LONG COVID by	time according						
					calendar	to variant						
					time	predomin						
					according	ance						
					to variant	distributio						
					predomin	n						
					ance							
					distributio	Ancestral (n = 736)						
					n	(n = 736) Period						
					Ancestral	August						
					(n = 736)	2020 to						
					Period	January						
					August	2021 (n/N						
					2020 to	%)						
					January							

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					2021 (n/N %) Headache: 243/685 (35.5%) Dizziness: 70/181 (38.7%) Memory loss: 100/182 (54.9%) Insomnia: 96/181 (53.0%) Motor limitation: 107/619 (17.3%) Gama Variant (n = 249) Period March 2021 to July 2021 (n/N %) Headache: 83/248 (33.5%) Dizziness: 71/244 (29.1%) Memory loss: 136/244 (55.7%) Insomnia: 122/245 (49.8%)	Cough: 269/735 (36.6%) Dyspnoea: 486 (66.0%) Gama Variant (n = 249) Period March 2021 to July 2021 (n/N %) Cough: 106 (42.6%) Dyspnoea: 165 (66.3%)						

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					Motor limitation: 52/235 (22.1%)							
Battistella et al. ⁽³⁸⁾	Validated questionnai res administere d by teleconsulta tion and followed up with face to face clinical and functional assessment s by MDT team EQ-5D- 5L (mobility, self-care, daily routine, pain and discomfort, anxiety and depression) Epworth Sleepiness Scale Functional Independen ce Measure Functional		At follow up (3 to 11 months after hospital discharge) : Pain and discomfort: 516/800 (64.5%) Data indicated no generalised fatigue (mean score: 39.18, SD: 9.77; 95% CI: 38.50 to 39.86)		(22.1%) At follow up (3 to 11 months after hospital discharge) : Daytime sleepiness and insomnia evaluations showed subthreshol d results Assessment s showed poor handgrip strength (52.20%, 379 of 726) and abnormal Timed Up and Go results (mean 13.07 s, SD: 6.49)	At follow up (3 to 11 months after hospital discharge) : Breathlessn ess: 514/795 (64.66%)		At follow up (3 to 11 months after hospital discharge) : Anxiety and depression: 457/798 (57.27%)	At follow up (3 to 11 months after hospital discharge) : Restricted oral intake: 56/783 (7.15%)			
	Oral Intake Scale Insomnia Severity											

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	Index											
	modified											
	Medical											
	Research											
	Council											
	(Dyspnoea											
	Scale)											
	Post-											
	COVID-19											
	Functional											
	Status											
	Pain Visual											
	Analogue											
	Scale Functional											
	Assessment											
	of Chronic											
	Illness											
	Therapy –											
	Fatigue											
	Handgrip											
	Strength											
	Measureme											
	nt											
	Medical											
	Research											
	Council											
	Sum Score											
	Modified											
	Borg											
	Dyspnoea											
	Scale											
	Timed Up											
	and Go											
	World											
	Health											
	Organizatio											
	n Disability											
	Assessment											
	Schedule											
	2.0											

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	01-minute Sit to Stand Test											
Boglione et al. ⁽³⁰⁾	Validated questionnai re Post- COVID-19 Functional Status Scale (PCFS) Face to face interview	30 days post- COVID-19 n (%): Diabetes: 109 (24.3) Venous thromboem bolism: 41 (9.1) 180 days post- COVID-19 n (%): Diabetes: 39 (8.9) Venous thromboem bolism: 12 (2.7)	30 days post- COVID-19 n (%): Fatigue: 215 (47.9) Fever: 13 (2.9) Thyroid dysfunction : 66 (20.5) 180 days post- COVID-19 n (%): Fatigue: 151 (34.7) Fever: 2 (0.4) Thyroid dysfunction : 35 (16.9)	30 days post- COVID-19 n (%): Chest pain: 129 (28.7) Tachyarrhyt hmia's: 168 (37.4) Pericarditis/ myocarditis : 31 (6.9) Hypertensio n: 116 (25.8) 180 days post- COVID-19 n (%): Chest pain: 89 (20.4) Tachyarrhyt hmia's: 91 (20.9) Pericarditis/ myocarditis : 4 (0.9) Hypertensio n: 61 (14)	30 days post- COVID-19 n (%): Headache: 128 (28.5) Brain fog: 234 (52.1) Dizziness: 88 (19.6) Memory impairment: 186 (41.4) Peripheral neuropathy : 133 (29.6) Sleeping disorders: 280 (62.4) 180 days post- COVID-19 n (%): Headache: 66 (15.1) Brain fog: 191 (43.9) Dizziness: 13 (2.9) Memory impairment: 155 (35.6) Peripheral neuropathy : 78 (17.9)	30 days post- COVID-19 n (%): Dyspnoea/b reathlessne ss: 228 (50.8) Cough: 134 (29.8) 180 days post- COVID-19 n (%): Dyspnoea/b reathlessne ss: 166 (38.2) Cough: 87 (20)		30 days post- COVID-19 n (%): Post- traumatic stress disorder: 171 (38) Anxiety: 230 (51.2) Major depression: 105 (23.4) Psychosis: 51 (11.3) Behaviour disorder: 23 (5.1) 180 days post- COVID-19 n (%): Post- traumatic stress disorder: 134 (30.8) Anxiety: 144 (33.1) Major depression: 39 (8.9) Psychosis: 9 (2)	30 days post- COVID-19 n (%): Anosmia: 289 (64.4) Ageusia/dys geusia: 213 (47.4) 180 days post- COVID-19 n (%): Anosmia: 234 (53.7) Ageusia/dys geusia: 217 (49.8)	30 days post- COVID-19 n (%): Myalgias/ar thralgias: 181 (40) 180 days post- COVID-19 n (%): Myalgias/ar thralgias: 112 (25.7)	30 days post- COVID-19 n (%): Weight loss: 186 (41.4) 180 days post- COVID-19 n (%): Weight loss: 102 (23.4)	30 days post- COVID-19 n (%): Hair loss: 289 (64.4) Psoriasis: 83 (18.5) 180 days post- COVID-19 n (%): Hair loss: 42 (9.6) Psoriasis: 18 (19)

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					Sleeping disorders:			Behaviour disorder: 6				
	Authors' own design Online guestionnai		Overall reported symptoms :		233 (53.6) Overall reported symptoms	Overall reported symptoms		(1.4) Overall reported symptoms	Overall reported symptoms	Overall reported symptoms :	Overall reported symptoms	Overall reported symptoms :
	re The survey asked respondent		Fatigue: 2739 (83.30%)		Problems with mental abilities: 1508	Breathing problems: 390 (11.90%)		Changes in mood or anxiety or depression:	Anosmia or ageusia: 936 (28.40%)	• Myalgia or arthralgia: 1662 (50.50%)	Loss of appetite or weight loss: 755	Hair loss: 346 (10.50%)
	s about the presence and duration of		Overall reported symptoms -		(45.80%) Sleep problems: 1520	Cough: 1392 (42.30%)		1417 (43.10%) Nightmares or	Overall reported symptoms	Overall reported symptoms	(22.90%) Overall reported	Overall reported symptoms -
	symptoms, the level of treatment they had		hospitalis ed: Fatigue: 345		(46.20%) Overall reported	Overall reported symptoms -		flashbacks: 432 (13.10%) PTSD	- hospitalis ed: Anosmia or	- hospitalis ed: Myalgia or	symptoms - hospitalis ed:	hospitalis ed: Hair loss: 42 (10.1%)
Buttery et al. ⁽⁴⁴⁾	required during their initial COVID-19		(82.7%) Overall reported		symptoms - hospitalis ed:	hospitalis ed: Breathing problems:		symptoms: 578 (17.60%)	ageusia: 128 (31.9%)	arthralgia: 213 (51.1%)	Loss of appetite or weight loss: 98 (23.5%)	Overall reported symptoms
al.' ź	illness (e.g., at home or in hospital) and their		symptoms – non- hospitalis ed:		Problems with mental abilities: 183	55 (13.2%) Cough: 185 (44.4%)		Overall reported symptoms	Overall reported symptoms – non-	Overall reported symptoms – non-	Overall reported	– non- hospitalis ed: Hair loss:
	experience of care, support and		ed: Fatigue: 2394 (83.3%)		(43.9%) Sleep problems:	Overall reported symptoms		- hospitalis ed: Changes in	hospitalis ed: Anosmia or	hospitalis ed: Myalgia or	symptoms – non- hospitalis ed:	304 (10.6%)
	information received during and after this.		Symptoms <4 weeks: Fatigue:		179 (42.9%) Overall	– non- hospitalis ed: Breathing		mood or anxiety or depression: 176	ageusia: 808 (28.1%)	arthralgia: 1449 (50.4%)	Loss of appetite or weight loss: 657	Symptom s <4 weeks: Hair loss:
	Data collection included:		216 (80.0%) Number of coexisting		reported symptoms – non- hospitalis	problems: 335 (11.7%) Cough:		(42.2%) Nightmares or flashbacks:	Symptoms < 4 weeks: Anosmia or ageusia:	Symptoms <4 weeks: Myalgia or arthralgia:	(22.9%) Symptoms <4 weeks:	10 (3.7%) Symptom s 4-8
	- age - sex - pre- existing		symptoms: 4.7+2.1		ed: Problems with mental	1207 (42%)		53 (12.7%)	ageusia: 120 (44.4%)	arthraigia: 118 (43.7%)	<4 weeks: Loss of appetite or	s 4-8 weeks: Hair loss: 24 (4.9%)

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	health condition - ethnicity - nationality - current work status - total household income - symptoms - treatment during acute phase of virus - hospitalisati on length - ICU admission		Symptoms 4-8 weeks: Fatigue: 406 (82.2%) Number of coexisting symptoms: 4.8+2.3 Symptoms 8-12 weeks: Fatigue: 535 (83.5%) Number of coexisting symptoms: 4.8+2.3 Symptoms: 4.8+2.3 Symptoms: 4.8+2.3 Symptoms: 5.12 weeks: Fatigue: 1568 (84.10%) Number of coexisting symptoms: 5.1+2.4		abilities: 1325 (46.1%) Sleep problems: 1341 (46.7%) Symptoms <4 weeks: Problems with mental abilities: 79 (29.3%) Sleep problems: 112 (41.5%) Symptoms 4-8 weeks: Problems with mental abilities: 192 (38.9%) Sleep problems: 233 (47.2%) Symptoms 8-12 weeks: Problems with mental abilities: 279 (43.5%)	Symptoms <4 weeks: Breathing problems: 246 (91.1%) Cough: 135 (50.0%) Symptoms 4-8 weeks: Breathing problems: 460 (93.1%) Cough: 221 (44.7%) Symptoms 8-12 weeks: Breathing problems: 596 (93.0%) Cough: 275 (42.9%) Symptoms >12 weeks: Breathing problems: 596 (93.0%) Cough: 275 (42.9%) Symptoms >12 weeks: Breathing problems: 1707 (91.50%) Cough: 752 (40.30%)		PTSD symptoms: 75 (18%) Overall reported symptoms – non- hospitalis ed: Changes in mood or anxiety or depression: 1214 (42.3%) Nightmares or flashbacks: 379 (13.2%) PTSD symptoms: 503 (17.5%) Symptoms: 503 (17.5%) Symptoms: 503 (17.5%) Symptoms: 503 (17.5%) Symptoms: 503 (17.5%) Symptoms: 503 (17.5%) Symptoms: 503 (17.5%) Symptoms: 503 (17.5%) Symptoms: 503 (17.5%) Symptoms: 513 (13.4%) Nightmares or flashbacks: 25 (9.3%) PTSD symptoms: 35 (13.0%)	Symptoms 4-8 weeks: Anosmia or ageusia: 152 (30.8%) Symptoms 8-12 weeks: Anosmia or ageusia: 172 (26.8%) Symptoms >12 weeks: Anosmia or ageusia: 488 (26.20%)	Symptoms 4-8 weeks: Myalgia or arthralgia: 235 (47.6%) Symptoms 8-12 weeks: Myalgia or arthralgia: 315 (49.1%) Symptoms >12 weeks: Myalgia or arthralgia: 984 (52.80%)	weight loss: 70 (25.9%) Symptoms 4-8 weeks: Loss of appetite or weight loss: 126 (25.5%) Symptoms 8-12 weeks: Loss of appetite or weight loss: 126 (19.7%) Symptoms >12 weeks: Loss of appetite or weight loss: 430 (23.10%)	Symptom s 8-12 weeks: Hair loss: 61 (9.5%) Symptom s > 12 weeks: Hair loss: 248 (13.30%)

Autonomi Psycholog Ear, Nose Musculosk Gastrointe Dermatol Cardiovas Respirator Neurologi General c Nervous ical/Psych and eletal ogic Assessme New onset stinal Author cular С y Symptoms Symptom nt Mode conditions Symptoms System iatric Throat Symptoms Symptoms Symptoms Symptoms Symptoms Symptoms Symptoms s Symptoms Sleep problems: **4-8** 296 weeks: (46.2%) Changes in mood or Symptoms anxiety or >12 depression: 206 weeks: Problems (41.7%) Nightmares with mental abilities: or 950 flashbacks: (50.90%) 60 (12.1%) Sleep PTSD problems: symptoms: 887 74 (15.0%) (47.60%) Symptoms 8-12 weeks: Changes in mood or anxiety or depression: 266 (41.5%) Nightmares or flashbacks: 69 (10.8%) PTSD symptoms: 111 (17.3%) Symptoms >12 weeks: Changes in mood or anxiety or

Autonomi Psycholog Ear, Nose Musculosk Gastrointe Dermatol Cardiovas Neurologi Respirator New onset General c Nervous ical/Psych and eletal stinal Assessme ogic Author cular С y nt Mode conditions Symptoms System iatric Throat Symptoms Symptoms Symptom Symptoms Symptoms Symptoms **Symptoms** Symptoms Symptoms s depression: 842 (45.10%) Nightmares or flashbacks: 273 (14.60%) PTSD symptoms: 352 (18.90%)12-month 12-month Authors' 12-month Severe 12-month 12-month 12-month 12-month own design follow medical follow follow follow follow follow follow up^{¥¥¥}: up^{¥¥¥}: up^{¥¥¥}: up^{¥¥¥}: up^{¥¥¥}: Telephone issues up^{YYY}: up^{¥¥}: Fatique: Dyspnoea Anxiety Smell Myalgia: 94 Altered interview after Memory COVID-Patient's 230 disorder at rest (>5): 104 disorder (22.27%) gastrointest subjective (54.63%)19: (<5): 15 (<u>></u>5): 57 (23.16%) (<5): 18 inal assessment Cardiovascu (3.47%) (12.5%) (3.96%) function (altered General lar Headache: Exertional Taste s was health problems: bowel recorded on 73 dyspnoea disorder a 0–10 status ^{¥¥} 17 (3.72%) (17.38%)- mMRC 0: (<5): 13 habits and <5: 11 128 (2.86%)scale to Sleep bloating): (2.42%) evaluate difficulties: (28.32%) 149 the generic 5-6:65 147 - mMRC > (32.75%) (14.32%) (32.38%) 1:324 Decreased health Comelli et 7-8: 234 (71.68%) appetite: 34 status and Limitations al.⁽³¹⁾ (54.54%)(7.49%) capacity to to daily Cough: 73 appreciate 9-10: 144 activities (16.08%) smells and (31.72%)(limitations Severe taste (0 = to daily Severe medical Severe activities + medical issues very poor, medical 10 = verytroubled issues after COVIDissues walking): after good). For COVID-19: the after 69 COVID-(16.35%)19: GI remaining 19: symptoms Respiratory problems: 1 and signs a ER Severe problems: 5 (0.22%)0-10 scale medical (1.10%)admission: 47 was issues (10.35%) after employed

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	where 0 =		Hospitalisati		COVID-							
	absence of		on: 30		19:							
	the		(6.61%)		Neurologic							
	symptom		haepatologi		problems: 1							
	and $10 =$		c problems:		(0.22%)							
	maximum		2 (0.44%)		(*****							
	intensity. A		other: 15									
	subjective		(3.30%)									
	score of 5		(0.000)									
	was											
	considered											
	as presence											
	of											
	symptom.											
	For											
	example,											
	we asked											
	patients											
	direct											
	question											
	like: "how											
	would you											
	score your											
	state of											
	health from											
	0 to 10											
	where 0 is											
	a very bad											
	state of											
	health and											
	10 is a											
	perfect											
	state of											
	health?"											
	The same											
	type of											
	question											
	was asked											
	about the											
	other signs											
	or											

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	symptoms:											
	how would											
	you score											
	your loss of											
	smells from											
	0 to 10											
	where 0 =											
	absence of											
	the											
	symptom											
	and											
	10=maximu											
	m											
	subjective											
	intensity?											
	Participants											
	were asked											
	to report											
	current											
	symptoms											
	i.e. those											
	present in											
	the											
	previous 14											
	days,											
	except for											
	gastrointest											
	inal											
	symptoms											
	whose											
	presence											
	had to be											
	reported during the											
	12 month											
	period											
	(from											
	discharge											
	to											
	administrati											
	on of the											

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	questionnai re)											
Damiano et al. ⁽³⁹⁾	Authors' own standardise d questionnai re and validated questionnai res Face to face interview Researchers evaluated the global health status (visual analogue scale), physical exercise (using Internation al Physical Activity Questionnai re, and frailty— current and before COVID-19 (using the Clinical Frailty Scale). Further evaluations				6-11 months post- hospitalis ation: Regarding cognitive outputs: - Magnitude of cognitive complaints mean: 5.2 (SD: 4.16); - Temporal and Spatial Orientation of Mini- Mental State Examinatio n (MMSE) orientation score mean: 8.27 (SD: 3.25); - Trail Making Test-A mean: 65.5 s (SD: 48.0 s); - Verbal fluency mean: 15.57 (SD: 5.43); - Alcohol Use Disorder			6-11 months post- hospitalis ation: Clinical Interview Schedule- Revised (CIS-R) - Depression 7.5%; - Panic disorder 0.8%; - Agoraphobi a 1.5%; - Social phobia 0.8%; - Specific phobia 2.1%; - Generalized anxiety disorder 15.1%; - Obsessive- compulsive disorder 3.1%; - Mixed depressive and anxiety disorder	6-11 months post- hospitalis ation: Olfactory hallucinatio ns: 12 gustatory hallucinatio ns: 9 Of those, 72.7% of subjects with olfactory and 87.5% of those with gustatory hallucinatio ns reported that these symptoms were not present prior to COVID-19.			
	evaluations				DISULUEI			UISUIUEI				

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	were made				Identificatio			13.5%;				
	using those				n Test			- Common				
	following				score			mental				
	instruments				mean: 1.56			disorder				
	. 1): (A)				(SD: 3.5).			30%				
	Olfactory				- digit							
	and Taste				symbol			Psychiatri				
	Assessment				substitution			c				
	: The				test (DSST)			assessme				
	evaluation				mean: 32.2			nt:				
	of integrity				(SD: 19.3);			- PTSD				
	of olfactory				-			prevalence				
	and				Impairment			13.4%				
	gustatory				in naming			- Last-year				
	function				ability			suicidal				
	(according				Boston			attempt:				
	to the				naming test			2.4%;				
	patients'				mean:			- Last 4				
	subjective				13.15 (SD:			weeks				
	impression)				2.27);			suicidal				
	was				- word list			ideation				
	performed				mean:			10.1%;				
	with the aid				15.35 (SD:			- Hospital				
	of Visual				4.7);			Anxiety and				
	Analogue				-			Depression				
	Scale				constructio			Scale				
	developed				nal praxis			anxiety:				
	by authors.				mean: 8.26			mean 6.0				
	In brief, the				(SD: 2.55);			(SD: 5.1);				
	patients				- word list			- Hospital				
	were asked				recall			Anxiety and				
	to indicate				mean: 4.86			Depression				
	their				(SD: 2.25);			Scale				
	perception				- word list			depression:				
	of change				recognition			mean 4.8				
	in the				mean: 7.88			(SD: 4.6);				
	previous				(SD: 2.77)			-				
	ability to											
	recognize											
	(a) smell or											
	(b) taste in											

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	a numeric											
	scale											
	ranging											
	from 0 to											
	10, where											
	higher											
	scores											
	represent											
	better											
	function											
	[0= unable											
	to identify											
	any (a)											
	smell or (b)											
	taste;											
	10= no											
	impairment											
	in (a) smell											
	or (b) taste											
	sensitivity].											
	These											
	scales were											
	administere											
	d upon											
	objective,											
	multidiscipli											
	nary											
	reassessme											
	nt of											
	patients 6–											
	11 months											
	after											
	hospital											
	discharge											
	to depict											
	patients'											
	current											
	perception											
	of											
	impairment											
	in smell or											

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	taste											
	identificatio											
	n, and also											
	retrospectiv											
	ely to											
	estimate											
	the											
	occurrence											
	of any such											
	impairment											
	s during the											
	acute phase											
	of COVID-											
	19. Cut-of											
	scores were											
	used to											
	allocate											
	participants											
	into distinct											
	categories											
	according											
	to											
	magnitude											
	of olfactory											
	and/or											
	gustatory											
	impairment,											
	i.e., severe											
	impairment											
	(0-4);											
	moderate											
	impairment											
	(8–5); mild											
	impairment											
	(9); or no											
	impairment											
	(10) in											
	these											
	chemosens											
	ory											
	functions.											

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	Subjects											
	presenting											
	with											
	moderate/											
	severe											
	impairment											
	were											
	compared											
	with those											
	reporting											
	mild/no											
	impairment											
	to verify the											
	association											
	of these											
	conditions											
	with											
	neuropsychi											
	atric											
	outcomes.											
	Subjects											
	were also											
	inquired											
	about the											
	presence											
	parosmia in											
	a binary											
	question											
	(yes/no);											
	(B)											
	Structured											
	Psychiatric											
	Interview:											
	Clinical											
	Interview											
	Schedule-											
	Revised											
	(CIS-R),											
	and											
	Structured											
	Clinical											

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	Interview											
	for DSM-5											
	Disorders,											
	Clinical											
	Version											
	(SCID-5- CV) for											
	psychotic											
	disorders;											
	(C)											
	Psychiatric											
	Assessment											
	Scales:											
	Hospital											
	Anxiety and											
	Depression											
	Scale											
	(HAD), Ask											
	Suicide-											
	Screening											
	Questions											
	(ASQ),											
	Post-											
	Traumatic Stress											
	Disorder											
	Checklist											
	(PCL-C),											
	and Alcohol											
	Use											
	Disorder											
	Identificatio											
	n Test											
	(AUDIT);											
	(D)											
	Cognitive											
	Assessment											
	: Memory											
	Complaint											
	Scale											
	(MCS),											

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	Temporal and Spatial Orientation of Mini- Mental State Examinatio n (MMSE), Trail Making Test (TMT), digit symbol substitution test (DSST), and Neuropsych ological Battery CERAD.											
de Oliveira et al. ⁽⁴⁰⁾	Authors' own standardise d questionnai re and validated questionnai res Online or telephone questionnai re EQ-5D-3L EQVAS		Symptoms of Long COVID >4 weeks post- COVID- 19: Fatigue: 233 (63.1%) Fever: 6 (1.6%) Number of symptoms: 1-5: 296 (80.2%) 6-10: 73 (19.8%)	Symptoms of Long COVID >4 weeks post- COVID- 19: Chest pain: 129 (35.0%) Palpitations : 15 (4.1%)	Symptoms of Long COVID >4 weeks post- COVID- 19: Headache: 90 (24.4%)	Symptoms of Long COVID >4 weeks post- COVID- 19: Dyspnoea: 198 (53.7%)		Symptoms of Long COVID >4 weeks post- COVID- 19: Depression and anxiety: (N = 361%) 199 (55.1%)	Symptoms of Long COVID >4 weeks post- COVID- 19: Anosmia: 52 (14.1%) Dysgeusia: 50 (13.6%) Both anosmia and dysgeusia: 25 (6.8%)	Symptoms of Long COVID >4 weeks post- COVID- 19: Arthralgia: 207 (56.1%) Myalgia: 189 (51.2%)	Symptoms of Long COVID >4 weeks post- COVID- 19: Gastrointest inal symptoms: 110 (29.8%)	Symptom s of Long COVID >4 weeks post- COVID- 19: Skin lesion: 51 (13.8%)
Evans et al. ⁽⁴⁵⁾	Authors' own design and		Symptoms at 1-year follow up	Symptoms at 1-year follow up	Symptoms at 1-year follow up	Symptoms at 1-year follow up	Symptoms at 1-year follow up	Symptoms at 1-year follow up	Symptoms at 1-year follow up	Symptoms at 1-year follow up	Symptoms at 1-year follow up	Symptom s at 1- year

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	Validated questionnai res Face to face assessment Symptoms at five months and one year Generalised Anxiety Disorder Questionnai re (GAD-7) (Anxiety) Patient Health Questionnai re (PHQ-9) (Depression) Post- Traumatic Stress Disorder Checklist for DSM V (PCL-5) Questionnai re Dyspnoea- 12 FACIT fatigue subscale score (FACIT) Brief Pain Inventory (BPI)		n(%): Any symptom: 773/817 (94.6%) - Symptom count Median (IWR): 10 (4 - 16) Fatigue: 463/770 (60.1%) Pain: 359/770 (46.6%) Bleeding: 34/781 (4.4%) Symptoms measured by VAS 0- 10 scale (within the PSQ): Fatigue (n=752) Median IQR: 3.0 (0.0 - 6.0) Pain (n=751) Median IQR: 1.0 (0.0 - 5.0)	n (%): Chest tightness: 198/807 (24.5%) Palpitations : 165/803 (20.5%) Chest pain: 124/804 (15.4%) Leg/ankle swelling: 223/810 (27.5%) Symptoms measured by VAS 0- 10 scale (within the PSQ): Cough (n=751) Median IQR: 0.0 (0.0 – 2.0)	n (%): Physical slowing down: 429/811 (52.9%) Sleep disturbance : 402/769 (52.3%) Slowing down in your thinking: 377/808 (46.7%) Short-term memory loss: 360/808 (44.6%) Limb weakness: 341/813 (41.9%) Difficulty with concentrati on: 337/807 (41.8%) Tingling feeling/pins and needles: 285/813 (35.1%) Headache: 253/808 (31.3%) Confusion/f	n (%): Breathlessn ess: 395/769 (51.4%) Cough: 215/771 (27.9%) Pain on breathing: 106/807 (13.1%) Symptoms measured by VAS 0- 10 scale (within the PSQ): Breathlessn ess (n=747) Median IQR: 2.0 (0.0 – 5.0)	n (%): Erectile Dysfunction : 144/491 (29.3%)	n (%): Altered personality/ behaviour ('not the same person'): 171/812 (21.1%)	n (%): Problems with balance: 250/811 (30.8%) Loss of sense of smell: 86/808 (10.6%) Loss of taste: 79/812 (9.7%)	n (%): Myalgia: 442/809 (54.6%) Arthralgia: 382/803 (47.6%)	n (%): Constipatio n: 141/811 (17.4%) Diarrhoea: 113/804 (16.5%) Abdominal pain: 119/808 (14.7%) Stomach pain: 108/802 (13.5%) Loss of appetite: 97/808 (12.0%) Nausea/vo miting: 71/809 (8.8%) Weight loss: 56/809 (6.9%)	follow up n (%): Skin rash: 127/776 (16.4%) Lumpy lesions (purple/pin k/bluish) on toes: 35/776 (4.5%)

