





COVID-19 Living Evidence Synthesis #10 (Version 10.4: 30 March 2022)

Appendix 1: Summary of Included Studies

Note: Newly added studies in blue.

Study ID	First author	Location	Population of interest	Total sample size	Vaccines included in report	Full schedule and/or booster data	Outcomes included in report	Number of follow- up time points	VOC specific data included in report
01-3	Andrews ¹	UK	Persons aged >16 years	52,333,72	BNT162b2 AZD1222 (ChAdOx1) *	Full schedule	Symptomatic cases Hospitalisations Deaths	at most 2	Delta
02-3	Bedston ²	UK	HCWs aged ≥16 years	82,959	BNT162b2	Full schedule	Any cases	3	N/A
03-3	Britton ³	USA	Adults aged ≥20 years	1,634,271	BNT162b2 mRNA-1273 Ad26.CoV2.S *	Full schedule	Symptomatic cases	at most 6	Delta
04-3	Bruxvoort ⁴	USA	KPSC members aged ≥18 years	352,878 unvaccinated and 352,878 vaccinated	mRNA-1273	Full schedule	Any cases	3	Delta
05-3	Buchan ⁵	Canada	Adults aged >18 years	134,435	BNT162b2 Ad26.CoV2.S AZD1222 (ChAdOx1) mRNA-1273	Full schedule	Symptomatic cases	3	Delta Omicron
06-3	Cerqueira- Silva ⁶	Brazil	Adults aged >18 years	30,910	BNT162b2, AZD1222 (ChAdOx1) Ad26.CoV2.S *	Full schedule	Symptomatic cases	1	N/A
07-2	Chemaitelly ⁷	Qatar	Persons aged	494,859	BNT162b2	Full	All cases	At most	Delta

			≥12 years in			schedule		4	
			Qatar						
08-2	De Gier ⁸	Netherlands	Persons aged ≥12 year in a nationwide registry of COVID-19 hospitalizations	15,571	BNT162b2 Ad26.CoV2.S AZD1222 (ChAdOx1) mRNA-1273	Full schedule	Hospitalisations	2	Delta
09-2	El Sahly ⁹	USA	Adults aged ≥18 years with high risk for Covid-19	28,451	mRNA-1273	Full schedule	Symptomatic cases	1	N/A
10-3	Florea ¹⁰	USA	KPSC members aged >18 years	1,854,008	mRNA-1273	Full schedule	All cases Hospitalisations	2	N/A
11-3	Katikireddi ¹¹	Scotland	Adults aged >18 years	2,534,527	AZD1222 (ChAdOx1)	Full schedule	Symptomatic cases	3	N/A
12-3	Lin ¹²	USA	Adults aged ≥18 years in North Carolina	10,600,823	BNT162b2 Ad26.CoV2.S mRNA-1273 *	Full schedule	All cases Hospitalisations Deaths	3	N/A
13-3	Lytras ¹³	Greece	Persons aged ≥15 years	9,200,000	BNT162b2 Ad26.CoV2.S AZD1222 (ChAdOx1) mRNA-1273 *	Full schedule	Deaths	1	N/A
14-3	Machado ¹⁴	Portugal	Adults aged ≥65 years	471,439,909	BNT162b2 mRNA-1273	Full schedule	Symptomatic cases Hospitalisations Deaths	1	N/A
15-3	Nordstrom ¹⁵	Sweden	Adults aged >18 years in Sweden	1,684,958	BNT162b2 AZD1222 (ChAdOx1) mRNA-1273*	Full schedule	All cases	At most 3	N/A
16-3	Petras ¹⁶	Prague	Hospital staff aged ≥18 years	11,443	BNT162b2 Ad26.CoV2.S	Full schedule	All cases	1	N/A