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	severity				uzzy head:							
	and				250/811							
	interference				(30.8%)							
	Short				Dizziness or							
	Physical				lightheaded							
	Performanc				: 243/810							
	e Battery				(30.0%)							
	(SPPB)				Difficulty							
	Incremental				with							
	Shuttle				communicat							
	Walk Test				ion:							
	(ISWT)				168/810							
	Rockwood				(20.7%)							
	Clinical				Problems							
	Frailty Scale				seeing:							
	(CFS)				115/807							
	Montreal				(14.3%)							
	Cognitive				Tremor/sha							
	Assessment				kiness:							
	(MoCA)				106/812							
	Spirometry				(13.1%)							
	and				Loss of							
	Pulmonary				control of							
	Function				passing							
	Testing				urine:							
	BNP / NT-				96/807							
	pro BNP				(11.9%)							
	Glycated				Can't fully							
	haemoglobi				move or							
	n (HbA1c)				control							
	C-Reactive				movement:							
	Protein				83/810							
	(CRP)				(10.2%)							
	EQ5D-5L				Loss of							
	VAS				control of							
	EQ5D-5L				opening							
	Utility Index				your							
	Washington				bowels:							
	Group Short				58/807							
	Set of				(7.2%)							
	Functioning				Hemiparesis							
	rancioning				riemiparesis							

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	Severity Continuum visual analogue scale for breathlessn ess and fatigue				(inc facial): 29/811 (3.6%) Fainting / blackouts: 15/808 (1.9%) Seizures: <5/808 (<1%)							
					Symptoms measured by VAS 0- 10 scale (within the PSQ): Sleep quality (n=754) Median IQR: 2.0 (0.0 - 5.0)							
Fang et al. ⁽⁶⁵⁾	Authors' own design and validated questionnai res Telephone interview The one- year follow up was conducted via telephone interview by trained physicians using a		Symptoms at 1-year follow up n (%): Fatigue: 400 (32.4%) Chill: 1 (0.1%) Severe patients n (%): Fatigue: 166 (37.9%)	Symptoms at 1-year follow up n (%): Oedema of lower limbs: 24 (1.9%) Chest tightness: 195 (15.8%) Palpitations : 66 (5.4%) Severe patients n (%):	Symptoms at 1-year follow up n (%): Dizziness: 47 (0.8%) Headache: 31 (2.5%) Severe patients n (%): Dizziness: 17 (3.9%) Headache: 16 (3.7%)	Symptoms at 1-year follow up n (%): Dyspnoea: 44 (3.6%) Cough: 71 (5.8%) Expectorati on: 53 (4.3%) Haemoptysi s: 1 (0.1%) Shortness of breath: 53 (4.3%)	Symptoms at 1-year follow up n (%): Sweating: 246 (20.0%) Severe patients n (%): Sweating: 105 (24.0%) Non- severe	Symptoms at 1-year follow up n (%): Anxiety: 141 (11.4%) Severe patients n (%): Anxiety: 56 (12.8%) Non- severe patients n (%):	Symptoms at 1-year follow up n (%): Sore throat: 12(1.0%) Nasal congestion: 2 (0.2%) Smell reduction: 21 (1.7%) Taste change: 23 (1.9%)	Symptoms at 1-year follow up n (%): Myalgia: 111 (9.0%) Severe patients n (%): Non- severe patients n (%):	Symptoms at 1-year follow up n (%): Diarrhoea: 9 (0.7%) Nausea: 1 (0.1%) Vomiting: 1 (0.1%) Anorexia: 13 (1.1%) Severe patients N (%): Diarrhoea: 3 (0.7%)	

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	uniformed questionnai re including self- reported symptoms (general sequelae, respiratory sequelae, cardiovascu lar sequelae, digestive system score items of which ≥ 10 (the median value) were treated as categorical outcomes.		Non- severe patients n (%): Fatigue: 234 (29.4%) Chill: 1 (0.1%)	Oedema of lower limbs: 13 (3.0%) Chest tightness: 94 (21.5%) Palpitations : 29 (0.6%) Non- severe patients n (%): Oedema of lower limbs: 11 (1.4%) Chest tightness: 101 (12.7%) Palpitations : 37 (4.7%)	Non- severe patients n (%): Dizziness: 30 (3.8%) Headache: 15 (1.9%)	Severe patients n (%): Dyspnoea: 22 (5.0%) Cough: 34 (7.8%) Expectorati on: 26 (5.9%) Shortness of breath: 30 (6.8%) Non- severe patients n (%): Dyspnoea: 22 (2.8%) Cough: 37 (4.7%) Expectorati on: 27 (3.4%) Haemoptysi s: 1 (0.1%) Shortness of breath: 23 (2.9%)	patients n (%): Sweating: 141 (17.7%)	Anxiety: 85 (10.7%)	Severe patients n (%): Sore throat: 7 (1.6%) Nasal congestion: 1 (0.2%) Smell reduction: 12 (2.7%) Taste change: 11 (2.5%) Non- severe patients n (%): Sore throat: 5 (0.6%) Nasal congestion: 1 (0.1%) Smell reduction: 9 (1.1%) Taste change: 12 (1.5%)	Myalgia: 59 (7.4%)	Anorexia: 6 (1.4%) Non- severe patients n (%): Diarrhoea: 6 (0.8%) Nausea: 1 (0.1%) Vomiting: 1 (0.1%) Anorexia: 7 (0.9%)	

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			Symptoms ≥2months following COVID-19 n (%):	Symptoms ≥2months following COVID-19 n (%):	Symptoms ≥2months following COVID-19 n (%):	Symptoms ≥2months following COVID-19 n (%):		Symptoms ≥2months following COVID-19 n (%):	Symptoms ≥2months following COVID-19 n (%):	Symptoms ≥2months following COVID-19 n (%):	Symptoms ≥2months following COVID-19 n (%):	Symptom s ≥2months following COVID-19 n (%):
Feldman et al. ⁽⁸⁵⁾	Validated questionnai re Telephone interview Newcastle Post-COVID Syndrome Follow Up Screening Questionnai re		Total: n=398 Fatigue: 210 (53%) Weakness: 151 (38.2%) Long COVID: n=124 Fatigue: 113 (91.1%) Weakness: 85 (68.6%) Full Recovery: n=270 Fatigue: 96 (35.6%) Weakness: 65 (24.2%)	Total: n=398 Palpitations : 61 (15.4%) Long COVID: n=124 Palpitations : 46 (37.1%) Full Recovery: n=270 Palpitations : 14 (5.2%)	Total: n=398 Sleep disturbance : 109 (27.5%) Problems with memory: 14 (3.5%) Concentrati on: 14 (3.5%) Headache: 14 (3.5%) Numbness: (3%) Dizziness: 11 (2.8%) Long COVID: n=124 Sleep disturbance : 71 (57.3%) Full Recovery: n=270 Sleep disturbance : 37 (13.7%)	Total: n=398 Breathlessn ess: 165 (41.7%) Cough: 75 (18.9%) Long COVID: n=124 Breathlessn ess: 98 (79%) Cough: 41 (33.1%) Full Recovery: n=270 Breathlessn ess: 66 (24.4%) Cough: 33 (12.2%)		Total: n=398 Nightmares or flashbacks: 34 (8.6%) Low mood: 103 (26.1%) Anxiety: 112 (28.4%) Long COVID: n=124 Nightmares or flashbacks: 29 (23.4%) Low mood: 69 (56.1%) Anxiety: 63 (50.8%) Full Recovery: n=270 Nightmares or flashbacks: 5 (1.9%) Low mood: 33 (12.2%)	Total: n=398 Anosmia: 53 (13.4%) Ageusia: 52 (13.2%) Long COVID: n=124 Anosmia: 25 (20.1%) Ageusia: 26 (21%) Full Recovery: n=270 Anosmia: 28 (10.4%) Ageusia: 26 (9.7%)	Total: n=398 Myalgia: 114 (28.9%) Long COVID: n=124 Myalgia: 74 (59.7%) Full Recovery: n=270 Myalgia: 39 (14.5%)	Total: n=398 Weight loss (at least 3kg): 132 (33.5%) Long COVID: n=124 Weight loss (at least 3kg): 67 (54.9%) Full Recovery: n=270 Weight loss (at least 3kg): 64 (23.7%)	Total: n=398 Hair loss: 22 (5.5%)

Autonomi Psycholog Ear, Nose Musculosk Gastrointe Dermatol Cardiovas Neurologi Respirator New onset General c Nervous ical/Psych and eletal stinal ogic Assessme Author cular С У nt Mode conditions Symptoms System iatric Throat Symptoms Symptoms Symptom Symptoms Symptoms Symptoms Symptoms Symptoms Symptoms s Anxiety: 48 (17.8%) Authors' The own design prevalence and of newvalidated onset post-COVID questionnai res (HADS musculoskel and PSQI) etal pain in the total Telephone interview sample was up to А . 74.9% questionnai re focusing Musculoskel on musculoskel etal pain etal pain symptoms symptoms post-COVID . (n %): was Fernándezdeveloped 887 de-lasby a (45.1%) Peñas et multidiscipli al.⁽²³⁾ nary No research musculoskel etal pain team. symptoms post-COVID Participants . (n %): were asked Ì082 for the (54.9%) presence of pain 442/887 symptoms patients appearing after reporting hospital musculoskel discharge etal pain and post-COVID whether the reported musculoskel reported etal pain symptoms

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	persisted at									symptoms		
	the time of									before		
	the study.									infection.		
	Particular											
	attention									445		
	was paid to									(50.1%)		
	the									developed		
	developmen									new-onset		
	tof									musculoskel		
	musculoskel									etal pain		
	etal post-									post-COVID		
	COVID pain									220/442		
	symptoms									220/442		
	differentiati									(24.8%)		
	ng from									individuals		
	headache,									experiencin		
	particularly migraine-									g previous		
	like pain.									symptoms, reported		
	ince pain.									that post-		
	Musculoskel									COVID pain		
	etal post-									symptoms		
	COVID pain									were		
	was defined									different		
	as follows:									from		
	(1) pain									previous		
	symptoms									symptomat		
	compatible									ology (new-		
	with									onset		
	diagnosis of									musculoskel		
	chronic									etal pain		
	primary									post-		
	musculoskel									COVID)		
	etal pain,									-		
	as defined									222/442		
	by the									(25.1%)		
	Internation									patients		
	al									experienced		
	Association									an increase		
	for the									in the		
	Study of									previous		

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	Pain; (2)									symptoms		
	symptoms									(exacerbate		
	experienced									d		
	for at least									musculoskel		
	3									etal pain		
	consecutive									post-		
	months									COVID) on		
	after									their:		
	hospital									intensity (n		
	discharge,									= 89,		
	and (3)									40.1%)		
	absence of									extension		
	any underlying									(n = 42, 18.9%)		
	medical condition									frequency		
	that could									(n = 55, 24.8%)		
	best explain									intensity		
	pain, e.g.,									and		
	arthritis.									extension		
	artinus.									(n =36,		
	Participants									16.2%)		
	were asked											
	to describe											
	the location											
	of their pain											
	symptoms											
	(e.g., neck,											
	shoulder,											
	spine, lower											
	extremity,											
	upper											
	extremity,											
	and											
	generalised											
) and to											
	differentiate											
	these											
	symptoms											
	from any											
	pain											

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	condition											
	that they											
	experienced											
	before											
	being											
	infected by											
	SARS-CoV-											
	2.											
	Headache											
	symptoms											
	were not											
	included											
	because of											
	the											
	particular											
	classificatio											
	n of											
	headaches											
	and need											
	for a proper											
	diagnosis											
	according											
	to the											
	classificatio											
	n.											
	Anxiety/dep											
	ressive											
	symptoms											
	and sleep											
	quality											
	were											
	assessed											
	with the											
	Hospital											
	Anxiety and											
	Depression											
	Scale											
	(HADS) and											
	the											
	Pittsburgh											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	Sleep											
	Quality											
	Index											
	(PSQI),											
	respectively											
	, because both can be											
	properly											
	evaluated											
	by											
	telephone											
	interview.											
	From											
	HADS, the											
	scale											
	assessing											
	anxiety											
	symptoms											
	(HADS-A; 7											
	items and											
	0-21 points)											
	and the											
	scale											
	assessing depressive											
	symptoms											
	(HADS-D; 7											
	items and											
	0-21 points)											
	were											
	included.											
	Higher											
	scores											
	suggest											
	more											
	anxiety/dep											
	ressive											
	levels, with											
	a cut-off											
	score of 8											
	points											

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	being											
	suggestive											
	of anxiety/											
	depressive											
	disorder. In											
	this study,											
	the cut-off											
	scores											
	recommend											
	ed for											
	Spanish											
	population											
	(HADS-A;											
	12 points;											
	HADS-D; 10											
	points)											
	indicative of											
	anxiety and											
	depressive											
	symptoms											
	were											
	recommend											
	ed,											
	respectively											
	The PSQI											
	(0-21											
	points)											
	evaluates											
	sleep											
	quality by											
	including 19											
	self-rated											
	questions											
	assessing											
	different											
	aspects of											
	sleep											
	during the											
	previous											
	month.											

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	Higher scores indicate worse sleep quality, and a score of 8.0 points is indicative of poor sleep. The PSQI has shown good internal consistency and test– retest reliability											
Fernández- de-las- Peñas et al. ⁽²⁶⁾	reliability. Authors' own design and validated questionnai res (HADS and PSQI) Telephone interview A specific questionnai re for the current study was developed by a multidiscipli nary research team. Participants were systematica lly asked for		Number of post- COVID symptoms (mean SD): 1.9 ± 1.4 ≥3 post- COVID symptoms (n %): 647 (32.85%) Fatigue: 1206 (61.3%) Pain Symptoms (including headache): 887 (45.1%)	Palpitations /Tachycardi a: 140 (7.1%)	Memory Loss: 341 (17.3%) Cognitive Blurring/Fra in Fog: 189 (9.6%) Concentrati on Loss: 140 (7.1%) Ocular Problems: 116 (5.9%)	Dyspnoea at rest: 459 (23.3%) Dyspnoea at exertion: 1054 (53.5%)		HADSA (0- 21): 4.9 \pm 5.3 Anxiety (HADSA \geq 12 points): 308 (15.6%) HADSD (0- 21): 4.7 \pm 4.8 Depression (HADSD \geq 10 points): 373 (18.9%) Sleep Quality (0- 21): 6.5 \pm 4.0 Poor Sleep Quality (PSQI \geq 8	Voice Problems: 35 (1.8%) Ageusia: 53 (2.7%) Anosmia: 80 (4.05%) Throat Pain: 50 (2.5%)		Gastrointest inal Problems: 133 (6.75%) Diarrhoea: 49 (2.5%)	Hair Loss: 470 (23.9%) Skin Rashes: 236 (12%)

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	the							points): 674				
	presence of							(34.2%)				
	any											
	symptom											
	from a											
	predefined											
	list of post- COVID											
	symptoms,											
	e.g.,											
	fatigue,											
	dyspnoea											
	(at rest or											
	exertion),											
	anosmia,											
	ageusia,											
	hair loss,											
	throat pain,											
	diarrhoea,											
	palpitations,											
	cough,											
	cognitive											
	blunting (brain fog),											
	skin rashes,											
	memory											
	loss, visual											
	disorders,											
	voice											
	problems,											
	gastrointest											
	inal											
	disturbance											
	s, pain											
	symptoms,											
	Or											
	concentrati on loss.											
	Participants											
	were free											
	to report											

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	any other											
	symptom											
	not											
	included in											
	the list and											
	that they											
	suffered											
	from.											
	The											
	presence of											
	anxiety/dep											
	ressive											
	symptoms											
	and quality											
	of sleep											
	were											
	assessed											
	with the											
	Hospital											
	Anxiety and											
	Depression											
	Scale											
	(HADS) and											
	Pittsburgh											
	Sleep											
	Quality											
	Index											
	(PSQI),											
	respectively											
	, since both											
	questionnai											
	res can be											
	properly											
	executed by											
	telephone											
1	interview.											
1	The HADS											
	includes											
	one											
	subscale											
	assessing											

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	anxiety											
	symptoms											
	(HADS-A,											
	7-items, 0–											
	21 points)											
	and another											
	one											
	assessing											
	depressive											
	symptoms											
	(HADS-D,											
	7-items, 0–											
	21 point).											
	Although a											
	cut-off											
	score of ≥ 8											
	points has											
	shown good											
	sensitivity											
	and											
	specificity											
	to											
	determine											
	the											
	presence of											
	anxiety or											
	depressive											
	symptoms,											
	o the cut-											
	off scores											
	recommend											
	ed for the											
	Spanish											
	population											
	indicative of											
	anxiety											
	(HADSA											
	≥12 points)											
	and											
	depressive											
	(HADS-D											

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	≥10 points)											
	symptoms											
	were used.											
	The HADS											
	has shown											
	good											
	validity and											
	reliability,											
	and it has											
	been											
	previously											
	used in											
	patients											
	with											
	COVID-19.											
	The PSQI											
	(0-21											
	points)											
	evaluates											
	sleep											
	quality by											
	including 19											
	self-rated											
	questions											
	assessing											
	aspects											
	such as											
	usual											
	bedtime,											
	usual wake											
	time,											
	number of											
	hours slept,											
	and number											
	of minutes											
	to fall											
	asleep;											
	scores ≥8.0											
	points											
	suggest											
	poor sleep											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
Fernández- de-las- Peñas et al. ⁽²⁵⁾	quality. The PSQI has shown good internal consistency and test– retest reliability. Authors' own design Telephone interview Participants were asked for the presence of self- reported fatigue and dyspnoea appearing after hospital discharge and whether the symptom persisted at the time of the study. - Fatigue was defined as generalised sensation of tiredness - Dyspnoea was defined as		Post-COVID fatigue at 6 months (n %): 300/412 (72%) Post-COVID fatigue at 12 months (n %): 187/412 (45%)			Post-COVID dyspnoea at 6 months (n %): 71/412 (17%) Post-COVID dyspnoea at 12 months (n %): 6/412 (14%)						
	shortness of breath,											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
Fernández- de-las- Peñas et al. ⁽²⁶⁾	perception of difficulty breathing, or breathlessn ess. Validated questionnai re Telephone interview The presence or absence of any respiratory/ cardiac symptom including dyspnoea, fatigue, cough, chest pain, and palpitations developed	conditions	Number of post- COVID-19 symptoms (n %) None: 212 (18.5%) 1 symptom: 238 (21%) 2 symptoms: 267 (23.5%) 3 or more symptoms: 425 (37%) 7 months post- COVID-19			7 months post- COVID-19 (n %): Dyspnoea with activity: 627 (55%) No: 608 (53.24%) Mild: 345 (30.21%) Moderate 213 (18.65%) Severe: 69 (6.04%) Dyspnoea at rest: 268				Symptoms	Symptoms	
	after hospitalizati on and whether these symptoms persisted at the time of the study. Reported symptoms should have appeared after hospital		(n %): Fatigue: 695 (61%) No: 447 (39.14%) Mild: 342 (29.95%) Moderate: 258 (22.59%) Severe: 95 (8.32%)			(23.5%) No: 874 (76.52%) Mild: 199 (17.43%) Moderate: 48 (4.2%) Severe: 21 (1.84%) Cough: 24 (2%)						

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	discharge.											
Autior			Symptoms	Symptoms		Symptoms	System	iatric	Throat	Symptoms		Symptom
	was excluded											
	from the analysis in this study.											
	Each symptom is classified											
	on 4 degrees of											

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	severity by											
	the patient											
	(0: no, 1:											
	mild, 2:											
	moderate,											
	and 3:											
	severe). We											
	defined											
	mild											
	affectation											
	if the											
	symptom											
	limited 25%											
	of the											
	patient'											
	activity,											
	moderate if											
	limited											
	50%, and											
	severe											
	when 75%											
	of higher.											
	Further, the											
	FIC also											
	includes											
	other 4											
	items											
	assessing											
	limitations											
	in											
	occupationa											
	Ι,											
	leisure/soci											
	al activities,											
	basic, and											
	instrumenta											
	l activities											
	of daily life											
	[15]. Each											
	item is also											
	classified											

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	on 4 degrees of severity (0: no, 1: mild, 2: moderate, and 3: severe). Mild affectation was referred when the patient perceived a 25% of limitation on the activity, moderate when the limitation was 50%, and severe when perceived as 75% of higher.											
Fernández- de-las- Peñas et al. ⁽²⁷⁾	Authors' own design and validated questionnai res (HADS and PSQI) Telephone interview Participants were systematica Ily asked		No of post- COVID-19 symptoms (mean SD): Hospitalised : 1.3 (1.4) Non- hospitalised : 1.6 (1.4)	Symptoms ≥2 Years Post- COVID-19 (n %) Hospitalis ed: Palpitations /tachycardi a: 2 (0.6%)	Symptoms ≥2 Years Post- COVID-19 (n %) Hospitalis ed: Memory loss: 72 (20%) Cognitive blurring/bra	Symptoms ≥2 Years Post- COVID-19 (n %) Hospitalis ed: Dyspnoea at rest: 14 (3.9%)		Symptoms ≥2 Years Post- COVID-19 (n %) Hospitalis ed (mean SD): HADS-A score (range, 0-	Symptoms ≥2 Years Post- COVID-19 (n %) Hospitalis ed: Voice problems: 1 (0.3%) Ageusia: 4 (1.1%)		Symptoms ≥2 Years Post- COVID-19 (n %) Hospitalis ed: Gastrointest inal problems: 8 (2.2%)	Symptom $s \ge 2$ Years Post- COVID-19 (n %) Hospitalis ed: Hair loss: 27 (7.5%) Rashes: 7 (1.9%)

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	about the presence of symptoms appearing either after hospitalisati on or after the infection and whether these symptoms persisted at the time of the study. To classify any symptom as COVID-19 related, it needed to be attributable to the infection, not better explained by another underlying medical disorder, and with an onset no later than 1 month after SARS-COV-2 infection. The following post-		Symptoms ≥2 Years Post- COVID-19 (n %) Hospitalis ed: Fatigue: 161 (44.7%) Pain symptoms (including headache): 129 (35.8%) Non- hospitalis ed: Fatigue: 147 (47.7%) Pain symptoms (including headache): 92 (29.9%)	Non- hospitalis ed: Palpitations /tachycardi a: 6 (1.9%)	in fog: 18 (5%) Concentrati on loss: 6 (1.7%) Ocular problems: 14 (3.9%) Non- hospitalis ed: Memory loss: 49 (15.9%) Cognitive blurring/bra in fog: 27 (8.8%) Concentrati on loss: 18 (5.8%) Ocular problems: 17 (5.5%)	Non- hospitalis ed: Dyspnoea at rest: 12 (3.9%)		21): 1.2 (1.9) HADS-D score (range, 0- 21): 1.7 (2.4) PSQI score (range, 0- 21): 6.5 (3.7) Non- hospitalis ed (mean SD): HADS-A score (range, 0- 21): 1.8 (2.6) HADS-D score (range, 0- 21): 1.8 (2.5) PSQI score (range, 0- 21): 6.4 (3.5)	Anosmia: 16 (4.4%) Throat pain: 6 (1.7%) Non- hospitalis ed: Voice problems: 5 (1.6%) Ageusia: 6 (1.9%) Anosmia: 13 (4.2%) Throat pain: 11 (3.6%)		Non- hospitalis ed: Gastrointest inal problems: 14 (4.5%) Diarrhoea: 6 (1.9%)	Non-hospitalis ed: Hair loss: 30 (9.7%) Rashes: 9 (2.9%)

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	COVID-19											
	symptoms											
	were											
	systematica Ily											
	assessed:											
	dyspnoea,											
	fatigue,											
	anosmia,											
	ageusia,											
	hair loss,											
	pain											
	symptoms,											
	diarrhoea,											
	skin rashes,											
	palpitations,											
	brain fog,											
	visual											
	disorders,											
	cough, and											
	loss of											
	concentrati											
	on.											
	However,											
	participants											
	were free											
	to report											
	any											
	symptom											
	that they											
	experienced and											
	considered											
	relevant. In											
	addition,											
1	the Hospital											
	Anxiety and											
1	Depression											
	Scale											
	(HADS) was											
	used for											

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	evaluating											
	anxiety or											
	depressive											
	symptoms,											
	and the											
	Pittsburgh											
	Sleep											
	Quality											
	Index											
	(PSQI) was											
	used for											
	evaluating											
	sleep											
	quality											
	because											
	both can be											
	properly											
	assessed by											
	telephone.											
	Both the											
	HADS											
	anxiety											
	(HADS-A; 7											
	items;											
	range, 0-21											
	points) and											
	HADS											
	depressive											
	(HADS-D; 7											
	items;											
	range, 0-21											
	points)											
	scales were											
	used. A											
	cutoff score											
	of 12 points											
	or more for											
	the HADS-A											
	was											
	indicative of											
	anxiety											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	symptoms,											
	and a cutoff											
	score of 10											
	points or											
	more for											
	the HADS-D											
	was											
	indicative of depressive											
	symptoms.											
	The PSQI											
	(range, 0-											
	21 points)											
	was used to											
	assess											
	sleep											
	quality											
	during the											
	previous											
	month, in											
	which a											
	cutoff of											
	8.0 points											
	or more											
	was											
	considered											
	indicative of											
	poor sleep											
	quality.		Normali an af	M/	M/	M/			M/		M/	M/
	Authors'		Number of	Wuhan	Wuhan	Wuhan			Wuhan		Wuhan	Wuhan
	own design Telephone		Post- COVID-19	Post- COVID-19	Post- COVID-19	Post- COVID-19			Post- COVID-19		Post- COVID-19	Post- COVID-19
	interview		Symptoms	Symptoms	Symptoms	Symptoms			Symptoms		Symptoms	Symptom
Fernández-	Post-		(mean	, n (%):	, n (%):	, n (%):			, n (%):		, n (%):	s, n (%):
de-las-	COVID-19		SD):	, Tachycardia	Memory	Dyspnoea:			Ageusia: 10		Diarrhoea:	Hair loss:
Peñas et	symptoms		Wuhan: 2.7	: 3 (1.40%)	loss: 39	59			(5.00%)		15 (7.40%)	58
al. ⁽²⁸⁾	present for		(1.3)	(1.1070)	(19.40%)	(29.35%)			Anosmia: 3		10 (7110 70)	(28.90%)
	each		Alpha: 1.8	Alpha	Brain fog:	Cough: 3			(1.50%)		Alpha	Skin
	variant		(1.1)	Post-	21	(1.50%)			(==== / 0)		Post-	rashes: 26
	assessed.		Delta: 2.1	COVID-19	(10.40%)	(Alpha		COVID-19	(12.90%)
			(1.5)						Post-			. ,

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	Participants were asked to report the presence/a bsence of symptoms appearing after hospitalizati on and whether the symptoms persisted at the time of the study. A predefined list of post- COVID-19 symptoms including dyspnea, fatigue, anosmia, ageusia, hair loss, chest pain, palpitations, diarrhoea, skin rashes, brain fog, visual problems (e.g., worsening of vision, blurred vision), cough and loss of concentrati		Wuhan Post- COVID-19 Symptoms , n (%): Fatigue: 137 (68.20%) Alpha Post- COVID-19 Symptoms , n (%): Fatigue: 151 (71.50%) Delta Post- COVID-19 Symptoms , n (%): Fatigue: 155 (76.35%)	Symptoms , n (%): Tachycardia : 7 (3.30%) Delta Post- COVID-19 Symptoms , n (%): Tachycardia : 8 (3.95%)	Attention Disorders: 14 (7.00%) Visual Problems: 5 (2.50%) Alpha Post- COVID-19 Symptoms , n (%): Memory loss: 38 (18.00%) Brain fog: 22 (10.40%) Attention Disorders: 13 (6.10%) Visual Problems: 11 (5.20%) Delta Post- COVID-19 Symptoms , n (%): Memory loss: 36 (17.80%) Brain fog: 22 (10.90%) Attention Disorders: 6 (3.00%)	Alpha Post- COVID-19 Symptoms , n (%): Dyspnoea: 29 (13.75%) Cough: 9 (4.20%) Delta Post- COVID-19 Symptoms , n (%): Dyspnoea: 26 (12.80%) Cough: 24 (2.10%)			COVID-19 Symptoms , n (%): Ageusia: 9 (4.20%) Anosmia: 12 (5.70%) Delta Post- COVID-19 Symptoms , n (%): Ageusia: 10 (5.00%) Anosmia: 12 (6.00%)		Symptoms , n (%): Diarrhoea: 11 (5.20%) Delta Post- COVID-19 Symptoms , n (%): Diarrhoea: 30 (15.00%)	Alpha Post- COVID-19 Symptom s, n (%): Hair loss: 33 (15.70%) Skin rashes: 12 (5.70%) Delta Post- COVID-19 Symptom s, n (%): Hair loss: 73 (36.15%) Skin rashes: 10 (5.00%)

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	on was systematica Ily assessed. Further, patients were free to report any symptom that they suffered from and considered relevant.				Visual Problems: 9 (4.50%)							
Ferreira et al. ⁽⁴¹⁾	relevant. Validated questionnai res and authors' own design Face to face interview Fatigue Functional Assessment of Chronic Illness Therapy- Fatigue (FACIT) Scale; Dyspnoea Medical Research Council (MRC) dyspnoea scale; Memory impairment		Median no of symptoms : 2 (IQR=1- 5) Objective symptoms (Median IQR, % of total participan ts with abnormal result, n): Fatigue, score (0- 52) (abnormal if ≤39): 42 (33 47); 38% (n=285)	Additional symptoms (N %): Chest pain: 143 (20%) Oedema: 129 (18%)	Objective symptoms (Median IQR, % of total participan ts with abnormal result, n): Memory impairment, score (0- 14) (abnormal if \geq 7): 4 (1 8); 35% (n=262) Insomnia, score (0- 28) (abnormal if \geq 8): 6 (2 11); 32% (n=240)	Objective symptoms (Median IQR, % of total participan ts with abnormal result, n): Dyspnoea, score (0-5), (abnormal ≥2): 1 (0 2); 30% (n=225) Additional symptoms (N %): Cough: 139 (19%)		Objective symptoms (Median IQR, % of total participan ts with abnormal result, n): Posttraumat ic stress disorder, score (0- 85), (abnormal if ≥ 30): 24 (19 36); 35% (n=262) Anxiety, points (0- 21) (abnormal if ≥ 8): 5 (2 9); 26% (n=195)	Objective symptoms (Median IQR, % of total participan ts with abnormal result, n): Ageusia, VAS (0- 100), (abnormal if ≤ 80): 100 (85 100); 23% (n=172) Anosmia, VAS (0- 100), (abnormal if ≤ 80): 100, (abnormal if ≤ 80): 100, (abno	Objective symptoms (Median IQR, % of total participan ts with abnormal result, n): Muscle/joint pain, VAS (0-100) (abnormal if ≥65): 40 (10 65); 41% (n=307)	Additional symptoms (N %): Abdominal symptoms: 101 (14%) Appetite loss: 91 (12%) Diarrhoea: 44 (6%) Nausea/vo miting: 24 (3%)	Additional symptoms (N %): Skin problems: 113 (15%)

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	Memory complaint scale (adapted for COVID- related complaint); Depression Hospital Anxiety and Depression Scale; Anxiety Hospital Anxiety and Depression Scale ; Post- traumatic stress PTSD Checklist (enquiring about COVID- related symptoms); Insomnia severity index; Loss of smell VAS;	Conditions	Additional symptoms (N %): Nocturia: 176 (24%) Weakness: 96 (13%)	Symptoms	Symptoms Additional symptoms (N %): Dizziness: 264 (36%) Loss of concentrati on: 208 (31%) Paresthesia : 116 (15%) Gait problems: 83 (11%) Headache: 80 (11%) Loss of consciousne ss: 27 (4%)	Symptoms	Symptoms			Symptoms	Symptoms	
	Sineli VAS; Loss of taste VAS ; Muscle/joint pain VAS; Nasal obstruction symptom evaluation scale; Quality of											

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	life Visual											
	Analog											
	Scale from											
	the EQ-5D;											
	Overall											
	functional											
	status Post-											
	COVID-19											
	Functional											
	Status											
	Scale;											
	Direct											
	yes/no											
	answers:											
	Weakness,											
	Gait											
	impairment,											
	Headache,											
	Paresthesia,											
	Dizziness,											
	Loss of											
	consciousne											
	ss, Hearing											
	loss,											
	Tinnitus,											
	Appetite											
	loss,											
	Constipatio											
	n											
	/abdominal											
	pain,											
	Diarrhoea,											
	Nausea /											
	vomiting,											
	Oedema,											
	Nocturia,											
	Skin											
	problems,											
	Cough,											
	Chest pain,											
	Loss of											

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	concentrati											
Frontera et al. ⁽¹¹⁷⁾	validated questionnai res and Authors' own design Telephone interview with patient or proxy Functional status and disability were assessed using the modified Rankin Scale (mRS; 0 = no symptoms, 6 = dead, dichotomize d as 0–3 versus 4– 6), activities of daily living were evaluated with the Barthel Index of activities of daily living (0 = completely dependent, 100 =		Scores on tests of function, cognition, and neurologic al quality of life at 6 months (Mean SD): NeuroQoL fatigue, (abnormal T- score \geq 60) : 45.7 (10) Scores on tests of function, cognition, and neurologic al quality of life at 12 months (Mean SD): NeuroQoL fatigue, (abnormal T- score \geq 60) : 45.7 (10) Scores on tests of function, cognition, and neurologic al quality of life at 12 months (Mean SD): NeuroQoL fatigue, (abnormal T- score \geq 60) : 45.6 (11) Abnormal	Symptoms at 12 months (n %): Chest pain: 5 (2%) Irregular heartbeat or racing heart: 11 (5%)	Scores on tests of function, cognition, and neurologic al quality of life at 6 months (Mean SD): Modified Rankin Scale, (poor = 4- 6): 3 (2) Barthel Index (abnormal <100): 85.7 (25) T-MoCA (abnormal <100): 85.7 (25) NeuroQoL sleep, (abnormal T- score > 60) : 46.3 (10) Scores on tests of function, and neurologic	Symptoms at 12 months (n %): Shortness of breath: 73 (31%) Cough: 18 (8%) Wheezing: 10 (4%)	Symptoms at 12 months (n %): Post- exertional malaise: 20 (8%)	Scores on tests of function, cognition, and neurologic al quality of life at 6 months (Mean SD): NeuroQoL anxiety, (abnormal T- score ≥ 60) : 48.4 (9) NeuroQoL depression (abnormal T- score ≥ 60) : 44.6 (8) Scores on tests of function, cognition, and neurologic al quality of life at 12 months (Mean SD): NeuroQoL anxiety, (abnormal	Symptoms at 12 months (n %): Persistent loss of taste/smell: 7 (3%) Difficulty swallowing: 4 (2%) Problems with balance: 24 (10%) Loss of hearing: 3 (1%) Ringing in the ears: 3 (1%)	Symptoms at 12 months (n %): Joint pain/ache: 20 (8%) Stiffness of muscles: 17 (7%) Weakness of arms or legs: 25 (11%)	Symptoms at 12 months (n %): Loss of appetite: 11 (5%)	Symptom s at 12 months (n %): Lumpy toes (COVID toes): 4 (2%)
	independen		scores at		al quality			T-				

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	t for all		6 months		of life at			score ≥ 60)				
	activities,		(n %):		12 months			: 46.8 (9)				
	dichotomise		NeuroQoL		(Mean			NeuroQoL				
	d as		fatigue:		SD):			depression				
	completely		14/272		Modified			(abnormal				
	independen		(5%)		Rankin			Ť-				
	t with a		、 ,		Scale,			score ≥ 60)				
	score of		Abnormal		(poor = 4-			: 44.3 (8)				
	100 versus		or poor		ö): 2 (2)							
	<100),		scores at		Barthel			Abnormal				
	cognition		12 months		Index			or poor				
	was		(n %):		(abnormal			scores at				
	assessed		NeuroQoL		<100): 87.2			6 months				
	with the		fatigue:		(24)			(n %):				
	telephone-		20/223		T-MoCA			NeuroQoL				
	MoCA (t-		(9%)		(abnormal			anxiety:				
	MoCA; 22 =		、 ,		× ≤18): 17.5			21/280				
	perfect		Symptoms		(3.8)			(8%)				
	score; ≤18		at 12		NeuroQoL			NeuroQoL				
	= abnormal		months (n		sleep,			depression:				
	cognition),		%):		(abnormal			8/279 (3%)				
	and Quality		Fatigue: 25		Ť-							
	of Life in		(11%)		score ≥ 60)			Abnormal				
	Neurologica		Fever: 5		: 46.1 (11)			or poor				
	I Disorders		(2%)					scores at				
	(NeuroQoL)		Difficulty		Abnormal			12 months				
	short form		urinating: 7		or poor			(n %):				
	self-		(3%)		scores at			NeuroQoL				
	reported		. ,		6 months			anxiety:				
	health				(n %):			16/225				
	measures				Modified			(7%)				
	of anxiety,				Rankin			NeuroQoL				
	depression,				Scale:			depression:				
	fatigue and				189/381			9/225 (4%)				
	sleep were				(50%)							
	collected.				Barthel			Symptoms				
	NeuroQoL				Index:			at 12				
	raw scores				134/304			months (n				
	were				(44%)			%):				
	converted				-			Anxiety: 30				
	into T-							(13%)				

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	scores with				T-MoCA:			Depression/				<u> </u>
	a mean of				106/215			sadness: 27				
	50 and				(49%)			(11%)				
	standard				(1570)			(11/0)				
	deviation of				Abnormal							
	10 in a				or poor							
	reference				scores at							
	population.				12 months							
	Higher T-				(n %):							
	scores				Modified							
	indicate				Rankin							
	worse self-				Scale:							
	reported				79/236							
	health for				(34%)							
	the anxiety,				Barthel							
					Index:							
	depression, fatigue and				86/236							
	sleep				(36%)							
	metrics.				T-MoCA: 69/170							
	NeuroQoL scores were											
					(41%)							
	dichotomize				Commission							
	d at the				Symptoms							
	mean + 1 standard				at 12							
					months (n							
	deviation				%): Brain							
	(T-scores											
	≥60 versus				fog/confusi							
	<60). Patients				on/difficulty							
	with fewer				concentrati ng/memory							
	than 13											
					loss: 48							
	years of				(20%) Haadachau							
	education				Headache:							
	received an additional				54 (23%)							
					Dizziness/li							
	point when				ght-							
	scoring the				headedness							
	t-MoCA.				: 17 (7%)							
	With the											
	exception											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	of the t- MoCA, all of				Vision abnormaliti							
	the above				es: 8 (3%)							
	batteries have been				Difficulty sleeping:							
	validated				27 (11%)							
	for				Fainting/bla							
	surrogate				ckouts: 5							
	completion,				(2%)							
	and				Tremors: 3							
	surrogates were asked				(1%) Slowness of							
	to complete				movement:							
	these				13 (5%)							
	metrics for				Jerking of							
	patients				the limbs: 2							
	who were unable to				(1%) Numbness:							
	do so.				8 (3%)							
	Symptoms				0 (370)							
	were											
	categorized											
	following											
	the World Health											
	Organizatio											
	n (WHO)											
	clinical case											
	report form											
	for post-											
	acute COVID-19											
	symptoms.											
	Post-acute											
	symptom											
	data was											
	only											
	collected at the 12-											
	month											

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	follow-up interview.											
	Authors'		All	All	All	All		All	All	All	All	All
	own design		children (n=1884)	children (n=1884)	children (n=1884)	children (n=1884)		children (n=1884)	children (n=1884)	children (n=1884)	children (n=1884)	children (n=1884)
	Telephone interview		Number of	Symptoms	Symptoms	Symptoms		Symptoms	Symptoms	Symptoms	Symptoms	Skin
	with parent		persistent	(n %):	(n %):	(n %):		(n %):	(n %):	(n %):	(n %):	condition
	or caregiver		, new or	Chest pain:	Mental	Cough: 13		Anxiety: 7	Runny nose	Muscle,	Anorexia,	or rash, n
	0. 00.05.00		recurring	3 (0.2)	'fuzziness',	(0.7)		(0.4)	or	joint, or	loss of	(%)
	Caregivers		health	. ,	loss of	Difficulty		Depression:	congestion:	body pain:	appetite: 7	[95%CI]:
	were		problem	Cardiovas	focus: 4	breathing,		6 (0.3)	6 (0.3)	4 (0.2)	(0.4)	10 (0.5)
	contacted		(n %):	cular, n	(0.2)	short of		Other	Loss of			[0.3-1.0]
	and asked if		1:65 (3.5)	(%)	Dizziness or	breath: 13		psychologic	smell or	Non-	Gastrointe	
	their child		2: 25 (1.3)	[95%CI]:	lightheaded	(0.7)		al	taste: 9	hospitalis	stinal, n	Non-
	had any		3+: 20	12 (0.6)	: 2 (0.1)	Wheeze or		symptoms	(0.5)	ed	(%)	hospitalis
	persistent,		(1.1)	[0.3-1.1]	Headache:	asthma		or		N=1437	[95%CI]:	ed N=1437
	new, or returning		Symptoms	Non-	7 (0.4) Seizures: 1	exacerbatio n: 8 (0.4)		diagnoses: 7 (0.4)	Ophthalm	Symptoms	12 (0.6) [0.3-1.1]	N=1437
	symptoms		(n %):	hospitalis	(0.1)	Other		7 (0.7)	ologic	(n %):	[0.5-1.1]	Skin
	or health		Fatigue or	ed	(0.1)	respiratory		Non-	and/or	Muscle,	Non-	condition
Funk et	problems		weakness:	N=1437	Non-	symptoms		hospitalis	otolaryng	joint, or	hospitalis	or rash, n
al. ⁽⁷⁷⁾	that may		21 (1.1)		hospitalis	or		ed	ologic, n	body pain:	ed	(%)
	have been		Fever: 9	Symptoms	ed	diagnoses:		N=1437	(%)	3 (0.2)	N=1437	[95%CI]:
	associated		(0.5)	(n %):	N=1437	12 (0.6)			[95%CI]:			9 (0.6)
	with the			Chest pain:				Symptoms	4 (0.2)	Hospitalis	Symptoms	[0.3-1.2]
	illness		Other	3 (0.2)	Symptoms	Non-		(n %):	[0.1-0.5]	ed N=447	(n %):	
	prompting		symptoms		(n %):	hospitalis		Anxiety: 3			Anorexia,	Hospitalis
	the initial ED		or diagnoses,	Cardiovas cular, n	Mental `fuzziness',	ed N=1437		(0.2) Depression:	Non-	Symptoms (n %):	loss of	ed N=447
	evaluation.		n (%)	(%)	loss of	N=1437		3 (0.2)	hospitalis ed	Muscle,	appetite: 7 (0.5)	Skin
	Post-		[95%CI]:	[95%CI]:	focus: 3	Symptoms		Other	N=1437	joint, or	(0.5)	condition
	COVID-19		12 (0.6)	3 (0.2) [0-	(0.2)	(n %):		psychologic	11-1-57	body pain:	Gastrointe	or rash, n
	conditions		[0.3-1.1]	0.6]	Dizziness or	Cough: 9		al	Symptoms	1 (0.2)	stinal, n	(%)
	were not				lightheaded	(0.6)		symptoms	(n %):	X- 9	(%)	[95%CI]:
	present if		Non-	Hospitalis	: 2 (0.1)	Difficulty		or	Runny nose		[95%CI]:	1 (0.2) [0-
	the		hospitalis	ed N=447	Headache:	breathing,		diagnoses:	or		4 (0.3)	1.2]
	caregiver		ed		3 (0.2)	short of		3 (0.1)	congestion:		[0.1-0.7]	
	indicated		N=1437	Cardiovas		breath: 10			4 (0.3)			
1	that these			cular, n	Hospitalis	(0.7)		Hospitalis	Loss of		Hospitalis	
	symptoms			(%)	ed N=447	Wheeze or		ed N=447	smell or		ed N=447	

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	were neither		Number of persistent	[95%CI]: 9 (2.0)	Symptoms	asthma exacerbatio		Symptoms	taste: 7 (0.5)		Gastrointe	
	persistent		, new or	[0.9-3.8]	(n %):	n: 7 (0.5)		(n %):	(0.5)		stinal, n	
	(i.e.,		recurring	[0.5 5.0]	Mental	Other		Anxiety: 4	Ophthalm		(%)	
	recovered		health		'fuzziness',	respiratory		(0.9)	ologic		[95%CI]:	
	completely		problem		loss of	symptoms		Depression:	and/or		8 (1.8)	
	prior to 90		(n %):		focus: 1	or		3 (0.7)	otolaryng		[0.8-3.5]	
	days) nor		1: 37 (2.6)		(0.2)	diagnoses:		Other	ologic, n			
	novel (i.e.,		2: 17 (1.2)		Headache:	5 (0.4)		psychologic	(%)			
	underlying		3+: 12		4 (0.9)			al	[95%CI]:			
	condition without		(0.8)		Seizures: 1	Hospitalis ed N=447		symptoms	2 (0.1) [0- 0.5]			
	exacerbatio		Symptoms		(0.2)	ea N=447		or diagnoses:	0.5]			
	n). Post-		(n %):			Symptoms		4 (0.9)	Hospitalis			
	COVID-19		Fatigue or			(n %):		1 (0.5)	ed N=447			
	conditions		weakness:			Cough: 4						
	were		14 (1.0)			(0.9)			Symptoms			
	classified as		Fever: 7			Difficulty			(n %):			
	cardiovascu		(0.5)			breathing,			Runny nose			
	lar,					short of			or			
	dermatologi		Other			breath: 3 (0.7)			congestion: 2 (0.5)			
	c, ophthalmol		symptoms or			(0.7) Wheeze or			Loss of			
	ogic or		diagnoses,			asthma			smell or			
	otolaryngol		n (%)			exacerbatio			taste: 2			
	ogic,		[95%CI]:			n: 1 (0.2)			(0.5)			
	gastrointest		6 (0.4)			Other			、			
	inal,		[0.2-0.9]			respiratory			Ophthalm			
	neurologic,					symptoms			ologic			
	psychologic		Hospitalis			or			and/or			
	al,		ed N=447			diagnoses:			otolaryng			
	respiratory, systemic		Number of			7 (1.6)			ologic, n (%)			
	(e.g.,		persistent						(%) [95%CI]:			
	fatigue,		, new or						2 (0.5)			
	weakness,		recurring						[0.1-1.6]			
	fever,		health									
	anorexia),		problem									
	or other.		(n %):									
	Caregivers											
	could											

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	indicate the presence of PCCs using check boxes or free text. The PCC term also reflected health problems reported by children who tested negative, to permit comparison s.		1: 28 (6.3) 2: 8 (1.8) 3+: 8 (1.8) Symptoms (n %): Fatigue or weakness: 7 (1.6) Fever: 2 (0.5) Other symptoms or diagnoses, n (%) [95%CI]: 6 (1.3) [0.5-2.9]									
Gonzalez- Islas et al. ⁽⁷³⁾	Face to face assessment but no assessment of symptoms Body composition , anthropome try, measures of hand grip strength, measures of respiratory muscle strength					Nc	o symptoms rep	orted in the stu	dy			

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	were performed											
	by a											
	qualified											
	nutritionist											
	and											
	physician											
	and											
	standardise											
	d as part of											
	routine											
	studies in											
	the post-											
	COVID-19											
	clinical											
	manageme											
	nt provided											
	to the											
	patients. Sarcopenia											
	was defined											
	according											
	to											
	EWGSOP2											
	as the											
	presence of											
	low muscle											
	mass (in											
	men											
	ASMM < 20											
	kg and in											
	women as											
	ASMM < 15											
	kg) and low											
	muscle											
	strength (in men											
	handgrip											
	strength < 2											
	7 kg and in											
	women											

	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	c Nervous System Symptoms	ical/Psych iatric Symptoms	and Throat Symptoms	eletal Symptoms	stinal Symptoms	Dermatol ogic Symptom s
Heightman et al. ⁽⁴⁷⁾						Y Symptoms Full sample (n=1325); Hospitalis ed (n=547); Non- hospitalis ed (n=566); Emergenc y Dept (n=212) Breathlessn ess: 651 (49.1%); 211 (38.6%); 342 (60.4%); 98 (46.2) Cough: 312 (23.5%); 106 (19.4%); 150 (26.5%); 56 (26.4)	System	iatric	Throat			Symptom

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	domain-5				25 (4.6%);							
	level),				92							
	symptom				(16.3%);							
	severity for				25 (11.8%)							
	breathlessn											
	ess,											
	fatigue,											
	cough,											
	sleep											
	disturbance											
	and											
	palpitations,											
	MRC											
	(Medical											
	Research											
	Council)											
	Dysphoea											
	Scale, Post-											
	Traumatic Stress											
	Disorder											
	Scale											
	(PTSD),											
	Fatigue											
	Assessment											
	Scale, two-											
	item											
	Generalised											
	Anxiety											
	Disorder											
	(GAD-2),											
	and two-											
	item Patient											
	Health											
	Questionnai											
	re (PHQ-2).											
	Selected											
	patients											
	underwent											
	further											
	investigatio											

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	n at the											
	discretion											
	of the											
	clinician or											
	following											
	multidiscipli											
	nary team											
	meetings											
	with											
	respiratory,											
	cardiology											
	and											
	neurology											
	input											
	according											
	to clinical											
	need.											
	These tests											
	included full											
	blood											
	count, liver											
	and renal											
	function, D-											
	dimer,											
	troponin											
	and NT pro-											
	brain											
	natriuretic											
	peptide											
	. (NT-											
	proBNP), as											
	well as sit-											
	to-stand											
	test, chest											
	X-ray,											
	Computed											
	Tomograph											
	у											
	Pulmonary											
	Angiograph											
	y (CTPA)											

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	with HRCT											
	(High-											
	Resolution											
	Computed											
	Tomograph											
	y)											
	precontrast,											
	ECG,											
	cardiac MRI											
	(cMRI),											
	brain MRI,											
	echocardiog											
	raphy and											
	Holter											
	monitoring.											
	Scales:											
	MRC											
	(Medical											
	Research											
	Council)											
	Dysphoea											
	Scale, Post-											
	Traumatic Stress											
	Disorder											
	Scale											
	(PTSD),											
	(PTSD), Fatigue											
	Assessment											
	Scale, two-											
	item											
	Generalised											
	Anxiety											
	Disorder											
	(GAD-2),											
	and two-											
	item Patient											
	Health											
	Questionnai											
	re (PHQ-2).											