					AZD1222 (ChAdOx1) mRNA-1273				
17-3	Poukka ¹⁷	Finland	HCWs aged 16- 69 years	427,905	BNT162b2 AZD1222 (ChAdOx1) mRNA-1273	Full schedule	All cases Hospitalisations [§]	1	Delta
18-4	Robles- Fontan ¹⁸	Puerto Rico	Persons aged ≥12 years	88,044	BNT162b2 Ad26.CoV2.S mRNA-1273*	Full schedule	All cases Hospitalisations Deaths	1	N/A
19-3	Rosenberg ¹⁹	USA	Adults aged ≥18 years in New York State	8,690,825	BNT162b2 mRNA-1273 AZD1222 (ChAdOx1) *	Full schedule	All cases Hospitalisations	1	N/A
20-2	Skowronski ²⁰	Canada	Adults aged >18 years in BC and QC	1,235,447 (380,532 BC; 854,915 QC)	BNT162b2 AZD1222 (ChAdOx1) mRNA-1273*	Full schedule	All cases Hospitalisations	At most 3	Delta
21-3	Tartof ²¹	USA	KPSC members aged >18 years	3,436,957	BNT162b2	Full schedule	All cases Hospitalisations	4	N/A
22-1	Thomas ²²	Global	Persons aged ≥16 years	44,047	BNT162b2	Full schedule	All cases	1	N/A
23-1	Thompson ²³	USA	Adults aged ≥50 years	41,552 hospitalisations + 21,522 ED visits from 187 hospitals	BNT162b2 Ad26.CoV2.S mRNA-1273	Full schedule	Hospitalisations	1	N/A
24-3#	Young-Xu ²⁴	USA	Male veterans aged ≥65 years	71,190	BNT162b2 mRNA-1273	Full schedule	All cases	At most 5	Delta
25-3	Ferdinands ²⁵	USA	Adults aged ≥18 years	241,204	BNT162b2 mRNA-1273	Full schedule and booster	Hospitalisations	2	Delta Omicron
26-3	Hall ²⁶	UK	Adult HCWs aged ≥18 years	35,768	BNT162b2 Ad26.CoV2.S	Full schedule	All cases	2	N/A

					AZD1222 (ChAdOx1) mRNA-1273				
27-3	Chemaitelly ²⁷	Qatar	Persons aged ≥12 years in Qatar	84,884	BNT162b2	Full schedule and booster	Symptomatic cases	At most 9	Omicron
28-4	Andrews ²⁸	England	Adults aged ≥18 years	2,663,549	BNT162b2 AZD1222(ChAdOx1) mRNA-1273*	Full schedule	Symptomatic cases	2	Delta Omicron
29-4	Castillo ²⁹	France	Adults aged ≥50 years	1,296,351	BNT162b2 Ad26.CoV2.S AZD1222 (ChAdOx1) mRNA-1273	Full schedule	Symptomatic cases Hospitalisations	3	Delta
30-4	Syed ³⁰	Qatar	Persons aged ≥12 years	1,241,501	BNT162b2 mRNA-1273*	Full schedule	All cases	2	N/A

Legend: BC: British Columbia; HCWs: healthcare workers; PCR: Polymerase chain reaction test; QC: Quebec; RCT: randomized controlled trial; USA: United States of America; UK: United Kingdom; HCW: healthcare workers; KPSC: Kaiser permanente Southern California

*Data are reported separately by vaccine.

[#]Deleted due to critical risk of bias

\$Excluded from meta-analyses due to a lack of reporting CIs

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Appendix 2: Details of meta-analytic procedure

Reports were included for meta-analytic review when they met all the following criteria:

- 1. Reported vaccine effectiveness (VE), risk ratio (RR), odds risk (OR) or hazard ratio (HR) data, along with corresponding confidence intervals (CIs)
- 2. Provided the above with regards to (a) cases, (b) hospitalisations, or (c) deaths due to COVID-19
- 3. Reported data for baseline (0-42 days since second dose of vaccine) and for at least one follow-up time point (\geq 112 days since complete primary series of a vaccine or \geq 84 days since an additional dose of the vaccine)

All estimates, and their corresponding CIs, were converted to risk ratios (RRs). RRs were then log-transformed for use in meta-analytic models, and the CIs were used to derive a standard error for each effect size.