Author Assessme New onse nt Mode condition		ar c	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
Face-to- face interview and telephone interview Validated questionnai re and authors own questionnai re Detailed interview Physical examination ; Medical history; 6-min walk test; Self-report symptom questionnai re; Modified British Medical Research Council (mMRC) dyspnoea scale; EQ5D5L + VAS; Generalised Anxiety Disorder Ouestionnai	Total (n=119 Scale 3 requiri supple al oxyg (n=29) Scale 4 requiri supple al oxyg (n=800 Scale 5 requiri high-flu nasal cannul non- invasiv mecha ventila or inva mecha ventila or inva mecha ventila (n=91) 6 mor after sympt onset Palpita : 108/2 (9%); 28/286 (10%) 66/776 (9%); 14/89 (16%) Chest	in not Scale 3: not requiring supplement al oxygen (n=295); Scale 4: requiring supplement al oxygen (n=806); (n=806); -6: Scale 5-6: requiring withigh-flow nasal cannula, non-invasive mechanical con ventilation, sive nical cion (n=91) ths of months after symptom onset sleep difficulties: 313/1151 (27%); 206/1188 (17%); 75/286 (26%); 205/776	Total (n=1192); Scale 3: not requiring supplement al oxygen (n=295); Scale 4: requiring supplement al oxygen (n=806); Scale 5-6: requiring high-flow nasal cannula, non- invasive mechanical ventilation, or invasive mechanical ventilation (n=91) 6 months after symptom onset mMRC score: 0: 816/1104 (74%); 216/288 (75%); 551/734 (75%); 49/82 (60%). ≥1:		Total (n=1192); Scale 3: not requiring supplement al oxygen (n=295); Scale 4: requiring supplement al oxygen (n=806); Scale 5-6: requiring high-flow nasal cannula, non- invasive mechanical ventilation, or invasive mechanical ventilation (n=91) 2 years after symptom (GAD-7≥5): 98/1187 (8%); 26/294 (9%); 66/802 (8%); 6 (7%)	Total (n=1192); Scale 3: not requiring supplement al oxygen (n=295); Scale 4: requiring supplement al oxygen (n=806); Scale 5-6: requiring high-flow nasal cannula, non- invasive mechanical ventilation, or invasive mechanical ventilation (n=91) 6 months after symptom onset Smell disorder: 128/1151 (11%); 32/286 (11%); 82/776 (11%); 14/89 (16%)	Total (n=1192); Scale 3: not requiring supplement al oxygen (n=295); Scale 4: requiring supplement al oxygen (n=806); Scale 5-6: requiring high-flow nasal cannula, non- invasive mechanical ventilation, or invasive mechanical ventilation (n=91) 6 months after symptom onset Joint pain: 126/1147 (11%); 40/287 (14%); 70/772 (9%); 16/88 (18%) Myalgia:	Total (n=1192); Scale 3: not requiring supplement al oxygen (n=295); Scale 4: requiring supplement al oxygen (n=806); Scale 5-6: requiring high-flow nasal cannula, non- invasive mechanical ventilation, or invasive mechanical ventilation (n=91) 6 months after symptom onset Decreased appetite: 92/1151 (8%); 25/286 (9%); 56/776 (7%); 11/89 (12%)	Total (n=1192); Scale 3: not requiring supplement al oxygen (n=295); Scale 4: requiring supplement al oxygen (n=806); Scale 5-6: requiring high-flow nasal cannula, non- invasive mechanical ventilation, or invasive mechanical ventilation (n=91) 6 months after symptom onset Hair loss: 252/1151 (22%); 61/286 (21%); 169/776 (22%); 22/89 (25%) Skin rash:

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	Patient			(5%);	33/89	(26%);		Depression	Taste	(3%);	Nausea or	(3%);
	Health			15/287	(37%)	72/288		symptom	disorder:	9/287	vomiting:	11/286
	Questionnai			(5%);	Dizziness:	(25%);		(PHQ-9≥5):	87/1151	(3%);	17/1150	(4%);
	re-9 PHQ-9;			34/772	64/1151	183/734		75/1190	(8%);	19/772	(1%);	21/776
	Post-			(4%); 4/88	(6%);	(25%);		(6%); 25	21/286	(2%); 3/88	8/286	(3%); 4/89
	Traumatic			(5%)	19/286	33/82		(8%);	(7%);	(3%)	(3%);	(4%)
	Stress			. ,	(7%);	(40%)		45/804	58/776	Fatigue or	9/775	. ,
	Disorder			12 months	39/776	. ,		(6%); 5	(7%); 8/89	muscle	(1%); 0/89	12
	Checklist-			after	(5%); 6/89	12 months		(5%)	(9%)	weakness:	(0%)	months
	Civilian			symptom	(7%)	after		PTSD	Sore throat	593/1151		after
	PCL-C;			onset	Headache:	symptom		symptom	or difficult	(52%);	12 months	symptom
	SARS-CoV-2			Palpitations	20/1147	onset		(PCL-C	to swallow:	143/286	after	onset
	vaccination			: 110/1188	(2%);	mMRC		≥38):	45/1151	(50%);	symptom	Hair loss:
	survey			(9%); 19	6/287	score: 0:		27/1189	(4%);	385/776	onset	131/1188
	Healthcare			(6%);	(2%);	834/1187		(2%); 12	18/286	(50%);	Decreased	(11%); 27
	utilisation;			84/802	11/772	(70%);		(4%);	(6%);	65/89	appetite:	(9%);
	Work status			(10%); 7	(1%); 3/88	222/294		14/803	23/776	(73%)	34/1188	97/802
	Ischaemic			(8%)	(3%)	(76%);		(2%); 1	(3%); 4/89		(3%); 6	(12%); 7
	stroke and			Chest pain:		556/802		(1%)	(4%)	12 months	(2%);	(8%)
	cardiovascu			86/1188	12 months	(69%); 56				after	25/802	Skin rash:
	lar event			(7%); 23	after	(62%). ≥1:			12 months	symptom	(3%); 3	50/1188
	registration			(8%);	symptom	353/1187			after	onset	(3%)	(4%); 13
	form;			59/802	onset	(30%);			symptom	Joint pain:	Nausea or	(4%);
	Laboratory			(7%); 4	Sleep	72/294			onset	141/1188	vomiting:	35/802
	tests (FBC,			(4%)	difficulties:	(24%);			Smell	(12%); 33	10/1188	(4%); 2
	creatine,				206/1188	246/802			disorder:	(11%);	(1%); 4	(2%)
	eGFR,			2 years	(17%); 47	(31%); 35			56/1188	93/802	(1%);	
	cystatin C,			after	(16%);	(38%)			(5%); 16	(12%); 15	4/802	2 years
	ALT, AST,			symptom	146/802				(5%);	(16%)	(0%); 2	after
	albumin,			onset	(18%); 13	2 years			34/802	Myalgia:	(2%)	symptom
	total			Palpitations	(14%)	after			(4%); 6	50/1188	-	onset
	protein,			: 145/1190	Dizziness:	symptom			(7%)	(4%); 11	2 years	Hair loss:
	total			(12%);	61/1188	onset			Taste	(4%);	after	142/1190
	bilrubin,			41/294	(5%); 15	mMRC			disorder:	34/802	symptom	(12%);
	direct			(14%);	(5%);	score: 0:			35/1188	(4%); 5	onset	41/294
	bilrubin,			95/805	38/802	1023/1191			(3%); 6	(5%)	Decreased	(14%);
	HbA1C,			(12%); 9	(5%); 8	(86%); 253			(2%);	Fatigue or	appetite:	88/805
	total			(10%)	(9%)	(86%);			29/802	muscle	33/1190	(11%); 13
	cholesterol,			Chest pain:	Headache:	694/805			(4%); 0	weakness:	(3%);	(14%)
	triglyceride,			83/1190	55/1188	(86%); 76			(0%)	240/1188	10/294	Skin rash:
	low density			(7%);	(5%); 15	(84%). ≥1:				(20%); 60	(3%);	34/1190

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	lipoprotein			19/294	(5%);	168/1191			Sore throat	(20%);	21/805	(3%);
	cholesterol, high density			(6%); 54/805	36/802 (4%); 4	(14%); 42 (14%);			or difficult to swallow:	161/802 (20%); 19	(3%); 2 (2%)	6/294
	lipoprotein			(7%); 10	(4%); 4 (4%)	(14%); 111/805			40/1188	(20%); 19	(2%) Nausea or	(2%); 25/805
	cholesterol,			(11%)	(470)	(14%); 15			(3%); 11	(2170)	vomiting:	(3%); 3
	antibody			(11/0)	2 years	(16%)			(4%);	2 years	27/1190	(3%)
	testing,				after	(2070)			26/802	after	(2%);	(0,0)
	cytokine				symptom				(3%); 3	symptom	8/294	
	testing,				onset				(3%)	onset	(3%);	
	routine				Sleep					Joint pain:	18/805	
	urine, PFT,				difficulties:				2 years	117/1190	(2%); 1	
	lung HRCT,				298/1190				after	(10%);	(1%)	
	ultrasonogr aphy;				(25%); 70/294				symptom onset	30/294 (10%);		
	apriy,				(24%);				Smell	79/805		
					203/805				disorder:	(10%); 8		
					(25%); 25				67/1190	(9%)		
					(27%)				(6%);	Myalgia:		
					Dizziness:				21/294	88/1190		
					131/1190				(7%);	(7%);		
					(11%);				42/805	22/294		
					31/294				(5%); 4	(8%);		
					(11%); 90/805				(4%) Taste	59/805 Fatigue or		
					(11%); 10				disorder:	muscle		
					(11%)				35/1190	weakness:		
					Headache:				(3%);	357/1190		
					81/1190				11/294	(30%);		
					(7%);				(4%);	89/294		
					23/294				20/805	(30%);		
					(8%);				(2%); 4	235/805		
					50/805				(4%)	(29%); 33		
					(6%); 8 (9%)				Sore throat or difficult	(36%) (3%); 7		
					(9%)				to swallow:	(3%); 7		
									64/1190	(0,0)		
									(5%);			
									20/294			
									(7%);			
									40/805			

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									(5%); 4 (4%)			
Kildegaard et al. ⁽⁵⁵⁾						See Ap	pendix 7 Age, ⁻	Table 2				
Meza- Torres et al. ⁽⁴⁸⁾						See Appendix	6 General popu	lation, Table 2				
Norgard et al. ⁽⁷⁵⁾	No scales were reported to have been used, only ICD-10 codes.					, , ,	oms reported in			74	76.000	-
Özcan et al. ⁽¹¹⁹⁾	Three and six month follow-up assessment s were administere d by experienced physicians. Patients were asked to describe the presence or absence of symptoms after COVID-19 and whether each symptom persisted.		Three months follow-up (n=406): Fatigue: 154 (38%) Six months follow-up (n=406): Fatigue: 36 (9%)	Three months follow-up (n=406): Chest pain: 158 (39%) Palpitation: 126 (31%) Six months follow-up (n=406): Chest pain: 61 (15%) Palpitation: 41 (10%)	Three months follow-up (n=406): Headache: 47 (11%) Sleep difficulties: 20 (5%) Six months follow-up (n=406): Headache: 12 (3%) Sleep difficulties: 8 (2%)	Three months follow-up (n=406): Cough: 73 (18%) Six months follow-up (n=406): Cough: 12 (3%)		Three months follow-up (n=406): Anxiety: 81 (20%) Six months follow-up (n=406): Anxiety: 12 (3%)	Three months follow-up (n=406): Taste disorder: 12 (3%) Vertigo: 20 (5%) Six months follow-up (n=406): Taste disorder: 0 Vertigo: 4 (1%)	Three months follow-up (n=406): Muscle pain: 65 (16%) Joint pain: 110 (27%) Back pain: 41 (10%) Six months follow-up (n=406): Muscle pain: 12 (3%) Joint pain: 24 (6%) Back pain: 16 (4%)	Three months follow-up (n=406): Dyspepsia: 97 (24%) Diarrhoea: 16 (4%) Six months follow-up (n=406): Dyspepsia: 24 (6%) Diarrhoea: 0	Three months follow-up (n=406): Hair loss: 114 (28%) Pruritus: 12 (3%) Six months follow-up (n=406): Hair loss: 4 (1%) Pruritus: 4 (1%)

Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	mMRC											
	dyspnea											
	scale was											
	administere											
	d at 3 and											
	6 months											
	follow up		_									
	Telephone		6 month	6 month	6 month	6 month			6 month	6 month	6 month	6 month
	questionnai		follow-up	follow-up	follow-up	follow-up			follow-up	follow-up	follow-up	follow-up
	re		Fatigue	Cardiovascu	Neurologica	Respiratory			Sensory	Musculoskel	Gastrointest	Dermatolog
	Tier 1		Adults:	lar		Adults:			Adults:	etal	inal	ical
	ISARIC		252/1013	Adults:	Adults:	223/1013			36/1013	Adults:	Adults:	Adults:
	Long-term		(24.88%); 95% CI:	63/1013	192/1013	(22.01%); 95% CI:			(3.55%);	87/1013	63/1013	132/1013
	Follow-up			(6.22%);	(18.95%);				95% CI:	(8.59%);	(6.22%); 95% CI:	(13.03%);
	Study CRF		22.21% to 27.54%	95% CI: 4.74% to	95% CI: 16.49% to	19.45% to 24.68%			2.47% to 4.74%	95% CI: 6.91% to	95% CI: 4.84% to	95% CI: 11.06% to
	for adult		Children:	4.74% to 7.7%	21.32%	Children:			4.74% Children:	10.37%	4.84% to 7.8%	11.06% to 15.1%
	patients - Version 1			Children:	Children:	7/360			3/360	Children:	7.8% Children:	Children:
	of the		34/360 (9.44%);	4/360	15/360	(1.94%);			(0.83%);	6/360	14/360	17/360
	ISARIC		(9.44%), 95% CI:	(1.11%);	(4.17%);	(1.94%), 95% CI:			(0.83%), 95% CI:	(1.67%);	(3.89%);	(4.72%);
	COVID-19		6.39% to	95% CI:	(4.17%), 95% CI:	0.56% to			0% to	(1.07%), 95% CI:	(3.89%), 95% CI:	(4.72%), 95% CI:
	Health and		12.5%	0.28% to	2.22% to	3.61%			1.94%	0.56% to	1.94% to	2.78% to
	Wellbeing		12.370	2.22%	6.39%	5.0170			1.9470	3.06%	6.11%	6.94%
Pazukhina	Follow Up		12 month	2.22 /0	Sleep	12 month			12 month	5.00 /0	0.11 /0	0.9470
et al. ⁽⁶⁶⁾	Survey for		follow-up		Problems	follow-up			follow-up	12 month	12 month	12 month
ct di.	Children for		Fatigue	12 month	Adults:	Respiratory			Sensory	follow-up	follow-up	follow-up
	paediatric		Adults:	follow-up	106/1013	Adults:			Adults:	Musculoskel	Gastrointest	Dermatolog
	patients		122/1013	Cardiovascu	(10.46%);	96/1013			18/1013	etal	inal	ical
	Both		(12.04%);	lar	95% CI:	(9.48%);			(1.78%);	Adults:	Adults:	Adults:
	developed		95% CI:	Adults:	8.59% to	95% CI:			95% CI:	31/1013	13/1013	36/1013
	by the		10.07% to	12/1013	12.34%	7.7% to			0.99% to	(3.06%);	(1.28%);	(3.55%);
	ISARIC		14.02%	(1.18%);	Children:	11.25%			2.67%	95% CI:	95% CI:	95% CI:
	Global		Children:	95%CI:	15/360	Children:			Children:	2.07% to	0.59% to	2.47% to
	COVID-19		13/360	0.59% to	(4.17%);	4/360			1/360	4.15%	1.97%	4.74%
	follow-up		(3.61%);	1.88%	95% CI:	(1.11%);			(0.28%-);	Children:	Children:	Children:
	working		95% CI:	Children:	2.22% to	95% CI:			95% CI:	3/360	2/360	7/360
	group and		1.94% to	1/360	6.39%	0.28% to			0% 0.83%	(0.83%);	(0.56%);	(1.94%);
	independen		5.56%	(0.28%);		2.22%				95% CI:	95% CI:	95% CI:
	tly forward			95% CI:	12 month					0% to	0% to	0.56% to
	and			0% to	follow-up					1.94%	1.39%	3.61%
	backward			0.83%								

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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	translated				Neurologica							
	into				1							
	Russian.				Adults:							
	These				90/1013							
	follow-up				(8.88%);							
	assessment				95% CI:							
	s evaluated				7.21% to							
	patients'				10.56%							
	physical				Children:							
	and mental				6/360							
	health				(1.67%);							
	status and				95% CI:							
	assessed				0.56% to							
	for any				3.06%							
	newly											
	developed				Sleep							
	symptoms				Problems							
	between				Adults:							
	hospital				36/1013							
	discharge				(3.55%);							
	and the				95% CI:							
	follow-up				2.47% to							
	assessment				4.74%							
	, including				Children:							
	symptom				2/360							
	onset and				(0.56%);							
	duration.				95% CI:							
					0% to							
			_	-	1.39%	-		-	-	-	-	-
	Telephone		Exposed	Exposed	Exposed	Exposed		Exposed	Exposed	Exposed	Exposed	Exposed
	interview		cohort	cohort	cohort	cohort		cohort	cohort	cohort	cohort	cohort
	Patients		(hospitalis	(hospitalis	(hospitalis	(hospitalis		(hospitalis	(hospitalis	(hospitalis	(hospitalis	(hospitali
	were asked		ed due to	ed due to	ed due to	ed due to		ed due to	ed due to	ed due to	ed due to	sed due to
Rivera-	about (1)		COVID-	COVID-	COVID-	COVID-		COVID-	COVID-	COVID-	COVID-	COVID-
Izquierdo et	the		19) (n =	19) (n =	19) (n =	19) (n =		19) (n =	19) (n =	19) (n =	19) (n =	19) (n =
al. ⁽²²⁾	prevalence		453);	453);	453);	453);		453);	453);	453);	453);	453);
un	of		Non-	Non-	Non-	Non-		Non-	Non-	Non-	Non-	Non-
	symptoms		exposed	exposed	exposed	exposed		exposed	exposed	exposed	exposed	exposed
	at 12		cohort	cohort	cohort	cohort		cohort	cohort	cohort	cohort	cohort
	months and		(hospitalis	(hospitalis	(hospitalis	(hospitalis		(hospitalis	(hospitalis	(hospitalis	(hospitalis	(hospitali
	(2)		ed due to	ed due to	ed due to	ed due to		ed due to	ed due to	ed due to	ed due to	sed due to

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	Symptoms	cular Symptoms	c Symptoms	y Symptoms	c Nervous System Symptoms	ical/Psych iatric Symptoms	and Throat Symptoms	eletal Symptoms	stinal Symptoms	ogic Symptom s
incidence new symptom after discharg A standard d list of persister symptom and associate descripti and definition was used	other causes) (n = 453). n (%). P- value General/sys temic symptoms: 68 (15.0); 80 (17.7). 0.281 Fatigue: 37 (8.2); 56 (12.4). 0.038 Haematolog ical symptoms: 7 (1.5); 7 (1.5), 1.000 Thrombotic events: 5 (1.1); 0 (0.0). 0.025 Nephrologic al symptoms: 5 (1.1); 2 (0.4). 0.162 Urological symptoms: 6 (1.3); 16 (3.5). 0.031 Ophthalmol ogical symptoms:	Symptoms other causes) (n = 453). n (%). P- value Chest pain: 5 (1.1); 8 (1.8). 0.578	Symptoms other causes) (n = 453). n (%). P- value Neurologica I symptoms: 44 (9.7); 28 (6.2). 0.049 Headache: 13 (2.9); 12 (2.6). 0.839 Sensitivity disorders: 9 (2.0); 8 (1.8). 0.807 Movement disorders: 5 (1.1); 1 (0.2). 0.062 Confusion, memory loss: 16 (3.5); 8 (1.8). 0.043 Sleep disturbance s: 17 (3.8); 14 (3.1). 0.584	Symptoms other causes) (n = 453). n (%). P- value Respiratory symptoms: 87 (19.2); 72 (15.9). 0.190 Dyspnoea: 70 (15.5); 56 (12.4). 0.179				Symptoms other causes) (n = 453). n (%). P- value Muscle or joint pain: 42 (9.3); 48 (10.6). 0.505 Muscle weakness: 14 (3.1); 8 (1.8). 0.195	Symptoms other causes) (n = 453). n (%). P- value Digestive symptoms: 9 (2.0); 32 (7.1). <0.001 Diarrhoea: 4 (0.9); 16 (3.5). 0.007 Constipatio n: 3 (0.7); 8 (1.8). 0.129 Abdominal pain: 4 (0.9); 16 (3.5). 0.007	
discharg A standard d list of persister symptom and associate descripti and definitior	(%). P- value General/sys temic symptoms: 68 (15.0); 80 (17.7). 0.281 Fatigue: 37 (8.2); 56 (12.4). 0.038 Haematolog ical symptoms: 7 (1.5); 7 (1.5). 1.000 Thrombotic events: 5 (1.1); 0 (0.0). 0.025 Nephrologic al symptoms: 5 (1.1); 2 (0.4). 0.162 Urological symptoms: 6 (1.3); 16 (3.5). 0.031 Ophthalmol	value Chest pain: 5 (1.1); 8	(%). P- value Neurologica I symptoms: 44 (9.7); 28 (6.2). 0.049 Headache: 13 (2.9); 12 (2.6). 0.839 Sensitivity disorders: 9 (2.0); 8 (1.8). 0.807 Movement disorders: 5 (1.1); 1 (0.2). 0.062 Confusion, memory loss: 16 (3.5); 8 (1.8). 0.043 Sleep disturbance s: 17 (3.8); 14 (3.1).	(%). P- value Respiratory symptoms: 87 (19.2); 72 (15.9). 0.190 Dyspnoea: 70 (15.5); 56 (12.4).		value Mental health symptoms: 48 (10.6); 46 (10.2). 0.828 Depressive symptoms: 22 (4.9); 20 (4.4). 0.752 Anxiety symptoms: 33 (7.3); 19	value Pharyngeal symptoms: 16 (3.5); 2 (0.4). <0.001	value Muscle or joint pain: 42 (9.3); 48 (10.6). 0.505 Muscle weakness: 14 (3.1); 8		value Digestive symptoms: 9 (2.0); 32 (7.1). <0.001 Diarrhoea: 4 (0.9); 16 (3.5). 0.007 Constipatio n: 3 (0.7); 8 (1.8). 0.129 Abdominal pain: 4 (0.9); 16

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			Infection: 7 (1.5); 6 (1.3). 0.898									
Sorenson et al. ⁽⁵⁶⁾			Symptoms 6-12 months after test Fatigue/exh austion: 397 (16.4%) Chills: 57 (2.4%) Fever: 68 (2.8%) Red runny eyes: 58 (2.4%)	Symptoms 6-12 months after test Chest pain: 121 (5.0%)	Symptoms 6-12 months after test Sleeping legs/arms: 203 (8.4%) Headache: 180 (7.4%) Dizziness: 158 (6.5%)	Symptoms 6-12 months after test Dyspnea: 274 (11.3%) Cough: 151 (6.2%)	Symptoms 6-12 months after test Hot flushes/swe at: 108 (4.5%)		Symptoms 6-12 months after test Sore throat: 95 (3.9%) Runny nose: 92 (3.8%) Dysgeusia: 184 (7.6%) Dysosmia: 188 (7.8%)	Symptoms 6-12 months after test Reduced strength legs/arms: 302 (12.5%) Muscle/joint pain: 201 (8.3%)	Symptoms 6-12 months after test Nausea: 69 (2.9%) Abdominal pain: 71 (2.9%) Reduced appetite: 90 (3.7%) Diarrhoea: 57 (2.4%)	Symptom s 6-12 months after test
Spinicci et al. ⁽³²⁾	Standardise d questionnai re (unnamed) which focused on persistence of symptoms potentially related to recent SARS-CoV-2 infection, administere d in person during a follow up visit to a long Covid clinic.		Chronic fatigue: 36% Fever: 3%	Palpitations : 9%	Insomnia: 16% Visual disorders: 13% Brain fog: 13% Tremors/pa renthesia: 5% Headache: 2%	Shortness of breath: 37% Cough: 11%		Anxiety/dep ression: 9%	Anosmia: 8% Dysgeusia: 8% Impaired hearing: 4% Vertigo: 3%	Myalgia: 7%	Gastrointest inal: 7%	Hair loss: 10% Dermatolog ical: 6%

	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
Yoo et al. ⁽⁷⁴⁾	Telephone interview with trained clinical staff. Questionnai re developed by research team. Information obtained at 30 days, 60 days, and 90 days after acute illness or hospitalisati on. A monitoring questionnai re assessed whether the patient felt that his or her health was back to normal. The survey queried pasking about maximal exertion evel prior to COVID-		30 day follow-up: Fatigue: 169 (73.2%) Fever and chills: 119 (51.5%) At least 60 days follow-up: Fatigue: 31.4% Persistent fever: 1.9%			30 day follow-up: Shortness of breath: 147 (63.6%) At least 60 days follow-up: Shortness of breath: 13.9% Hospitalised patients. Shortness of breath: 15.4%			At least 60 days follow-up: Loss of taste or smell: 9.8% Outpatients . Loss of taste or smell: 15.9%	30 day follow-up: Muscle aches: 117 (50.6%)		At least 60 days follow-up: Rash: <1%

infection: vigorous activities such as running, lifting heavy objects, and participatin 9 9 9 10 10 10 10 10 10 10 10 10 10	Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
vigorous activities such as running, lifting heavy objects, and participatin 9 9 9 9 10 10 storeucus sports; moderate activites, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf, climbing one flight of stalis; walking one block; lifting or carrying grocenes; bathing or stalis; moving a table, pushing a climbing one flight of stalis; walking one block; lifting or carrying grocenes; bathing or carsing walking one block; lifting or carsing yourseft.		19											
vigorous activities such as running, lifting heavy objects, and participatin 9 9 9 9 10 10 storeucus sports; moderate activites, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf, climbing one flight of stalis; walking one block; lifting or carrying grocenes; bathing or stalis; moving a table, pushing a climbing one flight of stalis; walking one block; lifting or carrying grocenes; bathing or carsing walking one block; lifting or carsing yourseft.		infection:											
activities such as numing, lifting heavy objects, and participatin g n strenuous sports; moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or plaving golf; climbing one flight of stars; walking one block; lifting or carrying groceries; bating or cleaner, bowling, or plaving one flight of stars; valking one block; lifting or carrying groceries; bating or cleaner, bowling, or plaving stars; valking one block; lifting or carrying groceries; bating or cleaner, bowset.													
such as running, lifting heavy objects, and participatin g is renuous sports; moderate activites, such as moving a table, pushing a vacuum deaner, bowling, or playing gof; climbing one fight of staris; walking one block; lifting or carrying groceties; bating or dessing vacues lifting or carrying groceties; bating or dessing vacues lifting or carrying groceties; bating or dessing vacues lifting or dessing vacues lifting vacues lifting or dessing vacues lifting													
running. lifting heavy objects; and participatin g in stremuous sports; moderate activities; such as moving a table, pushing a vacuum cleaner, bowling, or playing goff; climbing one flight of statis; waking one block; lifting or carrying groceries; bathing or block; lifting or carrying groceries; bathing or dressing yourself.													
lifting heavy objects, and participatin g fin strenuous sports; moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing ofi; climbing one flight of stairs; walking one block; lifting or carrying grocentes; batking on blocking or blocking or block; lifting or carrying grocentes; batking one block; lifting or carrying yourself.													
heavy objects, and participatin g in strenuous sports; moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing goff; climbing one flight of stairs; walking one block; lifting or carrying groceries; bathing or dressing yoursef.		liftina											
objects, and and participatin g in in strenuous sports; moderate activities, activities, atuities, activities, atuities, activities, atuities, activities, activities, activities, ysacum cacuum cleaner, bowling, or plaving golf; climbing one flight of stairs; walking one block; lifting or carrying groceries; bathing or activities, vourself. activities, yourself. actise,													
and participatin g in strenuous sports; moderate activities, such as moving a table, pushing a vacuum vacuum cleaner, bowling, or playing golf; climbing one flight of stairs; walking one block; lifting or carrying groceites; bathing or dressing yoursef.													
participatin g in strenuous sports; moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf; climbing one flight of stairs; walking one block; lifting or carrying groceries; bathing or dressing yourself.		and											
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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	past 4											
	weeks was											
	assessed											
	using this											
	item during											
	each											
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	Perceived											
	cognitive											
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	were											
	evaluated											
	with three											
	questions											
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	whether											
	patients in											
	the last 4											
	weeks had											
	trouble											
	getting											
	things											
	organised,											
	had trouble											
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	ng on											
	things, or											
	forgetting											
	what											
	the patient											
	talked											
	about after											
	a telephone											
	conversatio											
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Author	Assessme nt Mode	New onset conditions	General Symptoms	Cardiovas cular Symptoms	Neurologi c Symptoms	Respirator y Symptoms	Autonomi c Nervous System Symptoms	Psycholog ical/Psych iatric Symptoms	Ear, Nose and Throat Symptoms	Musculosk eletal Symptoms	Gastrointe stinal Symptoms	Dermatol ogic Symptom s
	Lastly, patients were asked about the following symptoms over the past 4 weeks: fever, chills or night sweats; loss of smell or taste; fatigue; shortness of breath; chest pain; numbness or tingling; nausea, vomiting, or diarrhoea; muscle.											

Table 3. Quality of Life (QoL) and physical movement and or functioning outcome in those with a history of severeCOVID-19 illness.

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
Asadi-Pooya et al. ⁽¹¹⁸⁾ Population: COVID-19 hospitalised patients (post discharge) n = 4,681 Assessment mode: Questionnaire	How would you rate the following items over the past week compared with that before your COVID-19? All participants rated the following items: Ability to do routine and normal tasks (n %) - Much worse: 205 (4.4%) - Somewhat worse: 758 (16.3%) - The same as before: 305 (77.9%) - Somewhat better: 75 (1.2%) - Much worse: 107 (2.5%) - Much worse: 117 (2.5%) - Much worse: 117 (2.5%) - Much worse: 128 (62.3%) - The same as before: 3669 (83.3%) - Somewhat worse: 634 (13.6%) - Much worse: 90 (1.9%) - Much worse: 90 (1.9%) - Much worse: 90 (1.9%) - Much worse: 90 (1.9%) - Much worse: 108 (3.5%) - Somewhat worse: 168 (3.5%) - Somewhat worse: 168 (3.5%) - Somewhat worse: 168 (3.5%) - Somewhat worse: 158 (1.2%) - Much worse: 158 (1.2%) - Somewhat worse: 168 (3.5%) - Somewhat worse: 175 (1.2%) - Much worse: 175 (1.3%) - Somewhat worse: 175 (1.6%) - Much worse: 175 (1.6%) -

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	In LC participants (n %) (compared to non LC participants): - Ability to do routine and normal tasks: 904 (31%), P:0.0001 - Ability to concentrate and think: 701 (24%), P:0.0001
	- Abilitý to study: 477 (16%), P:0.0001 - Overall QOL: 765 (26%), P:0.0001 - Hope for the future: 611 (21%), P:0.0001
	Europol results (n = 929/1164) (The influence of long COVID on patients' quality of life) - 826/929 (88.9%) reported some degree of alteration - 98/929 (8.4%) with inabilities or extreme values in at least one domain of the EQ-5D-5L. - 207/924 (22.4%) presented severe or extreme anxiety
	- 135/924 (17.6%) severe or extreme pain - The median EuroQoL Global Score was 70 (IQR 50 – 80)
	Descriptive EuroQol results separated by sex and disease severity at the acute phase (n %) Mild (n %)
Barreto et al. ⁽³⁷⁾	- EuroQoL Global Score (mean ± SD) : 65.0 (±18.7) - Anxiety (n=74) No anxiety/depression: 27 (36.5)
Population: LC cases at a public health outpatient clinic	Slight anxiety/depression: 20 (27) Moderate anxiety/depression: 17 (23.0) Severe anxiety/depression: 9 (12.2)
n = 1,164	Extreme anxiety/depression: 1 (1.4) - Mobility (n=75)
Population further split into outpatient, hospitalised non ICU and hospitalised ICU	No problems with walking around: 63 (84.0) Slight problems with walking around: 10 (13.3) Moderate problems with walking around: 1 (1.3)
Follow-up time: Median of 2.3 months	Severe problems with walking around: 1 (1.3) Unable to walk around: 0 (0.0) - Pain/Discomfort (n=74)
	No pain/discomfort: 31 (41.9) Slight pain/discomfort: 21 (28.4)
	Moderate pain/discomfort: 16 (21.6) Severe pain/discomfort: 6 (8.1) Extreme pain/discomfort: (0.0)
	- Self Care (n=75) No problems with washing or dressing: 70 (93.3)
	Slight problems with washing or dressing: 2 (2.7) Moderate problems with washing or dressing: 2 (2.7)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	Severe problems with washing or dressing: 1 (1.3) Unable to wash or dress: 0 (0.0) - Usual Activities (n=75) No problems with usual activities: 42 (56.0) Slight problems with usual activities: 13 (17.3) Moderate problems with usual activities: 15 (20.0) Severe problems with usual activities: 5 (6.7) Unable to do usual activities: 0 (0.0)
	Female (N=224) (n %) EuroQoL Global Score (mean ± SD): 62.0 (±18.1) Anxiety (n=223) No anxiety/depression: 43 (19.3) Slight anxiety/depression: 49 (22) Moderate anxiety/depression: 73 (32.7) Severe anxiety/depression: 16 (7.2) Mobility (n=224) No problems with walking around: 161 (71.9) Slight problems with walking around: 29 (12.9) Moderate problems with walking around: 26 (11.6)
	Severe problems with walking around: 5 (2.2) Unable to walk around: 3 (1.3) - Pain/Discomfort (n=224) No pain/discomfort: 43 (19.2) Slight pain/discomfort: 52 (23.2) Moderate pain/discomfort: 91 (40.6) Severe pain/discomfort: 32 (14.3) Extreme pain/discomfort: 6 (2.7) - Self Care (n=224) No problems with washing or dressing: 182 (81.3)
	Slight problems with washing or dressing: 20 (8.9) Moderate problems with washing or dressing: 14 (6.3) Severe problems with washing or dressing: 5 (2.2) Unable to wash or dress: 3 (1.3) - Usual Activities (n=223) No problems with usual activities: 96 (43.0) Slight problems with usual activities: 49 (22.0) Moderate problems with usual activities: 59 (26.5) Severe problems with usual activities: 10 (4.5)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	Unable to do usual activities: $9 (4.0)$ Moderate (n %) Male (n=123) - Arxiety (n=123) No anxiety/depression: 53 (43.1) Slight anxiety/depression: 23 (43.1) Slight anxiety/depression: 26 (22.8) Severe anxiety/depression: 16 (13.0) Extreme anxiety/depression: 3 (2.4) - Mobility (n=123) No problems with walking around: 95 (77.2) Slight problems with walking around: 9 (7.3) Moderate problems with walking around: 5 (4.1) Unable to walk around: 3 (2.4) - Pain/Discomfort (n=123) No pain/discomfort: 59 (48.0) Slight pain/discomfort: 59 (48.0) Slight pain/discomfort: 79 (48.0) Slight pain/discomfort: 74 (19.5) Severe pain/discomfort: 74 (19.5) Severe pain/discomfort: 75 (7.7) Extreme pain/discomfort: 75 (7.7) Slight pain/discomfort: 75 (7.7) Severe pain/discomfort: 75 (7.7) Slight pain/discomfort: 74 (19.5) Severe pain/discomfort: 74 (19.5) Severe pain/discomfort: 75 (7.7) Bit care (n = 122) No problems with washing or dressing: 107 (87.7) Slight problems with washing or dressing: 4 (3.3) Severe problems with washing or dressing: 4 (3.3) Severe problems with washing or dressing: 4 (1.3) Severe problems with washing or dressing: 4 (1.4) Moderate problems with washing or dressing: 1 (1.7.7) Slight problems with washing or dressing: 1 (1.7.7) Slight problems with washing or dressing: 3 (1.5) Unable to do usual activities: 18 (14.6) Severe problems with usual activities: 18 (1.4.6) Severe problems with usual activities: 16 (1.4.6) Se
	- Anxiety (n=138) No anxiety/depression: 39 (28.3)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	Slight anxiety/depression: 32 (23.2) Moderate anxiety/depression: 38 (27.5) Severe anxiety/depression: 8 (5.8) - Mobility (n=139) No problems with walking around: 84 (60.4) Slight problems with walking around: 24 (17.3) Moderate problems with walking around: 20 (14.4) Severe problems with walking around: 11 (7.9) Unable to walk around: 0 (0.0) - Pain/Discomfort: 35 (25.2) Slight pain/discomfort: 32 (23) Moderate pain/discomfort: 33 (2.2) - Seef Care (n=139) No poblems with washing or dressing: 107 (77.0) Slight problems with washing or dressing: 11 (7.9) Unable to walk or dress: 2 (1.4) - Usual Activities (n=138) No porblems with washing or dressing: 11 (7.9) Severe problems with washing or dressing: 11 (7.9) Severe problems with washing or dressing: 13 (9.4) Moderate pain/discomfort: 32 (1.4) - Usual Activities (n=138) No problems with washing or dressing: 11 (7.9) Severe problems with washing or dressing: 12 (7.5) Slight problems with washing or dressing: 13 (9.4) Moderate problems with washing or dressing: 13 (9.4) Moderate problems with washing or dressing: 11 (7.9) Severe problems with washing or dressing: 12 (7.9) Severe problems with washing or dressing: 13 (9.4) Moderate problems with washing or dressing: 13 (9.4) Moderate problems with washing or dressing: 11 (7.9) Severe problems with washing or dressing: 12 (7.9) Severe problems with washing or dressing: 6 (4.3) Unable to wash or dress: 2 (1.4) - Usual Activities: (1.3) No problems with usual activities: 38 (27.5) Moderate problems with usual activities: 38 (27.5) Severe problems with usual activities: 14 (10.1) Unable to do usual activities: 10.7)
	Severe (n %) Male (N=202) - EuroQoL Global Score (mean ± SD) : 68.9 (±19.5) - Anxiety N=200 No anxiety/depression: 67 (33.5) Slight anxiety/depression: 46 (23.0) Moderate anxiety/depression: 50 (25.0) Severe anxiety/depression: 28 (14.0) Extreme anxiety/depression: 9 (4.5) - Mobility N=202 No problems with walking around: 125 (61.9)

Author, population, sample size (n) and assessment mode		Quality of life outcome(s)
	Slight problems with walking around: 33 (16.3) Moderate problems with walking around: 25 (12.4) Severe problems with walking around: 11 (5.4) Unable to walk around: 8 (4.0) - Pain/Discomfort N=198 No pain/discomfort: 89 (44.9) Slight pain/discomfort: 48 (24.2) Moderate pain/discomfort: 32 (16.2) Severe pain/discomfort: 22 (11.1) Extreme pain/discomfort: 7 (3.5) - Self Care N=202 No problems with washing or dressing: 160 (79.2) Slight problems with washing or dressing: 13 (6.4) Moderate problems with washing or dressing: 14 (6.9) Severe problems with washing or dressing: 8 (4.0) Unable to wash or dress: 7 (3.5) - Usual Activities N=201 No problems with usual activities: 39 (49.3) Slight problems with usual activities: 39 (19.4) Severe problems with usual activities: 12 (6.0) Unable to do usual activities: 14 (7.0)	
	 Female (N=166) (n %) EuroQoL Global Score (mean ± SD) : 68.2 (±18.9) Anxiety N=166 No anxiety/depression: 33 (19.9) Slight anxiety/depression: 43 (25.9) Moderate anxiety/depression: 36 (21.7) Severe anxiety/depression: 37 (22.3) Extreme anxiety/depression: 17 (10.2) Mobility N=166 No problems with walking around: 90 (54.2) Slight problems with walking around: 31 (18.7) Moderate problems with walking around: 32 (19.3) Severe problems with walking around: 10 (6) Unable to walk around: 3 (1.8) Pain/Discomfort N=166 No pain/discomfort: 49 (29.5) Slight pain/discomfort: 42 (25.3) 	

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	Moderate pain/discomfort: 49 (29.5) Severe pain/discomfort: 23 (13.9) Extreme pain/discomfort: 3 (1.8) - Self Care N=166 No problems with washing or dressing: 120 (72.3) Slight problems with washing or dressing: 19 (11.4) Moderate problems with washing or dressing: 19 (11.4) Severe problems with washing or dressing: 5 (3.0) Unable to wash or dress: 3 (1.8) - Usual Activities N=166 No problems with usual activities: 61 (36.7) Slight problems with usual activities: 41 (24.7) Moderate problems with usual activities: 33 (19.9) Severe problems with usual activities: 18 (10.8) Usual Activities 12 (7.0)
	Unable to do usual activities:13 (7.8) 70.86% (567 of 800) reported limited daily activities, which were severe in 5.62% (45 of 800). Stratified to three subgroups classified according to the WHO definitions of illness severity for COVID-19: All participants (n=801) No oxygen support (n=82) Oxygen support (n=386) Intubation (n=333) EQ-5D-5L (daily routine):; slight; moderate; severe; and extreme problems (Level 5) 1 (daily routine): 499 (62.38%); 57 (70.37%); 252 (65.28%); 190 (57.06%)
Battistella et al. ⁽³⁸⁾ Population: COVID-19 hospitalised patients (post discharge)	2 (slight): 127 (15.88%) 8 (9.88%, n=81) 50 (12.95%, n=386) 69 (20.72%, n=333) 3 (moderate): 104 (13.00%, n=800) 10 (12.35%, n=81) 49 (12.69%, n=386) 45 (13.51%, n=333) 4 (severe): 44 (5.50%, n=800) 4 (4.94%, n=81) 22 (5.70%, n=386) 18 (5.41%, n=333) 5 (extreme problems): 26 (3.25%, n=800) 2 (2.47%, n=81) 13 (3.37%, n=386) 11 (3.30%, n=333)
n = 801 Assessment mode: EQ-5D-5L, functional independence measure	Functional Independence Measure (FIM) Possible scores range from 18 to 126, with higher scores indicating more independence All participants (n=801) No oxygen support (n=82) Oxygen support (n=386) Intubation (n=333) 18 2 (0.27%, n=735) 1 (1.32%, n=76) 0 (0.00%, n=359) 1 (0.33%, n=300) 18 2 (0.27%, n=735) 2 (0.00%, n=76) 0 (0.00%, n=359) 1 (0.33%, n=300)
Average Follow-up time: 6.56 months	19–60 11 (1.50%, n=735) 0 (0.00%, n=76) 7 (1.95%, n=359) 4 (1.33%, n=300) 61–103 86 (11.70%, n=735) 9 (11.84%, n=76) 30 (8.36%, n=359) 47 (15.67%, n=300) 104–126 636 (86.53%, n=735) 66 (86.84%, n=76) 322 (89.69%, n=359) 248 (82.67%, n=300)
	Follow up physical activity levels: All participants (n=801) No oxygen support (n=82) Oxygen support (n=386) Intubation (n=333) EQ-5D-5L (mobility): - Level 1 (no problems): 448 (56.00%, n=800) 56 (69.14%, n=81) 221 (57.25%, n=386) 171 (51.35%, n=333) - Level 2 (slight): 150 (18.75%, n=800) 10 (12.35%, n=81) 67 (17.36%, n=386) 73 (21.92%, n=333)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	 Level 3 (moderate): 126 (15.75%, n=800) 11 (13.58%, n=81) 60 (15.54%, n=386) 55 (16.52%, n=333) Level 4 (severe): 62 (7.75%, n=800) 3 (3.70%, n=81) 31 (8.03%, n=386) 28 (8.41%, n=333) Level 5 (extreme problems): 14 (1.75%, n=800) 1 (1.23%, n=81) 7 (1.81%, n=386) 6 (1.80%, n=333)
Damiano et al. ⁽³⁹⁾	
Population: COVID-19 hospitalised patients (post discharge)	6 to 11 months after hospitalisation: - 38.3% of participants declared being sedentary.
n=701	- 3.9% of participants perceived themselves as 'very active'.
Assessment mode: Interviews (in person)	
	 Pre-COVID-19 physical activity levels(response to EuroQol group association five domain three level questionnaire and visual analogue scale) Health today, (N=427) Worse than before COVID-19: Overall: 179 (42.0), No long COVID: 0, Long COVID: 179 (50.1) Same as before COVID-19: Overall: 194 (45.5), No long COVID: 56 (80.0) Long COVID: 138 (38.7) Better than before COVID-19: Overall: 54 (12.4), No long COVID: 14 (20.0), Long COVID: 40 (11.2)
De Oliveira et al. ⁽⁴⁰⁾ Population: COVID-19 hospitalised patients (post discharge) n = 439	EuroQol-5D-31 - Mobility (n = 434): I have no mobility issues: Overall: 308 (70.9), No long COVID: 64 (91.4), Long COVID: 244 (67.0) I have some problems walking: Overall: 124 (28.6), No long COVID: 6 (8.6), Long COVID: 118 (32.4) I am limited to staying in bed: Overall: 2 (0.5), No long COVID: 0 (0), Long COVID: 2 (0.5) - Self-care (n = 437):
Assessment mode: EQ-5D-3L and EQ- VAS	I have no problems with my personal care: Overall: 408 (93.4), No long COVID: 68 (97.1), Long COVID: 340 (92.6) I have some problems washing or dressing: Overall: 27 (6.2), No long COVID: 2 (2.9), Long COVID: 25 (6.8) I am unable to wash or dress myself: Overall: 2 (0.5), No long COVID: 0 (0), Long COVID: 2 (0.5)
Follow-up period: 130 days after four weeks of symptom onset	 Usual activities (n = 438): I have no problems performing my usual activities: Overall: 294 (67.1), No long COVID: 69 (98.6), Long COVID: 225 (61.1) I have some problems performing my usual activities: Overall: 141 (32.2), No long COVID: 1 (1.4), Long COVID: 140 (38.0) I am unable to perform my usual activities: Overall: 3 (0.7), No long COVID: 0 (0), Long COVID: 3 (0.8)
	 Pain/discomfort (n = 432): I have no pain or discomfort: Overall: 231 (53.5), No long COVID: 67 (95.7), Long COVID: 164 (45.3) I have moderate pain or discomfort: Overall: 196 (45.4), No long COVID: 3 (4.3), Long COVID: 193 (53.3) I have extreme pain or discomfort: Overall: 5 (1.2), No long COVID: 0 (0), Long COVID: 5 (1.4)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	Quality of life outcome(s) • Depression and anxiety (n = 428): I am not anxious or depressed: Overall: 215 (50.2), No long COVID: 53 (79.1), Long COVID: 162 (44.9) I am moderately anxious or depressed: Overall: 32 (7.5), No long COVID: 14 (20.9), Long COVID: 167 (46.2) I am extremely anxious or depressed: Overall: 32 (7.5), No long COVID: 100 (90-100), Long COVID: 32 (8.9) • EQ-VAS (0-100), median (IQR): Overall: 80 (70-100), No Long COVID: 100 (90-100), Long COVID: 80 (70-90) Pre-COVID Physical activity level: Recovery Status (paired data (N = 590)) Participant perceived recovery status 5 month answer, 1 year answer (N %) • No, No: 232 (39.3%) • Yes, Yes: 107 (18.1%) • Not sure: 64 (10.8%) • No, Not sure: 64 (10.8%) • No, Not sure: 64 (10.8%) • No, Net sure: 77 (8.0%) • Not sure, Net 33 (5.3%) • Yes, Not Sure: 71 (2.9%) • Yes, Not Sure: 72 (4.6%) 5-month follow up HRQoL and disability • EQSDL utility index (median IQR), Total N 1683: Recovered 0.88 (0.75 -1.00) Not sure 0.77 (0.65 -0.88) Not recovered 0.69 (0.52 -0.80) • EQSD-SL VAS (median IQR), Total N 1678: Recovered 0.80 (0.75 -1.00) Not sure 0.77 (0.65 -0.88) Not recovered 0.69 (0.52 -0.80) • EQSD-SL VAS (median IQR), Total N 1678: Recovered 0.80 (0.72 -91.2) Not sure 0.70 (0.60 - 85.0) Not recovered 0.69 (0.52 -0.80) • EQSD-SL VAS (median IQR), Total N 1678: Recovered 0.80 (0.77 -1.00) Not sure 0.75 (0.66 -0.88) Not recovered 0.69 (0.52 -0.80) • WG-S5-SCo (median IQR), Total N 1676: Recovered 0.88 (0.77 -1.00) Not sure 0.75 (0.66 -0.88) Not recovered 0.66 (0.43 -0.77) • EQSDL utility index (median IQR), Total N 1676: Recovered 0.88 (0.77 -1.00) Not sure 7.5 (0.66 -0.88) Not recovered 0.66 (0.43 -0.77) • EQSDL utility index (median IQR), Total N 766: Recovered 0.85 (0.70 - 0.00) Not sure 7.5 (0.66 -0.88) Not recovered 0.66 (0.43 -0.77) • EQSDL utility index (median IQR), Total N 766: Recovered 0.85 (0.
	Follow up physical activity level: 5-month follow up Physical performance - SPPB total score (0-12) (mean SD), Total N 1815 (92.4): Recovered 10.3 (2.2) Not sure 10.1 (2.2) Not recovered 9.4 (2.5) - SPPB (mobility disability \leq 10 Total N 1815 (92.4): Recovered 181 (38.9) Not sure 166 (46.0) Not recovered 582 (58.8) - ISWT, m (mean SD), Total N 1465 (74.6): Recovered 487.6 (274.7) Not sure 431.4 (242.3) Not recovered 384.6 (249.4) - ISWT % predicted (mean SD), Total N 968 (49.3): Recovered 63.5 (30.7) Not sure 57.8 (28.1) Not recovered 52.5 (28.7)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	1-year follow up Physical performance - SPPB total score (0-12) Total N 746 (92.8): Recovered 10.5 (1.9) Not sure 10.0 (2.4) Not recovered 9.5 (2.4) - SPPB (mobility disability ≤10 Total N 746 (92.8): Recovered 81 (36.8) Not sure 75 (45.5) Not recovered 205 (56.8) - ISWT, m Total N 549 (68.3): Recovered 528.3 (271.0) Not sure 458.2 (250.2) Not recovered 408.6 (249.2) - ISWT % predicted Total N 452 (56.2): Recovered 67.5 (27.3) Not sure 60.9 (28.2) Not recovered 55.5 (28.9) - At least one functional limitation with daily living activities: 508 (55%) - Limitations with previous occupational activities: 258 (22.5%) - Limitations with social/leisure activities: 369 (32%) - Limitations with instrumental activities: 309 (27%)
	- Limitations with basic activities of daily living: 217 (19%)
	Limitation in occupational activities (n = 258/1,142) (n %) - No (n = 884) Women: 397 (73.5) Men: 487 (81.5)
Fernández-de-las-Peñas et al. ⁽²⁶⁾	- Mild $(n = 134)$ Women: 68 (12.5) Men: 66 (11)
	- Moderate (n = 68) Women: 42 (8) Men: 26 (4)
Population: COVID-19 hospitalised patients (post discharge)	- Severe (n = 56) Women: 34 (6) Men: 22 (3.5)
	Limitation in leisure/social activities (n = $369/1,142$) (n %)
n = 1,142	- No (n = 773) Women: 331 (61.5) Men: 442 (74) - Mild (n = 223) Women: 117 (21.5) Men: 106 (17.5)
Assessment mode: Telephone	- Moderate (n = 106) Women: 66 (12) Men: 40 (6.5)
interview	- Severe (n = 40) Women: 27 (5) Men: 13 (2)
Mean follow up 7 months after	Limitation in basic activities of daily life ($n = 217/1,142$) (n %)
hospital discharge	- No (n = 925) Women: 424 (78.5) Men: 501 (83.5)
	- Mild (n = 132) Women: 64 (12) Men: 68 (11)
	- Moderate (n = 52) Women: 33 (6) Men: 19 (3) - Severe (n = 33) Women: 20 (3.5) Men: 13 (2.5)
	Limitation in instrumental activities of daily life ($n = 309/1,142$) (n %)
	- No (n = 833) Women: 356 (66) Men: 477 (79.5)
	- Mild (n = 181) Women: 101 (18.5) Men: 80 (13) - Moderate (n = 90) Women: 61 (11.5) Men: 29 (5)
	- Severe (n = 38) Women: 23 (4) Men: 15 (2.5)
Fernández-de-las-Peñas et al. ⁽²⁴⁾	Follow up physical activity levels: (Mean follow up 8.4 months after hospital discharge) - Dyspnea at rest: Total: 459 (23.3%); Female: 257 (28.1%); Male: 202 (19.15%)
Population: COVID-19 hospitalised	- Dyspnea at exertion: Total: 1054 (53.5%); Female: 548 (59.9%); Male: 506 (48.0%)
patients (post discharge)	