Random effects models were used to calculate pooled effects, as we anticipated meaningful heterogeneity across studies and group comparisons (e.g., follow-up time points). When data was available, subgroup analyses were computed to examine how patterns of findings varied according to:

- 1. Type of vaccine
 - a) Overall (i.e., any vaccine)
 - b) mRNA vaccines
 - i) Moderna (mRNA-1273)
 - ii) Pfizer-BioNTech (BNT162b2)
 - c) Any adenovirus
 - i) AstraZeneca/COVISHIELD (AZD1222/ChAdOx1)
 - ii) Janssen (Johnson & Johnson: Ad26.COV2.S)
- 2. Variants of Concern (VOC):
 - a) Any variant
 - b) Delta
 - c) Omicron

Analyses were performed using the *metafor* package in R (version 4.1.2), and an independent analyst replicated analyses using Comprehensive Meta Analysis (CMA) version 3. Models were computed using the DerSimonian and Laird procedure.

Imputations used in order to compute meta-analytic models

In order to be included in meta-analytic models, each effect size extracted from reports needed to be accompanied by a corresponding standard error (SE). The standard error was always derived from the confidence intervals provided. However, several values were not usable for computation and needed adjustment. Similarly, a few VE point-estimates required adjustments to compute models. The table that follows lists each of the adjustments we applied, along with our rationale.

Problem Case	Explanation and Solution
1. Provided CIs were asymmetric (when computed as log RRs).	Because standard errors (SEs) were derived from CIs, asymmetric CIs would produce two competing standard errors (SEs). To resolve this, we calculated the SE implied by both the upper and lower CI, and selected the larger of the 2 SEs for use in models. This represents the more conservative approach (assuming more, rather than less, error in estimates extracted).
2. VE estimates were negative in magnitude (or, equivalently, RRs were >1.0 in magnitude).	If the original metric was an RR, OR, or HR, this was not a problem, and the estimate could be used directly in analyses. When the original metric was a VE, we needed to take into account the calculating VEs typically assumes a positive number, where:

Applies to point estimates and CIs.	VE = (1-RR)*100 When an RR is less than 1, the plausible range of VE is 0% to 100%. If we extend the logic of VE to the negative range, then we could assume that VE equal to -100% represents non-vaccination offering the highest protection. From this extension, VE can have a range of -100% to 100%. However, VE is negative, its relation to RR would need to be adjusted as the RR metric is unbounded in the positive range (ranges 0 to infinity). Consequently, when VE is negative (or RR>1), we used the following formulas to convert between the two metrics. A negative VE is assumed to reflect the following formula: $VE = (-1 + 1/RR)*100$ RR = 1 / (VE/100 +1)
3. VE point estimate was 100%, or RR point estimate was 0.	Both these cases make it impossible to calculate a log-transformed RR (as the transformation cannot be applied to a value of zero). We therefore imputed VE estimates of 100% with a VE of 99.5% (equivalent RR would be .005). The choice of 99.5% stemmed from a recognition that VE is often reported without decimals, and that a value of 99.5% would be likely to be rounded up. This decision is more conservative than using a value between 99.5 and 100).
4. Upper CI was equal to VE = 100% or RR = 0.	Causes a similar problem as when the point estimate is $VE = 100\%$. If a lower CI was available, we used that CI instead to derive the SE. Otherwise, we imputed a value of $VE = 99.9\%$ (or RR = .001). This allowed us to derive SEs while recognizing that the value may approach 100%.
5. Lower CI is VE = 100 or RR = 0.	Causes a similar problem as when the point estimate is VE = 100%. If an upper CI was available, we used that CI instead to derive the SE. Otherwise, we imputed a value of VE = 97.5% (or RR = .025). This allowed us to derive SEs while recognizing that the value may approach 100%. The values of 99.9% for the upper CI and 97.5% for the lower CI were chosen as to be symmetrical (in the log RR scale) around the value of VE = 100%.
6. A study cohort had a point estimate for VE available, but no CIs.	No SE could be computed for such effects, and they were removed from the meta-analytic models. We further flagged these cases to comment on and acknowledge within our report.
7. A study cohort had a point estimate, but only one CI.	In such cases, we used the SE suggested by the CI that was provided.
8. A CI was reported as -/+ Infinity	We treated "infinity" as a missing value. We reasoned such estimates would have large enough errors as to be too imprecise to warrant including within our models.
9. One of the CIs was equal in value to the point estimate.	When a CI is equal in magnitude to the point estimate, the implied standard error (SE) is effectively zero. SEs of zero cannot be used in analyses, so we used the other (provided) CI to derive an SE. This rule can be seen as a specific case of rule #1.
10. Both CIs were equal in magnitude to the point estimate.	When both CIs areequal in magnitude to the point estimate, both imply a standard error (SE) of zero, which cannot be used in meta-analytic models. Since SEs of zero are not usually plausible, such occurrences were taken to be