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
n = 1,969	
Assessment mode: Telephone interview	
Ferreira et al. ⁽⁴¹⁾ Population: COVID-19 hospitalised patients (post discharge)	
n = 749 Assessment mode: Questionnaire (in- person), physical examination, selected diagnostic tests, and blood samples Follow-up median (days) - 200	 Post COVID functionality, points (0-4), (abnormal if ≥2): All (n=749): 1 (0 - 2); Percent abnormal: 32% Quality of Life, VAS (0-100) (Median IQR): 80 (60-90)
	Modified Rankin Scale, (poor = 4–6) 6 Months: N = 381 Mean (SD): 3 (2), N (%) abnormal or poor, 189/381 (50%)
Frontera et al. ⁽¹¹⁷⁾	12 Months: N = 236, Mean (SD): 2 (2), N (%) abnormal or poor, 79/236 (34%)
Population: COVID-19 hospitalised	Barthel index, (abnormal <100) 6 Months: N = 304, Mean (SD): 85.7 (25), N (%) abnormal or poor: 134/304 (44%)
patients (post discharge) 6 month follow-up n=382	12 months: N=236, Mean (SD): 87.2 (24), N (%) abnormal or poor: 86/236 (36%) T-MoCA, (abnormal ≤18)
12 month follow up n=242	6 months: N=215, Mean (SD): 17.0 (3.5), N (%) abnormal or poor: 106/215 (49%)
6 and 12 month follow up n=174	12 months: N=170, Mean (SD) 17.5 (3.8), N (%) abnormal or poor: $69/170$ (41%) NeuroQoL anxiety, (abnormal T-score ≥ 60)
Assessment mode: Telephone	6 months: N=280, Mean (SD): 48.4 (9), N (%) abnormal or poor: 21/280 (8%)
interview, rankin scale, Barthel index, t-MoCA, NeuroQOL	12 months: N=225, Mean (SD) 46.8 (9), N (%) abnormal or poor: $16/225$ (7%) NeuroQoL depression, (abnormal T-score \geq 60)
	6 months: N=279, Mean (SD): 44.6 (8), N (%) abnormal or poor: 8/279 (3%) 12 months: N=225, Mean (SD) 44.3 (8), N (%) abnormal or poor: 9/225 (4%)
Heightman et al. ⁽⁴⁷⁾	Functional status, % best health, median (IQR), (n = 1,325)
Those with previous COVID-19	Full sample (n=1325) - Functional status: median 70 (55-85)
infection assessed at a post-COVID	
clinic	Hospitalised (n=547) - Functional status: median 80 (65-95)
Population is further split into non-	
hospitalised, hospitalised and post emergency department (ED)	Non-hospitalised (n=566) - Functional status: median 60 (50-75)
emergency department (ED)	

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
Total sample: n = 1,325; non- hospitalised: n = 566; hospitalised: n = 547; post ED: n = 212 Follow up for Hospitalised patients	Emergency Dept (n=212) - Functional status: median 75 (60-90) Return to work calculated from S-table data Full sample: n=1325
median days: 69 (51-111) Assessment mode: Health related QOL (EQVAS)	Employed: 1028/1325 (77.6%) Unable to return to employment: 303/1028 (29.5%) Hospitalised: n=547
	Employed: 344/547 (62.9%) Unable to return to employment: 118/344 (34.3%) Non-hospitalised: n=566
	Employed: 506/566 (89.4%) Unable to return to employment: 141/506 (27.9%) Emergency Dept: n=212
	Employed: 178/212 (84%) Unable to return to employment: 44/178 (24.7%) Full sample (n=1192) EQ-5D-5L questionnaire at 6, 12 and 24 month follow up
Huang et al. ⁽⁵²⁾	- Mobility - problems with walking around: 68/1109 (6%); 106/1187 (9%); 42/1191 (4%) -Personal care - problems with washing or dishing: 8/1109 (1%); 17/1187 (1%); 14/1191 (1%)
Population: Cohort group: COVID-19 hospitalised patients (post discharge) Cohort group: n = 1,192 patients completed all three 6-, 12- and 24- month follow-ups	-Usual activity - problems with usual activity: 16/1100 (1%); 14/1187 (1%); 35/1191 (3%) -Pain or discomfort: 300/1104 (27%); 348 (1187) (29%); 284/1191 (24%) -Anxiety or depression 256/1105 (23%); 312/1187 (26%); 143/1191 (12%) -Utility index score: 1 (0.9 – 1); 1 (0.9 – 1); 1 (0.9 – 1) -Quality of life 80 (75 to 90) 80 (70 to 90); 80 (70 to 90)
Control group: community dwelling adults without previous COVID-19 infection Control group: n = 1,127	Distance walked in 6 mins (m): 495.0 (450.0–540.0); 495.0 (445.0–545.0); 512.0 (458.0– 563.0) Percentage of predicted value: 88.1 (79.7–96.2); 90.2 (81.6–98.8); 94.0 (84.7–104.1) Less than LLN: 156/1105 (14%); 132/1167 (11%); 89/1065 (8%)
Matched cohort group: sub-group of COVID-19 hospitalised patients (post discharge)	Work Status at 12 month and 24-month follow up -Returned to original work: 401/455 (88%) 438/494 (89%) -Returned to pre-COVID-19 level of work: 603/401 (76%) 383/438 (87%) -Not returned to pre-COVID-19 level of work: 95/401 (24%) 55/438 (13%)
Assessment mode: EQ-5D-5L	Not returned to original work: 54/455 (12%) 56/494 (11%) -Due to decreased physical function: 18/54 (33%) 21/56 (38%) -Unwilling to return to original work: 10/54 (19%) 10/56 (18%)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	-Unemployment: 12/54 (22%) 12/54 (25%) -Other: 14/54 (20%); 11/56 (20%) Scale 3: not requiring supplemental oxygen (n=295): EQ-5D-5L questionnaire at 24 month follow up Mobility - problems with waking or dishing: 4 (1%) Usual activity - problems with usual activity: 8 (3%) Pain or discomfort: 73 (25%) Anxiety or depression: 34 (12%) Utility index score: 1 (0.9 – 1) Quality of life 80 (70 to 90) Work Status at 24-month follow up Returned to original work: 112/124 (90%) -Returned to pre-COVID-19 level of work: 98/112 (88%) -Not returned to pre-COVID-19 level of work: 14/112 (13%) Not returned to pre-COVID-19 level of work: 14/112 (13%) Not returned to pre-COVID-19 level of work: 14/112 (13%) -Due to decreased physical function: 5/12 (42%) -Unemployment: 3/12 (25%) -Unemployment: 3/12 (25%)
	Scale 4: requiring supplemental oxygen (n=806) EQ-5D-5L questionnaire at 24 month follow up Mobility - problems with walking around: 27/805 (3%) Personal care - problems with usual activity: 20/805 (1%) Usual activity - problems with usual activity: 20/805 (2%) Pain or discomfort: 189/805 (23%) Anxiety or depression: 98/805 (12%) Utility index score: 1 (0.9 – 1) Quality of life 80 (70 to 90) Work Status at 24-month follow up Returned to original work: 282/321 (88%) -Returned to pre-COVID-19 level of work: 248/282 (88%) -Not returned to pre-COVID-19 level of work: 34/282 (12%) Not returned to original work: 39/321 (12%) -Due to decreased physical function: 14/39 (36%) -Unwilling to return to original work: 7/39 (18%)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	-Unemployment: 10/39 (26%) - Other: 8/39 (21%)
	Scale 5–6: requiring HFNC, NIV, or IMV (n=91) EQ-5D-5L questionnaire at 24 month follow up Mobility - problems with walking around: 5 (5%) Personal care - problems with washing or dishing: 2 (2%) Usual activity - problems with usual activity: 7 (8%) Pain or discomfort: 22 (24%) Anxiety or depression: 11 (12%) Utility index score: 1 (0.9 – 1)
	Quality of life EQ-VAS was used to assess quality of life, ranging from 0 (worst imaginable health) to 100 (best imaginable health). EQ-VAS score: COVID-19 survivors at 2-year follow-up visit (n=1127): 80 (70 to 90), Matched non-COVID-19 controls (n=1127): 85.0 (80.0–90.0), P value: <0.0001
	 Work Status at 24-month follow up Returned to original work: 44/49 (90%) Returned to pre-COVID-19 level of work: 37/44 (84%) Not returned to pre-COVID-19 level of work: 7/44 (16%) Not returned to original work: 5/49 (10%) Due to decreased physical function: 2/5 (40%) Unwilling to return to original work: 0/5 (0%) Unemployment: 1/5 (20%) Other: 2/5 (40%)
	Matched Non-COVID-19 participants (n=1127) EQ-5D-5L questionnaire Mobility: Problems with walking around: 41 (4%) Personal care: Problems with washing or dishing: 4 (<1%) Usual activity: Problems with usual activity: 5 (<1%) Pain or discomfort: 57 (5%) Anxiety or depression: 61 (5%) Quality of life: 85.0 (80.0-90.0)
	Matched COVID-19 patients at 24-months (n=1127) EQ-5D-5L questionnaire Mobility: Problems with walking around: 34 (3%) Personal care: Problems with washing or dishing: 12 (1%)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	Usual activity: Problems with usual activity: 27 (2%) Pain or discomfort: 254 (23%) Anxiety or depression: 131 (12%) Quality of life: 80.0 (70.0-90.0)
	Follow up physical activity levels: Full sample at 6, 12 and 24 month follow up (n=1192) Distance walked in 6 mins (m): 495.0 (450.0–540.0); 495.0 (445.0–545.0); 512.0 (458.0–563.0) - Percentage of predicted value: 88.1 (79.7–96.2); 90.2 (81.6–98.8); 94.0 (84.7–104.1) - Less than lower limit of normal range (LLN)*: 156/1105 (14%); 132/1167 (11%); 89/1065 (8%)
	Scale 3: not requiring supplemental oxygen 24 month follow up (n=295): Distance walked in 6 min, m: 510 (455 - 564) - Percentage of predicted value: 93.8 (85 - 103.5) - Less than lower limit of the normal range: 17/254 (7%)
	Scale 4: requiring supplemental oxygen 24 month follow up (n=806) Distance walked in 6 min, m: 510 (457 - 555) - Percentage of predicted value: 94.1 (84.6 - 104) - Less than lower limit of the normal range: 65/726 (9%)
	Scale 5–6: requiring HFNC, NIV, or IMV 24 month follow up (n=91) Distance walked in 6 min, m: 530 (480 - 600) - Percentage of predicted value: 95 (84.5 – 105.9) - Less than lower limit of the normal range: 7/85 (8%)
	* The LLN was calculated by subtracting 153m from the predicted value for men or by subtracting 139m for women.
	Modified British Medical Research Council dyspnea scale (mMRC) scale (n = 406)
Ozcan et al. ⁽¹¹⁹⁾	- During the first 3 months (n %): Grade 0 symptoms: 2 (0.5%)
Population: COVID-19 hospitalised patients (post discharge)	Grade 1 symptoms: 252 (62%) Grade 2 symptoms: 136 (33.5%) Grade 3 symptoms: 16 (3.9%)
n = 406 Assessment mode: Modified British Medical Research Council dyspnea scale (mMRC)	- At the 6-month follow-up visit (n %): Grade 0 symptoms: 166 (41.7%) Grade 1 symptoms: 248 (62.3%) Grade 2 symptoms: 34 (8.5%)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
	Grade 3 symptoms: 0 (0%) The mMRC dyspnea scale is a 5-category, self-rating tool that characterizes the level of dyspnea according to physical activity, with higher scores indicating increased dyspnea. More specifically, it measures the degree of disability that breathlessness poses in day-to-day activities on a scale from 0 to 4: 0: no breathlessness, except with strenuous exercise 1: shortness of breath when hurrying on a level surface or walking up a slight inclination 2: walks slower than individuals of the same age on level surface due to breathlessness or needs to stop to catch breath when walking at their own pace on a level surface 3: stops for breath after walking approximately 100 m or after few minutes on a level surface 4: too breathless to leave the house, or breathless when dressing or undressing.
Rivera – Izquirdo et al. ⁽²²⁾ Population: Cohort group: COVID-19 hospitalised patients (post discharge), Control group: Patients hospitalized for other reasons (non-COVID-19) Cohort group: n = 453, Control group: n = 453 Assessment mode: Telephone interview and medical record data extraction Follow-up time: 12 months post- hospital discharge	Dependency in activities of daily living (patients requiring help) (n %): - Cohort group: 68/453 (15.0) - Control group: 59/453 (13.0) p=0.188
Yoo at al. ⁽⁷⁴⁾ Population: COVID-19 hospitalised patients (post discharge) and those with previous COVID-19 diagnosis referred by primary care providers Population is further split into hospitalised (non-ICU), hospitalised (ICU) and outpatient n = 1,038	Pre-COVID physical activity Full cohort (n = 1038) - Baseline functional status (n %): Vigorous activities: 236 (22.7) Moderate activities: 506 (48.7) Climb 1 flight of stairs: 68 (6.6) Walk 1 block: 149 (14.4) Carry groceries: 6 (0.6) Bathe or dress: 44 (4.2) Missing: 29 (2.8)

Author, population, sample size (n) and assessment mode	Quality of life outcome(s)
Assessment mode: Telephone questionnaire	Outpatient (n = 238) - Baseline functional status (n %): Vigorous activities: 61 (25.6) Moderate activities: 137 (57.6) Climb 1 flight of stairs: 8 (3.4) Walk 1 block: 20 (8.4) Carry groceries: 0 Bathe or dress: 8 (3.4) Missing: 4 (1.7)
	Inpatient (non-ICU) (n = 648) - Baseline functional status (n %): Vigorous activities: 140 (21.6) Moderate activities: 303 (46.8) Climb 1 flight of stairs: 48 (7.4) Walk 1 block: 102 (15.7) Carry groceries: 6 (0.9) Bathe or dress: 29 (4.5) Missing: 20 (3.1)
	Inpatient ICU (n = 152) - Baseline functional status (n %): Vigorous activities: 35 (23.0) Moderate activities: 66 (43.4) Climb 1 flight of stairs: 12 (7.9) Walk 1 block: 27 (17.8) Carry groceries: 0 Bathe or dress: 7 (4.6) Missing: 5 (3.3)

Table 4. Summary of association analysis extracted from primary research studies focusing on those with a historyof severe COVID-19 illness.

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
Asadi-Pooya et al. ⁽¹¹⁸⁾ Population: COVID-19 hospitalised patients (post discharge) n = 4,681	 Analysis: Risk of developing long COVID symptoms. Method: Multivariate logistic regression. Sex: Male: 1 (Reference) Female: OR: 1.268; 95% CI: 1.122 - 1.432; p = 0.0001 Respiratory problems at COVID-19 onset: Not present: 1 (Reference) Present: OR: 1.425; 95% CI: 1.177 - 1.724; p = 0.0001 LOS (hospital), days: OR: 0.953; 95% CI: 0.941 - 0.965; p = 0.0001 Full OR results not provided for the following non-significant variables: Age Neurological problems at COVID-19 onset Gastrointestinal problems at COVID-19 onset Pre-existing chronic medical problems ICU admission
Barreto et al. ⁽³⁷⁾ Population: LC cases at a public health outpatient clinic n = 1,164 Population further split into outpatient, hospitalised non ICU and hospitalised ICU	Analysis: Association between clinical and demographic characteristics and each domain of EuroQoL. Method: Ordinal logistic regression. Mobility - Fatigue: OR: 2.23; 95% CI: 1.60 to 3.14; p <0.001 - Chest pain: OR:1.28; 95% CI: 0.95 to 1.73; p = 0.10 - Dyspnoea: OR:1.32; 95% CI: 0.96 to 1.82; p = 0.090 - Severe Acute illness: OR:2.23; 95% CI: 1.57 to 3.21; p <0.001 - Moderate Acute illness: OR:1.44; 95% CI: 0.98 to 2.13; p = 0.004 - BMI (kg/m ²): OR:1.00; 95% CI: 0.97 to 1.03; p >0.99 - Sex (female): OR:1.47; 95% CI: 1.09 to 2.00; p = 0.011 - Age, years: OR:1.04; 95% CI: 1.03 to 1.05; p <0.001 - Any comorbidity: OR:1.02; 95% CI: 0.70 to 1.50; p = 0.90 Self-care - Fatigue: OR:2.80; 95% CI: 1.81 to 4.44; p <0.001 - Chest pain: OR:1.68; 95% CI: 1.16 to 2.44; p = 0.006 - Dyspnoea: OR:1.54; 95% CI: 1.03 to 2.35; p = 0.038 - Severe Acute illness: OR:1.57; 95% CI: 1.21 to 2.90; p = 0.005 - Moderate Acute illness: OR:1.21; 95% CI: 0.75 to 1.94; p = 0.44

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	 BMI (kg/m²): OR:0.98; 95% CI: 0.95 to 1.02; p = 0.28 Sex (Female): OR:1.58; 95% CI: 1.09 to 2.31; p = 0.018 Age, years: OR:1.04; 95% CI: 1.03 to 1.06; p <0.001 Any comorbidity: OR:1.51; 95% CI: 0.93 to 2.48; p = 0.10
	Anxiety/depression - Fatigue: OR:2.36; 95% CI: 1.78 to 3.11; p <0.001 - Chest pain: OR:2.82; 95% CI: 2.17 to 3.68; p <0.001 - Dyspnoea: OR:1.15; 95% CI: 0.87 to 1.50; p = 0.33 - Severe Acute illness: OR:0.88; 95% CI: 0.65 to 1.19; p = 0.41 - Moderate Acute illness: OR:0.87; 95% CI: 0.63 to 1.20; p = 0.40 - BMI (kg/m ²): OR:1.03; 95% CI: 1.00 to 1.05; p = 0.030 - Sex (Female): OR:1.87; 95% CI: 1.44 to 2.43; p <0.001 - Age, years: OR:1.01; 95% CI: 1.00 to 1.02; p = 0.013 - Any comorbidity: OR:0.98; 95% CI: 0.71 to 1.34; p = 0.880
	$\begin{array}{l} \underline{Pain/discomfort} \\ \hline \textbf{Fatigue:} OR:2.53; 95\% CI: 1.94 to 3.32; p < 0.001 \\ \hline \textbf{Chest pain:} OR:1.24; 95\% CI: 0.96 to 1.59; p = 0.10 \\ \hline \textbf{Dyspnoea:} OR:1.36; 95\% CI: 1.05 to 1.77; p = 0.020 \\ \hline \textbf{Severe Acute illness:} OR:1.23; 95\% CI: 0.91 to 1.65; p = 0.18 \\ \hline \textbf{Moderate Acute illness:} OR:0.83; 95\% CI: 0.91 to 1.65; p = 0.25 \\ \hline \textbf{BMI (kg/m^2):} OR:1.01; 95\% CI: 0.98 to 1.03; p = 0.55 \\ \hline \textbf{Sex (Female):} OR:1.66; 95\% CI: 1.29 to 2.13; p < 0.001 \\ \hline \textbf{Age, years:} OR:0.99; 95\% CI: 0.98 to 1.00; p = 0.077 \\ \hline \textbf{Any comorbidity:} OR:1.45; 95\% CI: 1.06 to 1.99; p = 0.019 \\ \end{array}$
Batistella et al. ⁽³⁵⁾	Analysis: To understand whether variables related to acute COVID-19 (such as the need for intubation) were associated with post-COVID- 19 functional outcomes such as sleep, pain, motor strength and dyspnoea. Method: Linear regression models (adjusted for confounders).

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
Population: COVID-19 hospitalised patients	
(post discharge)	Epworth sleepiness scale
	- Intubation: Beta coefficient (B): -1.374; 95% CI: -2.179 to -0.569; p = 0.001
n = 801	- Sex: B: -0.399; 95% CI: -1.196 to 0.397; p = 0.325
	- Age: B: -0.043; 95% CI: -0.073 to -0.012; p = 0.006 - Race: B: -0.222; 95% CI: -1.030 to 0.585; p = 0.589
	- Hypertension: B: 0.659 ; 95% CI: -0.241 to 1.560 ; p = 0.151
	- 1 y percension. B. 0.055, 5570 CI. 0.241 to 1.500, p = 0.151
	Dyspnoea
	- Intubation: B: -0.030; 95% CI: -0.179 to 0.120; p = 0.697
	- Sex: B: -0.436; 95% CI: -0.584 to -0.288; p <0.001
	- Age: B: 0.0002; 95% CI: -0.006 to 0.005; p = 0.939
	- Race: B: -0.010; 95% CI: -0.160 to 0.140; p = 0.894
	- Hypertension: B: 0.297; 95% CI: 0.130 to 0.464; p = 0.001
	VAS
	- Intubation: B: -2.346; 95% CI: -7.192 2.499; p = 0.342
	- Sex: B: -15.384; 95% CI: -20.159 -10.609; p <0.001
	- Age: B: 0.242; 95% CI: 0.054 0.429; p = 0.012
	- Race: B: -2.543; 95% CI: -7.393 2.308; p = 0.304
	- Hypertension: B: 3.587; 95% CI: -1.811 8.984; p = 0.192
	Handgrip
	- Intubation: B: 7.245; 95% CI: 5.841 8.649; p < 0.001
	- Sex: B: 15.148; 95% CI: 13.762 16.534; p <0.001
	- Age: B: -0.182; 95% CI: -0.236 -0.127; p <0.001
	- Race: B: -0.972; 95% CI: -2.381 0.437; p = 0.176
	- Hypertension: B: -1.950; 95% CI: -3.516 -0.384; p = 0.015
Boglione et al. ⁽³⁰⁾	Analysis: Independent predictors of long COVID syndrome.
Deputations COVID 10 beenitalized patients	Method: Multivariate logistic regression with stepwise forward selection.
Population: COVID-19 hospitalised patients (post discharge)	
(post discilarge)	- ICU admission: OR: 2.551; 95% CI: 1.998 – 6.819; p = 0.019
n = 449	- Time of hospitalization: OR: 2.255; 95% CI: 1.018 – 6.992; p = 0.016
	- Treatment with remdesivir: OR: 0.641; 95% CI: 0.413 – 0.782; p <0.001
Cornelli et al. ⁽²⁸⁾	Analysis: Patient factors associated with \geq 2 sequelae or persistent symptoms during the 12 months after hospital discharge in surviving patients.
	Method: Multivariate logistic regression (fully adjusted for variables identified as significant in univariate analysis).
Population: COVID-19 hospitalised patients	0
(post discharge)	- Sex: Male: 1 (Reference)
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Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
n = 3001/3290 completed the survey ≥ 4 weeks after COVID-19 symptom onset	Female: OR: 2.44; 95% CI: 1.49 - 4.00• Age, mean (SD): CR: 0.98; 95% CI: 0.97 - 1.002• Number of comorbidities:0: 1 (Reference)1 - 2: OR: 2.35; 95% CI: 1.41 - 3.91 \geq 3: OR: 2.04; 95% CI: 0.97 - 4.27Analysis: Frequency of disabling sequelae during the 12 months after hospital discharge in surviving patients.Method: Multivariate logistic regression (fully adjusted for variables identified as significant in univariate analysis) Sex:Male: 1 (Reference)Female: OR: 2.77; 95% CI: 1.72 - 4.48• Ethnicity:Other: 1 (Reference)caucasian: OR: 0.52; 95% CI: 0.26 - 1.01• Number of comorbidities:0: 1 (Reference)Caucasian: OR: 0.52; 95% CI: 1.02 - 4.47• Symptoms at COVID-19 onset:Respiratory symptoms: OR: 1.76; 95% CI: 0.92 - 3.36Neurologic symptoms: OR: 2.01; 95% CI: 1.04 - 3.38Analysis: Patient factors associated with health status difference after 12 months - before COVID-19.Method: Multivariate logistic regression (fully adjusted for variables identified as significant in univariate analysis) Sex:Male: 1 (Reference)Female: OR: 2.21; 95% CI: 1.48 - 3.30- Nanjysis: Severe medical problems during the 12 months of holow-up after hospital discharge.Method: Multivariate logistic regression (fully adjusted for variables identified as significant in univariate analysis) Ser:Male: 1 (Reference)Female: OR: 2.21; 95% CI: 1.48 - 3.30- Hospitalisation length: OR: 1.02; 95% CI: 0.999 - 1.03Analysis: Severe medical problems during the 12 months of follow-up after hosp
Damiano et al. ⁽³⁹⁾	Analysis: Multivariate analysis between chemosensory and clinical and neuropsychiatric morbidity. Method: Multivariate, stepwise, logistic regression. The covariates and factors analysed include sociodemographic parameters (age and gender), baseline hospitalization parameters (need of ICU, Intubation or Dialysis, length of hospitalization), social issues (financial problems following

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
COVID-19 hospitalised patients (post discharge)	COVID-19 and Death of Close relatives), global health status (physical exercise using IPAQ questionnaire, Global health Status, and Frailty), and Psychiatric and Cognitive Measures.
n = 701	Parosmia (9%) - Memory Complaint Scale: B: 0.105, S.E.: 0.032, Wald: 10.975, df: 1, Sig: 0.001, Exp(B): 1.110 - Constant: B: -2.953, S.E.: 0.251, Wald: 138.115, df: 1, Sig: 0.000, Exp(B): 0.052
	<u>Moderate and severe current olfactory deficit (18%)</u> - COVID-19 olfactory deficit: B: -0.024, S.E.: 0.003, Wald: 54.016, df: 1, Sig: 0.000, Exp(B): 0.977 - Constant: B: -0.790, S.E.: 0.123, Wald: 41.192, df: 1, Sig: 0.000, Exp(B): 0.454
	Symptom: Moderate and severe current gustatory deficit (20%) - COVID-19 gustatory deficit: B: -0.858, S.E.: 0.238, Wald: 12.992, df: 1, Sig: 0.000, Exp(B): 2.358 - Word List Memory Task: B: -0.052, S.E.: 0.021, Wald: 6.275, df: 1, Sig: 0.012, Exp(B): 0.950 - Constant: B: -1.228, S.E.: 0.364, Wald: 11.393, df: 1, Sig: 0.001, Exp(B): 0.293
	Moderate and severe current olfactory and gustatory deficit (11%) - COVID-19 olfactory and gustatory deficit: B: 3.035, S.E.: 0.597, Wald: 25.884, df: 1, Sig: 0.000, Exp(B): 20.808 - Word List Memory Task:B: – 0.074, S.E.: 0.027, Wald: 7.545, df: 1, Sig: 0.006, Exp(B): 0.928 - Constant: B: – 3.440, S.E.: 0.691, Wald: 24.784, df: 1, Sig: 0.000, Exp(B): 0.032
De Oliveira et al. ⁽⁴⁰⁾	Analysis: Variables associated with long COVID. Method: Multivariate logistic regression (adjusted for variables identified as significant in univariate analysis).
Population: COVID-19 hospitalised patients (post discharge)	 Dysgeusia: OR: 2.0, CI (95%): 1.18 - 3.44; p = 0.01 ICU admission: OR: 2.6, CI (95%): 1.19 - 6.56; p = 0.03
n = 439	- Time from symptom onset to study questionnaire >180 days: OR: 0.24, CI (95%): 0.10 - 0.51; p = 0.001
	Analysis: Risk factors for being less likely to recover at 1-year follow-up. Method: Hierarchical multivariable logistic regression (with multilevel imputation for missing data).
Evans et al. ⁽⁴⁵⁾	- Age at admission, years: 50-59: 1 (Reference) <30: OR: 3.65; 95% CI: 0.87 – 15.27; p = 0.076
Population: COVID-19 hospitalised patients	30-39: 3.09 (1.48 - 6.47); p = 0.0028
(post discharge)	40-49: 1.88 (1.02 – 3.45); p = 0.041 60-69: 1.93 (1.19 – 3.12); p = 0.0074
n = 924	70-79: 2.08 $(1.20 - 3.61)$; p = 0.009
	≥80: 4.10 (1.77 – 9.48); p = 0.001 - Sex:
	Female: 0.68 (0.46 – 0.99); p = 0.047
	Male: 1 (Reference)

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	• Ethnicity: White: 1 (Reference) South Asian: 1.45 (0.82 - 2.54); $p = 0.201$ Black: 2.44 (1.23 - 4.82); $p = 0.011$ Mixed: 2.95 (1.02 - 8.52); $p = 0.045$ Other: 1.77 (0.74 - 4.25); $p = 0.201$ • Index of Multiple Deprivation: 1 (most deprived): 1 (Reference) 2: 1.00 (0.56 - 1.81); $p = 0.992$ 3: 1.34 (0.75 - 2.38); $p = 0.317$ 4: 1.60 (0.91 - 2.83); $p = 0.317$ 4: 1.60 (0.91 - 2.83); $p = 0.317$ 4: 1.60 (0.91 - 2.83); $p = 0.105$ 5-least deprived: 1.33 (0.76 - 2.32); $p = 0.318$ • Number of comorbidities (factor): No comorbidity: 1 (Reference) 1 comorbidity: 1 (Reference) 1 comorbidity: 1.37 (0.83 - 2.27); $p = 0.216$ ≥2 comorbidities: 0.75 (0.49 - 1.16); $p = 0.197$ • BMI (<30 versus ≥30 kg/m2): BMI <30 kg/m2: 0.50 (0.34 - 0.74); $p = 0.0007$ • WHO class 3-4: 1 (Reference) WHO class 5: 1.23 (0.77 - 1.98); $p = 0.391$ WHO class 5: 1.23 (0.77 - 1.98); $p = 0.391$ WHO class 7-9: 0.42 (0.23 - 0.76); $p = 0.0048$ • Systemic (oral or intravenous) steroids: No: 1 (Reference) Yes: 1.05 (0.66 - 1.65); $p = 0.839$ • Hospital discharge to research visit, days: 1.00 (1.00 - 1.01); $p = 0.118$
Fang et al. ⁽⁶⁵⁾ Population: COVID-19 hospitalised patients ≥ 60 years (post discharge) n = 1,233	See Appendix 7 Specific age groups, Table 4
Feldman et al. ⁽⁸⁵⁾ Population: COVID-19 hospitalised patients (post discharge)	 Analysis: Factors associated with long COVID. Method: Multivariable logistic regression (adjusted for sex, age, time since diagnosis, employment status pre-infection, civil status, education, body mass index (BMI), intensive care unit admission, length of hospital stay, and time since diagnosis). Sex:
n = 398	Male: 1 (Reference)

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Female: OR: 1.15; 95% CI: 0.57 – 2.35 • Age (1 year increase): OR: 1.02; 95% CI: 0.99 – 1.05 • Marital status: Single/widowed/divorced: OR: 0.98; 95% CI: 0.45 – 2.18 • Education: More than high school: OR: 1.54; 95% CI: 0.69 – 3.43 • Obese (BMI \ge 30.0): OR: 1.30; 95% CI: 0.66 – 2.56 • Not working pre-diagnosis: OR: 0.23; 95% CI: 0.10 – 0.53 • ICU admission: OR: 1.38; 95% CI: 0.61 – 3.11 • No. of symptoms (one symptom increase): OR: 1.97; 95% CI: 1.69 – 2.28 • Not vaccinated: OR: 1.52; 95% CI: 0.52 – 4.47 • Hospital stay (increase per 1 day): OR: 1.03; 95% CI: 1.01 – 1.06 • Time since diagnosis (months): OR: 0.98; 95% CI: 0.91 – 1.06 Analysis: Factors associated with physical symptoms (Breathless; feeling fatigued; have a cough; palpitations; feeling weak; myalgia; disturbed sleep; lost weight). Method: Multivariable logistic regression (adjusted for sex, age, time since diagnosis, employment status pre-infection, civil status, education, body mass index (BMI), intensive care unit admission, length of hospital stay, and time since diagnosis).
	- Sex: Male: 1 (Reference) Female: OR: 2.17; 95% CI: 1.27 – 3.71 - Age (1 year increase): OR: 1.01; 95% CI: 0.99 – 1.03 - Marital status: Single/widowed/divorced: OR: 0.72; 95% CI: 0.41–1.28 - Education: More than high school: OR: 2.10; 95% CI: 1.20 – 3.68 - Obese (BMI \ge 30.0): OR: 1.95; 95% CI: 1.15 – 3.34 - Not working pre-diagnosis: OR: 0.74; 95% CI: 0.39 – 1.39 - ICU admission: OR: 1.14; 95% CI: 0.58 – 2.27 - Not vaccinated: OR: 0.86; 95% CI: 0.37 – 2.01 - Hospital stay (increase per 1 day): OR: 1.03; 95% CI: 1.01 – 1.06 - Time since diagnosis (months): OR: 0.99; 95% CI: 0.94 – 1.04 Analysis: Factors associated with psychological/mental health symptoms (Palpitations; disturbed sleep; having nightmares; low mood; feeling anxious; lost weight). Method: Multivariable logistic regression (adjusted for sex, age, time since diagnosis, employment status pre-infection, civil status, education, body mass index (BMI), intensive care unit admission, length of hospital stay, and time since diagnosis). - Sex:

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Male: 1 (Reference) Female: OR:2.06; 95% CI: 1.25 – 3.39 - Age (1 year increase): OR: 1.01; 95% CI: 0.99 – 1.02 - Marital status: Single/widowed/divorced: OR: 0.66; 95% CI: 0.39 – 1.13
	 Education: More than high school: OR: 2.43; 95% CI: 1.44 – 4.14 Obese (BMI ≥ 30.0): OR: 1.70; 95% CI: 1.05 – 2.77 Not working pre-diagnosis: OR: 0.86; 95% CI: 0.48 – 1.55 ICU admission: OR: 1.05; 95% CI: 0.56 – 1.95
	 Not vaccinated: OR: 1.05, 95% CI: 0.49 – 2.43 Hospital stay (increase per 1 day): OR: 1.04; 95% CI: 1.01 – 1.06 Time since diagnosis (months): OR: 0.97; 95% CI: 0.92 – 1.02
	Analysis: Factors associated with sensory symptoms (Anosmia; lost sense of taste). Method: Multivariable logistic regression (adjusted for sex, age, time since diagnosis, employment status pre-infection, civil status, education, body mass index (BMI), intensive care unit admission, length of hospital stay, and time since diagnosis).
	 Sex: Male: 1 (Reference) Female: OR: 1.73; 95% CI: 0.92 – 3.25 Age (1 year increase): OR:0.99; CI: 0.96–1.01 Marital status:
	Single/widowed/divorced: OR: 1.60; 95% CI: 0.82 – 3.13 - Education: More than high school: OR: 1.53; 95% CI: 0.74 – 3.16 - Obese (BMI ≥ 30.0): OR: 1.03; 95% CI: 0.55 – 1.92
	 Not working pre-diagnosis: OR: 1.21; 95% CI: 0.58 – 2.56 ICU admission: OR: 0.60; 95% CI: 0.25 – 1.46 Not vaccinated: OR: 0.37; 95% CI: 0.11 – 1.33 Hospital stay (increase per 1 day): OR: 0.99; 95% CI: 0.96 – 1.02 Time since diagnosis (months): OR: 0.99; 95% CI: 0.92 – 1.06
	 Analysis: Factors associated with any symptom. Method: Multivariable logistic regression (adjusted for sex, age, time since diagnosis, employment status pre-infection, civil status, education, body mass index (BMI), intensive care unit admission, length of hospital stay, and time since diagnosis).
	- Sex: Male: 1 (Reference) Female: OR: 2.06; CI: 1.17 – 3.62

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
Fernández-de-las-Peñas et al. ⁽²⁶⁾ Population: COVID-19 hospitalised patients (post discharge) n = 1,142	<pre>- Age (1 year increase): OR: 1.01; 95% CI: 0.99 - 1.03 - Marital status: Single/widowed/divorced: OR: 0.65; CI: 0.36-1.19 - Education: More than high school: OR: 2.83; 95% CI: 1.57 - 5.08 - Obese (BMT ≥ 30.0): OR: 2.24; 95% CI: 1.26 - 3.97 - Not working pre-diagnosis: OR: 0.67; 95% CI: 0.24 - 1.30 - ICU admission: OR: 0.97; 95% CI: 0.27 - 1.54 - Hospital stay (increase per 1 day): OR: 1.03; 95% CI: 1.00 - 1.06 - Time since diagnosis (Ro: 0.57; 95% CI: 0.27 - 1.54 - Hospital stay (increase per 1 day): OR: 1.03; 95% CI: 1.00 - 1.06 - Time since diagnosis (Ro: 0.16); 95% CI: 0.27 - 1.54 - Hospital stay (increase per 1 day): OR: 1.03; 95% CI: 1.00 - 1.06 - Time since diagnosis (Ro: 0.16); 95% CI: 1.39 - 2.32; p < 0.001 - The number of medical comorbidities: OR: 1.21; 95% CI: 1.04 - 1.42; p = 0.012 - The number of symptoms experienced at hospital admission: OR: 1.55; 95% CI: 1.34 - 1.80; p < 0.001. Dyspnoea - Female sex: at rest: OR: 1.84; 95% CI: 1.38 - 2.47; activity: OR: 1.86; 95% CI: 1.34 - 1.80; p < 0.001 - The number of medical comorbidities: at rest: OR: 1.02; 95% CI: 1.02 - 1.43; p = 0.02; with activity: OR: 1.01 - 1.025; p = 0.025 - The number of medical comorbidities: at rest: OR: 1.21; 95% CI: 1.02 - 1.43; p = 0.02; with activity: OR: 1.37; 95% CI: 1.15 - 1.56; p < 0.001 - The number of symptoms at hospitalization: at rest: OR: 1.21; 95% CI: 1.02 - 1.43; p = 0.02; with activity: OR: 1.37; 95% CI: 1.18 - 1.58; p < 0.001 - The number of symptoms at hospitalization: at rest: OR: 1.21; 95% CI: 1.02 - 1.45; p = 0.03; activity: OR: 1.37; 95% CI: 1.18 - 1.58; p < 0.001 - The number of apatents receiving ICU admission experienced moderate and severe limitations with daily living activities (compared to those not requiring ICU admission: occupational: moderate: OR: 2.89; 95% CI: 1.20 - 5.49; p = 0.001, severe: OR: 5.13; 95% CI: 2.59 - 10.17; p < 0.001 leisure/social: moderate: OR: 2.89; 95% CI: 1.20 - 5.49; p = 0.001, severe: OR: 5.13; 95% CI: 2.59 - 10.17; p < 0.001 leisure/social: moderate: OR: 3.31; 95</pre>
Fernández-de-las-Peñas et al. ⁽²⁴⁾	
Population: COVID-19 hospitalised patients (post discharge)	Analysis: To identify the independent association of sex with variables significantly different between males and females, for post-COVID symptoms.

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
n = 1,969	Method: Multivariate analysis (adjusted by all variables collected at hospital admission (age, height, weight, pre-existing medical comorbidities, COVID-19 onset symptoms at hospital admission, intensive care unit (ICU) admission, days at hospital). Gender was always an independent variable as well as all variables collected at hospital admission and an intercept term. Female sex was significantly associated with: ≥3 post-COVID symptoms: aOR 2.54; 95% CI: 1.671 – 3.865; p < 0.001 the presence of post-COVID fatigue: aOR: 1.514; 95% CI: 1.040 – 2.205; p = 0.017 dyspnoea: at rest: aOR: 1.428; 95% CI: 1.081 – 1.886; p = 0.012; exertion: aOR: 1.409; 95% CI: 1.109 – 1.791; p = 0.005 pain: aOR: 1.349; 95% CI: 2.784 – 7.368; p < 0.001 ocular problems: aOR: 1.981; 95% CI: 1.185 – 3.312; p = 0.009 depressive levels: aOR: 1.606; 95% CI: 1.002 – 2.572; p = 0.045 poor sleep quality: aOR: 1.634; 95% CI: 1.097 – 2.434; p = 0.004
	 poor sleep quality: aOR: 1.634; 95% CI: 1.097 - 2.434; p = 0.004 Musculoskeletal pain (Pre) was significantly associated with: fatigue: aOR: 1.549; 95% CI: 1.119 - 2.145 dyspnoea: exertion: aOR: 1.496; 95% CI: 1.049 - 2.047 pain symptoms: aOR: 1.553; 95% CI: 1.271 - 1.898 ≥3 post-COVID symptoms: aOR: 1.492; 95% CI: 1.067 - 2.085 poor sleep quality: aOR: 1.519; 95% CI: 1.098 - 2.102 Analysis: Association of acute COVID-19 variables and post-COVID symptoms in hospitalised patients Method: Multivariate logistic regression (adjusted for age, sex, height, and weight, clinical (COVID-19–associated symptoms at onset and preexisting medical comorbidities and hospitalization (intensive care unit admission and duration of hospital stay)).
Fernández-de-las-Peñas et al. ⁽²⁷⁾ Population: Those with previous COVID-19 diagnosis (hospitalised and non- hospitalised) n = 360 hospitalised, n = 308 non-	Fatigue - the number of pre-existing comorbidities: OR: 1.93; 95% CI: 1.09 - 3.42; p = 0.02 Dyspnoea - the number of pre-existing comorbidities: OR: 1.91; 95% CI: 1.04 - 3.48; p = 0.03 Analysis: Association of acute COVID-19 variables and post-COVID symptoms in non-hospitalised patients
hospitalised Fernández-de-las-Peñas et al. ⁽²³⁾	Method: Multivariate logistic regression (adjusted for age, sex, height, and weight, clinical (COVID-19–associated symptoms at onset and pre- existing medical comorbidities and hospitalization (intensive care unit admission and duration of hospital stay)) Fatique - The number of pre-existing medical comorbidities: OR: 3.75; 95% CI: 1.67 - 8.42; p = 0.001 - The number of symptoms at onset: OR: 3.84; 95% CI: 1.33 - 11.05; p = 0.01 Analysis: Factors related to musculoskeletal post-COVID pain symptoms.

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
Population: COVID-19 hospitalised patients (post discharge)	Method: Multivariate logistic regression (adjusted for COVID-19 associated variables collected at hospital admission (age, gender, height, weight, COVID-19 onset symptoms at hospital admission, pre-existing medical comorbidities, intensive care unit [ICU] admission, days at hospital).
n = 1,969	 Age: OR: 0.995; 95% CI: 0.988 - 1.002 Female sex: OR: 1.349; 95% CI: 1.029 - 1.720 Weight: OR: 1.010; 95% CI: 0.027 - 1.019 Height: OR: 1.020; 95% CI: 0.978 - 1.005 No. of medical comorbidities: OR: 0.562; 95% CI: 0.273 - 1.156 Medical comorbidities: OR: 0.992; 95% CI: 0.835 - 1.180 Diabetes: OR: 1.414; 95% CI: 0.654 - 3.057 Cardiovascular diseases: OR: 1.000; 95% CI: 0.774 - 1.292 Asthma: OR: 1.379; 95% CI: 0.998 - 2.439 Chronic obstructive pulmonary disease: OR: 1.026; 95% CI: 0.657 - 1.604 Rheumatological diseases: OR: 1.026; 95% CI: 0.757 - 1.604 Rheumatological diseases: OR: 1.102; 95% CI: 0.765 - 3.262 Other (cancer and kidney disease): OR: 1.125; 95% CI: 0.271 - 1.898 No. of symptoms at hospital admission: OR: 1.172; 95% CI: 0.936 - 1.476 Symptoms at hospital admission: OR: 1.172; 95% CI: 0.943 - 1.195 Diarhoea: OR: 1.369; 95% CI: 0.949 - 1.498 Myalgia: OR: 1.546; 95% CI: 0.349 - 1.408 Myalgia: OR: 1.546; 95% CI: 0.943 - 1.359 Anosmia: OR: 0.850; 95% CI: 0.943 - 1.359 Anosmia: OR: 0.163; 95% CI: 0.726 - 1.033 Yomiting: OR: 1.1349; 95% CI: 0.726 - 1.033 Yomiting: OR: 1.1349; 95% CI: 0.726 - 1.033 Yomiting: OR: 1.1349; 95% CI: 0.726 - 1.033
Fernández-de-las-Peñas et al. ⁽²⁵⁾	 Intensive care unit admission: OR: 1.477; 95% CI: 0.981 - 2.224 Analysis: To identify which variables, including serological biomarkers, contributed significantly to the presence of long-term post-COVID fatigue or dyspnoea.
Population: COVID-19 hospitalised patients (post discharge)	Method: Multiple hierarchical regression analysis. Post-COVID fatigue
n = 412	 Female sex: OR 1.25; 95% CI: 1.1 – 1.4 Reporting dyspnoea as a COVID-19-associated onset symptom at hospital admission: OR: 1.62: 95% CI: 1.01 – 2.58 Comorbid asthma before hospitalization: OR 5.44; 95% CI: 1.27 – 23.26

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Post-COVID dyspnoea - Female sex: OR: 1.8; 95% CI: 1.15 – 2.95 - Reporting dyspnoea as a COVID-19-associated onset symptom at hospital admission: OR: 3.88, 95% CI; 1.76 – 8.54 - Comorbid asthma before hospitalization: OR: 2.57; 95% CI: 1.53 – 4.32
	Analysis: Sociodemographic, clinical, and environmental factors associated with selected persistent symptoms and functional scale in patients with Covid-19 at follow-up. Method: Regression estimates (multilevel regression). Dyspnoea - Sex:
	Female: 1 (Reference) Male: Estimate: -0.39; 95% CI: -0.550.23; p <0.001 - Age: Estimate: 0.00; 95% CI: -0.01 - 0.01; p = 0.93 - Socioeconomic position: High: 1 (Reference) Medium: Estimate: 0.31; 95% CI: 0.13 - 0.50; p <0.001
Ferreira et al. ⁽⁴¹⁾ Population: COVID-19 hospitalised patients (post discharge)	Low: Estimate: 0.59; 95% CI: 0.30 - 0.88; p <0.001 - Charlson score: Estimate: 0.08; 95% CI: 0.02 - 0.14; p = 0.01 - Body mass index: Estimate: 0.02; 95% CI: 0.01 - 0.03; p <0.001 - Intubation: No: 1 (Reference) Yes: Estimate: -0.12; 95% CI: -0.31 - 0.07; p = 0.21
n = 749	 Length of hospital stay: Estimate: 0.00; 95% CI: -0.01 - 0.01; p = 0.76 PM2.5 (air pollution): Estimate: 0.16; 95% CI: 0.01 - 0.32; p = 0.03 Greenspace: Estimate: 0.00; 95% CI: -0.01 - 0.01; p = 0.66 Per capita income: Estimate: 0.00; 95% CI: -0.00 - 0.00; p = 0.12 Population density: Estimate: 0.00; 95% CI: -0.00 - 0.00; p = 0.80
	Fatigue - Sex: Female: 1 (Reference) Male: Estimate: 4.79; 95% CI: 3.37 - 6.20; p <0.001
	High: 1 (Reference) Medium: Estimate: -0.07; 95% CI: -1.70, -1.56; p = 0.94 Low: Estimate: -2.66; 95% CI: -5.27, -0.06; p = 0.05 - Charlson score: Estimate: -0.87; 95% CI: -1.39, -0.36; p <0.001 - Body mass index: Estimate: -0.06; 95% CI: -0.16 - 0.03; p = 0.20

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	 Intubation: No: 1 (Reference) Yes: Estimate: 2.11; 95% CI: 0.45 - 3.78; p = 0.01 Length of hospital stay: Estimate: -0.04; 95% CI: -0.09, -0.00; p = 0.05 PM2.5 (air pollution): Estimate: -1.43; 95% CI: -2.73, -0.12; p = 0.03 Greenspace: Estimate: 0.00; 95% CI: -0.05 - 0.05; p = 0.92 Per capita income: Estimate: 0.00; 95% CI: -0.00 - 0.00; p = 0.16 Population density: Estimate: 0.01; 95% CI: -0.01 - 0.02; p = 0.34
	Functional status - Sex: Female: 1 (Reference) Male: Estimate: -0.39; 95% CI: -0.56, -0.23; p <0.001 - Age: Estimate: 0.00; 95% CI: -0.01 - 0.01; p = 0.76 - Socioeconomic position: High: 1 (Reference) Medium: Estimate: 0.10; 95% CI: -0.09 - 0.29; p = 0.29
	Low: Estimate: 0.38; 95% CI: 0.08 - 0.69; p = 0.01 - Charlson score: Estimate: 0.09; 95% CI: 0.03 - 0.15; p = 0.01 - Body mass index: Estimate: 0.00; 95% CI: -0.01 - 0.01; p = 0.56 - Intubation: No: 1 (Reference) Yes: Estimate: -0.11; 95% CI: -0.31 - 0.08; p = 0.25 - Length of hospital stay: Estimate: 0.01; 95% CI: 0.01 - 0.02; p < 0.001 - PM2.5 (air pollution): Estimate: 0.16; 95% CI: 0.01 - 0.31; p = 0.03 - Greenspace: Estimate: 0.00; 95% CI: -0.01 - 0.01; p = 0.93 - Per capita income: Estimate: 0.00; 95% CI: -0.00 - 0.00; p = 0.45
	 Population density: Estimate: 0.00; 95% CI: -0.00 - 0.00; p = 0.48 <u>Anxiety/depression</u> Sex: Female: 1 (Reference) Male: Estimate: -4.93; 95% CI: -6.24, -3.61; p <0.001 Age: Estimate: -0.08; 95% CI: -0.14 - 0.01; p = 0.02 Socioeconomic position: High: 1 (Reference)
	Medium: Estimate: 0.71; 95% CI: -0.81 - 2.22; p = 0.36 Low: Estimate: 1.93; 95% CI: -0.50 - 4.35; p = 0.12 - Charlson score: Estimate: 0.18; 95% CI: -0.30 - 0.66; p = 0.47 - Body mass index: Estimate: 0.03; 95% CI: -0.06 - 0.12; p = 0.51