	artifacts of rounding estimates in reporting when SE was very low. Because low SEs are particularly valuable in meta-analytic reviews, we sought to retain these studies while accounting for this. Our solution was to add a 5 beyond the last decimal of the upper CI reported, and subtract a 5 beyond the last decimal of the lower CI reported. For example: $[CI = 15.5 - 15.5] \rightarrow [CI = 15.45 - 15.55]$ $[CI = 15 - 15] \rightarrow [CI = 14.5 - 15.5]$ This rule was derived assuming that these cases derived from rounding error (i.e., rounding the imputed values to the right to have one fewer decimal point would lead to the values on the left). This rule allowed us to retain estimates for meta-analytic modeling while accounting for the fact that these studies would have small SE values. Since 2 CIs were imputed, the meta-analysis used the whichever produced the larger SE as per rule #1.
11. The point estimate was outside the range of the CI.	This was assumed to be an error in reporting. We thus operated under the assumption that the point-estimate was accurate and used the CI that had a plausible value to derive SEs (e.g., the upper CI if it was higher than the point estimate, or the lower CI if it was below the point estimate).

Appendix 3: Definitions and glossary

Full vaccine series: Receipt of one of the following COVID-19 vaccines authorised by Health Canada:

- Two dose of AstraZeneca/COVISHIELD (AZD1222/ChAdOx1), Moderna (mRNA-1273), or Pfizer-BioNTech (BNT162b2);
- One dose of Janssen (Johnson & Johnson: Ad26.COV2.S); or
- A combination of the above

Fully vaccinated: A person who is at least 14 days post having received one of the following vaccine schedules:

- the full series of a COVID-19 vaccine authorized by Health Canada (see above); or
- the full series of the above vaccines plus an additional dose in immunocompromised individuals

Additional dose: A person who has received:

- a full series of a COVID-19 vaccine authorised by Health Canada (see above) plus an additional dose of a COVID-19 vaccine authorised by Health Canada; or
- the full series of the above vaccines plus two additional doses in immunocompromised individuals

Confirmed infection: A person with confirmation of infection with SARS-CoV-2 documented by the detection of at least 1 specific gene target by a validated laboratory-based nucleic acid amplification test (NAAT) assay (e.g. realtime PCR or nucleic acid sequencing) performed at a community, hospital, or reference laboratory (the National Microbiology Laboratory or a provincial public health laboratory).(2)

Symptomatic illness: A person with confirmation of SARS-CoV-2 infection, presenting symptoms that vary in type, frequency, and severity. The most common symptoms include fever, chills, new or worsening cough, fatigue, headache, and gastrointestinal symptoms.(3)

Asymptomatic infection: A person with confirmation of SARS-CoV-2 infection but with no presentation of symptoms in the course of the disease.

Hospitalisation due to COVID-19: Inpatient admission to a hospital and/or ICU unit, associated with laboratory-confirmed SARS-CoV-2 infection.