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
Frontera et al. ⁽¹¹⁷⁾ Population: COVID-19 hospitalised patients (post discharge) 6-month follow-up: n = 382, 12-month follow-up: n = 242	• Intubation: No: 1 (Reference) Yes: Estimate: -1.81; 95% CI: -3.35, -0.26; p = 0.02 • Length of hospital stay: Estimate: 0.00; 95% CI: -0.04 - 0.04; p = 0.85 • PM2.5 (air pollution): Estimate: 0.00; 95% CI: -0.07, 1.72; p = 0.42 • Pre capita income: Estimate: 0.00; 95% CI: -0.00, 0.00; p = 0.82 • Per capita income: Estimate: 0.00; 95% CI: -0.01, 0.01; p = 0.68 Analysis: Predictors of 6- and 12-month outcome (disability using the modified Rankin Scale (mRS), activities of daily living assessed with the Barthel Index, cognition assessed with the telephone Montreal Cognitive Assessment (t-MoCA), Neuro-QoL batteries for anxiety, depression, fatigue and sleep, and post-acute symptoms of COVID-19). Method: Multivariable backward, stepwise logistic regression (adjusted for univariate variables with P values <0.05). Discharge metrics including length of stay, and discharge disposition (home, skilled nursing facility, acute rehabilitation facility) were not entered into multivariable models due to collinearity. 6 month mRS 4-5 • Age: a0R: 1.02; 95% CI: 1.00 - 1.04; p = 0.021 • Baseline mRS: a0R: 1.99; 95% CI: 1.60 - 2.48; p <0.001 • Neurological event during index hospitalisation: a0R: 1.74; 95% CI: 1.02 - 2.98; p = 0.043 12-month mRS 4-6 • Age: a0R: 1.04; 95% CI: 1.01 - 1.06; p = 0.002 • Baseline mRS: a0R: 2.05; 95% CI: 1.59 - 2.56; p <0.001 • Hypoxic ischemic encephalopathy during index hospitalisation: a0R: 3.58; 95% CI: 1.08 - 11.92; p = 0.037 • Stressor: new disability: a0R: 4.88; 95% CI: 1.53 - 15.56; p = 0.007 6 month Barthel < 100 • Age: a0R: 1.04; 95% CI: 1.02 - 1.06; p <0.001 • Baseline mRS: a0R: 2.02; 95% CI: 1.59 - 2.59; p <0.001 • Baseline mRS: a0R: 2.02; 95% CI: 1.59 - 2.59; p <0.001 • Baseline mRS: a0R: 2.02; 95% CI: 1.59 - 2.59; p <0.001 • Age: a0R: 1.04; 95% CI: 1.02 - 1.06; p <0.001 • Baseline mRS: a0R: 2.02; 95% CI: 1.58 - 2.59; p <0.001 • Baseline mRS: a0R: 2.02; 95% CI: 1.58 - 2.59; p <0.001 • Age: a0R: 1.04; 95% CI: 1.03 - 1.09; p <0.001
	 Baseline mRS: aOR: 2.62; 95% CI: 1.90 - 3.62; p <0.001 Male sex: aOR: 0.33; 95% CI: 0.15 - 0.72; p = 0.005 Stressor: new disability: aOR: 11.74; 95% CI: 2.76 - 50.05; p = 0.001 <u>6 month Telephone MoCA ≤ 18</u> White race: aOR: 0.41; 95% CI: 0.21 - 0.83; p = 0.012

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	- History of dementia: aOR: 6.82; 95% CI: 1.38 – 33.67; p = 0.019 - Education>12 years: aOR: 0.30; 95% CI: 0.12 – 0.77; p = 0.012
	<u>12-monthj Telephone MoCA ≤ 18</u> - Age: aOR: 1.04; 95% CI: 1.01 – 1.07; p = 0.003 - Education>12 years: aOR: 0.34; 95% CI: 0.15 – 0.80; p = 0.014
	12-month NeuroQoL Anxiety T-score ≥_60 - Male sex: aOR: 0.21; 95% CI: 0.06 – 0.74; p = 0.015 - History of dementia: aOR: 6.42; 95% CI: 1.54 – 26.69; p = 0.011
	12-month NeuroQoL Depression T-score ≥_60 - Age: aOR: 1.11; 95% CI: 1.02 – 1.20; p = 0.011
	- Education>12 years: aOR: 0.14; 95% CI: 0.03 – 0.77; p = 0.024 - Stressor: death of a close contact: aOR: 20.79; 95% CI: 3.57 – 121.14; p = 0.001
	12-month NeuroQoL Fatigue T-score ≥_60 - Stressor: food insecurity: aOR: 21.32; 95% CI: 1.92 – 236.80; p = 0.013 - Stressor: new disability: aOR: 6.5; 95% CI: 1.45 – 29.33; p = 0.015 - Baseline mRS: aOR: 1.53; 95% CI: 1.05 – 2.23; p = 0.027
	- Azithromycin use during index hospitalization: aOR: 0.25; 95% CI: 0.08 – 0.82; $p = 0.022$
	12-month NeuroQoL Sleep T-score ≥_60 - Number of stressors: aOR: 1.43; 95% CI: 1.12 – 1.82; p = 0.004
	12-month Post-Acute COVID-19 Symptoms - At least 1 stressor: $aOR: 2.47$; 95% CI: 1.39 – 4.40; $p = 0.002$ - Mechanical ventilation during index hospitalization: $aOR: 6.37$; 95% CI: 2.16 – 18.78; $p = 0.001$
Funk et al. ⁽⁷⁷⁾	See Appendix 7 Specific age groups, Table 4
Gonzalez-Islas et al. ⁽⁷³⁾	Analysis: Risk factors associated to sarcopenia in post-COVID patients. Method: Multivariate regression (adjusted for risk factors with p-value < 0.20 in the unadjusted model: diabetes, obesity, VIH, COPD, IMV, Duration of IMV, Prolonged length of hospital stay, > 7 d, PaO2/FiO2 ratio and ARDS), and then stepwise selection (p-value ≤ 0.20 as "in" criteria
Population: Moderate to severe COVID-19 hospitalised patients (post discharge)	and p-value ≥ 0.05 as "out" criteria) to generate the final model. These associations were adjusted for sex and, diabetes, VIH, COPD and, PaO2/FiO2 ratio.
n = 530	 Age > 60 years: OR: 4.91; 95% CI: 2.26 – 10.63 Obesity: (OR: 3.73; 95% CI: 1.21 – 11.54) Interaction between prolonged length of hospital stay and IMV: OR: 2.92; 95% CI: 1.21 – 7.02
Heightman et al. ⁽⁴⁷⁾	Analysis: Demographics and post COVID-19 symptoms associated with ability to return to work full time and \geq 75% functional recovery at first assessment of 1,325 individuals referred to the post-COVID- 19 assessment clinic.

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
Those with previous COVID-19 infection assessed at a post-COVID clinic	Method: Multivariable logistic regression (adjusted for age and gender, in all models and all recorded symptoms, represented as presence versus absence, were available for selection in a backwards stepwise selection process with a threshold of p<0.05).
Population is further split into non- hospitalised, hospitalised and post emergency department (ED) Total sample: n = 1,325; non-hospitalised: n = 566; hospitalised: n = 547; post ED: n = 212	Return to work full time (n=1,028): Hospitalised patients - Age: OR: 0.37; 95% CI: 0.35 - 0.99; p = 0.008 - Male gender: OR: 1.88; 95% CI: 0.13 - 0.60; p = 0.001 - Brain Fog: OR: 0.28; 95% CI: 0.13 - 0.60; p = 0.019 - Attrhalgia: OR: 0.28; 95% CI: 0.13 - 0.60; p = 0.019 - Attrhalgia: OR: 0.28; 95% CI: 0.13 - 0.60; p = 0.019 - Attrhalgia: OR: 2.55; 95% CI: 1.01 - 6.42; p = 0.048 - Headache: OR: 0.75; 95% CI: 1.04 - 7.25; p = 0.041 Non-hospitalised - Age: OR: 0.28; 95% CI: 0.96 - 0.99; p = 0.008 - Male gender: OR: 1.20; 95% CI: 0.44 - 1.74; p = 0.319 - Brain Fog: OR: 0.54; 95% CI: 0.96 - 0.99; p = 0.008 - Male gender: OR: 1.20; 95% CI: 0.96 - 0.99; p = 0.008 - Male gender: OR: 1.20; 95% CI: 0.97; p = 0.034 - Fatigue: OR: 0.67; 95% CI: 0.97; p = 0.034 - Fatigue: OR: 0.67; 95% CI: 0.95 - 0.02; p = 0.012 Emergency Dept. - Age: OR: 1.79; 95% CI: 0.13 - 0.48; p = 0.001 - Myalgia: OR: 0.26; 95% CI: 0.39 - 0.013 - Gough: OR: 2.71; 95% CI: 1.04 - 3.10; p = 0.037 - Mategia: OR: 2.32; 95% CI: 1.09 - 0.75; p = 0.013 - Cough: OR: 2.71; 95% CI: 1.09 - 0.75; p = 0.013 - Cough: OR: 2.71; 95% CI: 1.09 - 0.75; p = 0.013 - Cough: OR: 2.71; 95% CI: 1.09 - 0.75; p = 0.013 - Cough: OR: 2.71; 95% CI: 1.09 - 0.75; p = 0.033 2.75% functional recovery (n=1,325) Hospitalised patients - Age: OR: 1.01; 95% CI: 1.00 - 1.03; p = 0.019 - Male gender: OR: 2.75; 95% CI: 1.00 - 1.03; p = 0.001 - Male gender: OR: 2.75; 95% CI: 1.02 - 0.74; p = 0.002 - Aftrhalgia: OR: 3.25; 95% CI: 1.02 - 0.74; p = 0.002 - Fatigue: OR: 0.047; 95% CI: 1.02 - 0.74; p = 0.002 - Fatigue: OR: 0.047; 95% CI: 0.25 - 0.74; p = 0.002 - Fatigue: OR: 0.47; 95% CI: 1.02 - 0.74; p = 0.002 - Fatigue: OR: 0.47; 95% CI: 1.02 - 0.74; p = 0.002 - Fatigue: OR: 0.47; 95% CI: 0.25 - 0.74; p = 0.002 - Fatigue: OR: 0.47; 95% CI: 0.25 - 0.74; p = 0.002 - Fatigue: OR: 0.47; 95% CI: 0.25 - 0.74; p = 0.002 - Fatigue: OR: 0.47; 95% CI: 0.25 - 0.74; p = 0.002 - Fatigue: OR: 0.47; 95% CI: 0.25 - 0.74; p = 0.002 - Fatigue: OR: 0.47; 95% CI: 0.25 - 0.74;

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	<u>Non-hospitalised</u> - Age: OR: 1.02; 95% CI: 1.00 - 1.04; p = 0.018
	- Male gender: OR: 1.44; 95% CI: 0.99 - 2.09; p = 0.058
	- Postural symptoms: OR: 0.08; 95% CI: 0.02 - 0.32; p <0.001 - Fatigue: OR: 0.49; 95% CI: 0.35 - 0.68; p <0.001
	- Myalgia: OR: 0.49; 95% CI: 0.30 - 0.81; $p = 0.005$
	- Brain fog: OR: 0.53; 95% CI: 0.31 - 0.89; p = 0.017
	Emergency Dept.
	- Age: OR: 1.01; 95% CI: 0.99 - 1.04; p = 0.266
	- Male gender: OR: 2.98; 95% CI: 1.78 - 4.98; p <0.001 - Brain fog: OR: 0.29; 95% CI: 0.1 - 0.85; p = 0.025
	- Fatigue: OR: 0.40; 95% CI: 0.24 - 0.67; $p = 0.001$
	Analysis: Risk factors for long COVID, fatigue or muscle weakness, anxiety or depression, and lung diffusion impairment in those with previous COVID-19.
	Method: Multivariable logistic regression (adjusted for age, sex, cigarette smoking (i.e. never-smoker, current smoker, or former smoker), body-
	mass index, education (i.e. college or higher versus high school or lower), self-reported comorbidities (i.e. respiratory disease, hypertension,
Huang et al. ⁽⁵²⁾	diabetes, coronary heart disease, cerebrovascular disease, tumour, chronic kidney disease, and neurological disease), and disease severity.
	Long COVID
Population: Cohort group: COVID-19 hospitalised patients (post discharge)	- Age: OR: 1.08; 95% CI: 1.02 – 1.15; p = 0.0064
hospitalised patients (post discharge)	 Sex (Female): OR: 1.65; 95% CI: 1.41 – 1.92); <0.0001 Cigarette smoking (current or former smoker): OR: 1.26; 95% CI: 1.04 – 1.54; p = 0.019
Control group: community dwelling adults	- Education (college or higher): OR: 1.05; 95% CI: 0.89 – 1.24; $p = 0.54$
without previous COVID-19 infection	- Comorbidity (yes): OR: 1.12; 95% CI: 0.96 – 1.30; p = 0.15
	- Disease Severity (Scale 4): OR: 1.03; 95% CI: 0.88 – 1.21; p = 0.69
Matched cohort group: sub-group of COVID-19 hospitalised patients (post	- Disease Severity (Scale 5-6): OR: 1.4; 95% CI: 1.02 – 1.91; p = 0.036
discharge)	- Corticosteroids (yes): OR: 1.19; 95% CI: 0.99 – 1.43; p = 0.06
Cohort group: $n = 1,192$ patients	 Antiviral (yes): OR: 1.05; 95% CI: 0.91 – 1.21; p = 0.49 Intravenous Immuoglobulins (yes): OR: 0.95; 95% CI: 0.78 - 1.16; p = 0.63
completed all three 6-, 12- and 24-month	$\frac{1110}{110} p = 0.05$
follow-ups	Diffusion Impairment
Control groups $n = 1.127$	- Age: OR: 1.33; 95% CI: 1.14 – 1.54; p = 0.0003
Control group: $n = 1,127$	- Sex (Female): OR: 2.86; 95% CI: 1.92 – 4.26; p <0.0001
Matched cohort group: $n = 1,127$	- Cigarette smoking (current or former smoker): OR: 1.47; 95% CI: 0.90 – 2.38; p = 0.12 - Education (college or higher): OR: 1.64; 95% CI: 1.11 – 2.41; p = 0.013
	- Comorbidity (yes): OR: 1.21; 95% CI: 0.84 – 1.73; $p = 0.31$
	- Disease Severity (Scale 4): $OR: 1.06; 95\%$ CI: $0.67 - 1.67; p = 0.81$
	- Disease Severity (Scale 5-6): OR: 3.14; 95% CI: 1.77 – 5.59; p = 0.0001
	- Corticosteroids (yes): OR: 1.29; 95% CI: 0.84 – 1.98; p = 0.25

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	- Antiviral (yes): OR: 1.09; 95% CI: 0.77 – 1.53; p = 0.64
	- Intravenous Immuoglobulins (yes): OR: 1.00; 95% CI: 0.66 – 1.53; p = 0.99
	Anxiety or Depression
	- Age: OR: 1.03; 95% CI: 0.95 – 1.11; p = 0.47
	 - Sex (Female): OR: 1.94; 95% CI: 1.59 – 2.37; p <0.0001 - Cigarette smoking (current or former smoker): OR: 1.14; 95% CI: 0.88 – 1.48; p = 0.33
	- Education (college or higher): OR: 1.01; 95% CI: 0.82 – 1.25; p = 0.90
	- Comorbidity (yes): OR: 1.04; 95% CI: 0.87 – 1.26; p = 0.66
	- Disease Severity (Scale 4): OR: 1.01; 95% CI: 0.83 – 1.24; p = 0.89
	- Disease Severity (Scale 5-6): OR: 1.54; 95% CI: 1.06 – 2.22; p = 0.022 - Corticosteroids (yes): OR: 1.19; 95% CI: 0.95 – 1.49; p = 0.14
	- Antiviral (yes): OR: 0.92; 95% CI: 0.77 – 1.09; p = 0.31
	- Intravenous Immuoglobulins (yes): OR: 0.82; 95% CI: 0.64 - 1.05; p = 0.12
	Fatigue or Muscle Weakness
	- Age: OR: 1.06; 95% CI: 1.00 – 1.12; p = 0.07
	- Sex (Female): OR: 1.29 (1.10 - 1.52; p = 0.0022
	 Cigarette smoking (current or former smoker): OR: 1.07; 95% CI: 0.87 – 1.32; p = 0.53 Education (college or higher): OR: 1.22; 95% CI: 1.03 – 1.45; p = 0.022
	- Comorbidity (yes): OR: 1.07; 95% CI: $0.91 - 1.25$; $p = 0.42$
	- Disease Severity (Scale 4): OR: 0.98; 95% CI: 0.83 – 1.17; p = 0.84
	- Disease Severity (Scale 5-6): OR: 1.45; 95% CI: 1.06 – 1.98; p = 0.021
	- Corticosteroids (yes): OR: 1.36; 95% CI: 1.12 – 1.64; p = 0.0016 - Antiviral (yes): OR: 1.02; 95% CI: 0.89 – 1.19; p = 0.74
	- Intravenous Immunoglobulins (yes): OR: 0.83 ; 95% CI: $0.67 - 1.01$; p = 0.07
Kildegaard et al. ⁽⁵⁵⁾	See Appendix 7 Age, Table 4
Meza-Torres et al. ⁽⁴⁸⁾	See Appendix 6 General population, Table 4
Norgard et al. ⁽⁷⁵⁾	Analysis: To analyse whether hospitalizations after COVID-19 discharge were different between the exposed and unexposed cohort (those with chronic inflammatory disease and those without)
Population: COVID-19 hospitalised patients	Method: Cox proportional hazard regression (all variables adjusted for sex, age, length of hospital stay, previous hospitalization of the same kind
(post discharge)	and steroid prescription within 6 months prior to COVID-19 hospitalization, bar sequelae of COVID-19 and death which were not adjusted for previous hospitalisation).
Population is further split into those with	
chronic inflammatory disease and those	 Hospitalisation, overall: aHR: 1.06; 95% CI: 0.86 – 1.30 Hospitalization with diseases of the respiratory system (ICD-10: J*): aHR: 1.27; 95% CI: 1.02 – 1.58
without	- Hospitalization with diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
n = 9,665	(ICD-10 D5, D6, D7, D8): aHR: 1.20; 95% CI: 0.73 – 1.99
	- Hospitalization with diseases of the nervous system (ICD-10: G*): aHR: 0.95; 95% CI: 0.67 – 1.35
	- Hospitalization with infection: aHR: 1.55; 95% CI: 1.26 – 1.92

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	- Sequelae of COVID-19 (ICD-10: B948A): aHR: 1.08; 95% CI: 0.79 – 1.49 - Death: aHR: 0.96; 95% CI: 0.71 – 1.29
Ozcan et al. ⁽¹¹⁹⁾ Population: COVID-19 hospitalised patients (post discharge) n = 406	> Death: ank. 0.50, 95% CI: 0.71 - 1.29 Analysis: Risk factors associated with cardiovascular symptoms in patients with COVID-19. Method: Multiple logistic regression. - Age: OR: 1.032; 95% CI: 1.015 - 1.058; p = 0.002 - Diabetes Mellitus: OR: 1.261; 95% CI: 0.628 - 2.224; p = 0.231 - CAD: OR: 1.264; 95% CI: 1.065 - 1.540; p = 0.008 - COPD: OR: 2.998; 95% CI: 1.346 - 5.961; p = 0.003 - Creatinine: OR: 1.316; 95% CI: 0.841 - 2.181; p = 0.652 - Fibrinogen: OR: 2.006; 95% CI: 1.042 - 4.912; p = 0.002 - Ferritin: OR: 1.003; 95% CI: 0.988 - 1.008; p = 0.428 - CRP: OR: 1.085; 95% CI: 0.11 - 1.198; p = 0.010 - Procalsitonin: OR: 1.097; 95% CI: 0.902 - 1.217; p = 0.762 - Albumine: OR: 0.689; 95% CI: 1.281 - 4.731; p = 0.005 - NBM: OR: 0.612; 95% CI: 1.028 - 4.731; p = 0.005 - BNP: OR: 2.412; 95% CI: 0.374 - 0.841; p < 0.001
Pazukhina et al. ⁽⁶⁶⁾	See Appendix 7 Specific age groups, Table 4
Spinicci et al. ⁽³²⁾	Analysis: Risk factors for long COVID persistent symptoms (one or more symptoms). Method: Multivariate logistic regression (forward stepwise).
Population: Those attending a LC outpatient clinic (patients are post-hospital discharge) n = 428	 Sex: Male: 1 (Reference) Female: OR: 1.8; 95% CI: 1.1 - 3.0 Diabetes: OR: 0.4; 95% CI: 0.3 - 0.8 Immunosuppressant drugs: OR: 6.6; 95% CI: 1.5 - 28.5 Advanced oxygen support: OR: 1.9; 95% CI: 1.1 - 3.3
Yoo at al. ⁽⁷⁴⁾	Analysis: Factors associated with PASC (all participants). Method: Multivariate logistic regression (adjusted for prespecified factors: demographics (age, sex, race), clinical characteristics (diabetes, BMI,
Population: COVID-19 hospitalised patients (post discharge) and those with previous COVID-19 diagnosis referred by primary care providers n = 1,038	 transplant status), insurance type, SVI, COVID-19 care venue, and baseline function.) Sex: Female: OR: 1.33; 95% CI: 0.99 - 1.79 Male: 1 (Reference) Age (10 years): OR: 0.93; 95% CI: 0.84 - 1.05 Race:

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
Population is further split into hospitalised (non-ICU), hospitalised (ICU) and outpatient Hospitalised (non-ICU): n = 648/1038, Hospitalised (ICU): n = 152/1038, Outpatient: n = 238/1038	White: 1 (Reference) Black: CO: C73; 95% CI: 0.40 - 1.32 Hispanic or Latino: CR: 0.90; 95% CI: 0.43 - 1.31 Other: OR: 0.86; 95% CI: 0.42 - 1.31 Unknown: OR: 0.80; 95% CI: 0.42 - 1.31 Unknown: OR: 1.02; 95% CI: 0.402 - 1.36 BMI : OR: 1.02; 95% CI: 0.002 - 1.04 Diabetes: OR: 1.03; 95% CI: 0.102 - 1.88 History of Organ Transplant: OR: 0.47; 95% CI: 0.26 - 0.76 Payer type: Commercial: 1 (Reference) Medicad: OR: 0.49; 95% CI: 0.47 - 1.39 Medicad: OR: 0.49; 95% CI: 0.47 - 1.39 Medicad: OR: 0.49; 95% CI: 0.47 - 1.39 Medicad: OR: 0.49; 95% CI: 0.44 - 1.84 Social Vulnerability Index: 0-25%: 1 (Reference) 25-50%: OR: 1.27; 95% CI: 0.65 - 1.90 50-75%: OR: 1.10; 95% CI: 0.73 - 1.68 Unknown: OR: 1.13; 95% CI: 0.73 - 1.68 Unknown: OR: 1.10; 95% CI: 0.73 - 1.61 Unknown: OR: 0.10; 95% CI: 0.50 - 2.21 Inpatient: 1 (Reference) Vaporus: 1 (Reference) Vaporus: 1 (Reference) Moderate: OR: 0.69; 95% CI: 0.50 - 1.29 Carrying Grocentes or Bathing: OR: 1.06; 95% CI: 0.50 - 2.25 Unknown: OR: 0.74; 95% CI: 0.50 - 1.30 Waking 1 Block: OR: 0.80; 95% CI: 0.50 - 1.29 </td

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Black: OR: 0.80; 95% CI: 0.41 - 1.56 Hispanic or Latino: OR: 1.004; 95% CI: 0.67 - 1.52 Asian: OR: 0.78; 95% CI: 0.46 - 1.65 Unknown: OR: 0.59; 95% CI: 0.22 - 1.64 BMI : OR: 1.024; 95% CI: 1.05 - 2.08 History of Organ Transplant: OR: 0.47; 95% CI: 0.27 - 0.84 Payer type: Commercial insurance: 1 (Reference) Medicare: OR: 0.95; 95% CI: 0.3 - 1.45 Medicare: OR: 0.95; 95% CI: 0.33 - 1.45 Medicare: OR: 0.87; 95% CI: 0.39 - 1.91 Social Vulnerability Index: 0-25%: 1 (Reference) 25-50%: OR: 1.09; 95% CI: 0.69 - 1.74 50-75%: OR: 0.89; 95% CI: 0.65 - 1.66 Unknown: OR: 0.87; 95% CI: 0.38 - 1.99 Maximal exertion before COVID-19: Vigorous: 1 (Reference) Moderate: OR: 1.06; 95% CI: 0.51 - 1.45 Carrying Groceries or Bathing: OR: 1.03; 95% CI: 0.47 - 2.42 Unknown: OR: 0.88; 95% CI: 0.51 - 1.45 Making 1 Block: OR: 0.88; 95% CI: 0.53 - 1.45 Carrying Groceries or Bathing: OR: 1.03; 95% CI: 0.47 - 2.42 Unknown: OR: 0.89; 95% CI: 0.53 - 2.46
	 Analysis: factors associated with PASC in non-hospitalised patients Method: Multivariable logistic regression (adjusted for prespecified factors: demographics (age, sex, race), clinical characteristics (diabetes, BMI, transplant status), insurance type, SVI, COVID-19 care venue, and baseline function.) Sex: Female: OR: 1.29; 95% CI: 0.66 - 2.52 Male: 1 (Reference) Age (10 years): OR: 0.85; 95% CI: 0.67 - 1.08 Race: White: 1 (Reference) Black: OR: 0.70; 95% CI: 0.18 - 2.79 Hispanic or Latino: OR: 0.60; 95% CI: 0.27 - 1.32 Asian: OR: 1.11; 95% CI: 0.28 - 4.28 Other: OR: 0.83; 95% CI: 0.23 - 3.08

Author, population and risk analysis sample size (n)	Association analysis type and outcome(s)
	Unknown: OR: 0.45; 95% CI: 0.14 - 1.40
	- BMI: OR: 1.02; 95% CI: 0.97 - 1.07
	- Diabetes: OR: 0.85; 95% CI: 0.39 - 1.85
	- History of Organ Transplant: OR: 0.41; 95% CI: 0.07 - 2.46
	- Payer type:
	Commercial insurance: 1 (Reference)
	Medicare: OR: 0.93; 95% CI: 0.42 - 2.05 Medicaid: OR: 0.41; 95% CI: 0.02 - 11.29
	Other/None: OR: 2.15; 95% CI: 0.29 - 16.06
	- Social Vulnerability Index:
	0-25%: 1 (Reference)
	25-50%: OR: 2.10; 95% CI: 0.88 - 5.03
	50-75%: OR: 1.58; 95% CI: 0.62 - 4.05
	75-100%: OR: 1.43; 95% CI: 0.53 - 3.86
	Unknown: OR: 2.59; 95% CI: 0.56 - 11.91
	- Maximal Exertion before COVID-19:
	Vigorous: 1 (Reference)
	Moderate: OR: 0.69; 95% CI: 0.32 - 1.52
	Walking 1 Block: OR: 1.01; 95% CI: 0.28 - 3.64
	Carrying Groceries or Bathing: OR: 1.68; 95% CI: 0.29 - 9.69
	Unknown: OR: 0.28; 95% CI: 0.009 - 8.42

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