Death due to COVID-19: Death resulting from a clinically compatible illness in a probable or confirmed COVID-19 case, with no presence of clear alternative causes unrelated to COVID-19 (e.g., trauma, poisoning, drug overdose).

Variants of concern (VOC): A SARS-CoV-2 variant is considered a VOC in Canada based on a set of criteria including increased transmissibility or detrimental change in COVID-19 epidemiology, increased virulence, decreased effectiveness of vaccines, and so on. As of August 05, 2021, Canada has designated the following SARS-CoV-2 variants as VOCs: Alpha (B.1.1.7), Beta (B.1.351, B.1.351.1, B.1.351.2, B.1.351.3, B.1.351.4), Gamma (P.1, P.1.1, P.1.2), Delta (B.1.617.2, AY.1, AY.2, AY.3, AY.3.1), and Omicron (B.1.1.529, BA.2).

Vaccine effectiveness (VE): A measure of how well a vaccine protects people from getting the outcome of interest in real-world practice (For example: VE of 92% against infection means that 92% of people will be protected from becoming infected with COVID and 8% of people will still be at risk of becoming infected with COVID). In the context of the current report, we have utilised the term vaccine effectiveness to cover all studies. However, we are aware that the studies that have been included range from efficacy through to effectiveness studies. We decided to use this terminology as it is consistent with how most evidence synthesis products describe these studies. To be consistent with this, in the French summary we have utilised the term efficacité, and it is noted that in French there is no distinction between the translations of efficacy and effectiveness.

AZ: AstraZeneca

CIs: Confidence Intervals

Delta: variant of concern B.1.617.2 HCW: Healthcare workers LTC: Long-term care LTCF: Long-term care facility MOD: Moderna Obs: observational study Omicron: variant of concern B.1.1.529 OR: odds ratio PF: Pfizer RCT: Randomized controlled trial UK: United Kingdom USA: United States of America VOI: variant of interest WHO: World Health Organization

Appendix 4: Critical appraisal process

We appraised the quality of the individual studies using an adapted version of ROBINS-I. This tool classifies the Risk of Bias of a study as **Low, Moderate, Serious, Critical, or No Information**. *Low Risk of Bias indicates High Quality, and Critical Risk of Bias indicates Very Low (insufficient) Quality*. ROBINS-I appraises 7 bias domains and judges each study against an ideal reference randomised controlled trial. To improve the utility of ROBINS-I for assessing studies reporting vaccine effectiveness, we have focused on study characteristics that introduce bias as reported in the vaccine literature (see WHO. Evaluation of COVID-19 vaccine effectiveness. Interim Guidance. 17 March 2021). An overall judgement of "serious" or "critical" is given when the study is judged to be at critical risk of bias in at least one domain. Three or more serious risk of bias domains is given an overall risk of bias of critical.

Appendix 5: Data-extraction template

Study details	
Source	First author of study and year of publication
Location	Country data was collected in
COI	If conflicts of interest were reported
Funding	public or industry
Study type	RCT/cohort/data-linkage/test-negative/case-control/other
Publication format	Peer-reviewed / pre-print / report
Population(s)	general public/LTC/Households/HCW/Other
Total (N)	Total study sample
Age	Description of age of the population
Female	number or %
Definition of cases	How were COVID-19 cases defined
Definition of COVID hospitalisations	How were COVID-19 hospitalisations defined
Definition of COVID deaths	How were COVID-19 deaths defined
Vaccines	Details of what vaccines were included in the study
Booster dose	Did the study report on booster doses (Y/N)
Comparator	What comparison group was used to generate VE
Study calendar time	When was the study actually conducted
Outcomes	
Variant sub-group	Was a specific variant being studied (any, delta, or omicron)
Was VOC sequenced	Yes or no, only applicable if looking at a variant
Outcome	Cases, hospitalisations, or deaths
Specific vaccine	If individual vaccine data is reported
Vaccine class	mRNA, adenovirus, or mixed (reporting mRNA, adenovirus, and/or mixed doses)
Effect measure used	VE, RR, or other
Level of CIs	95% or 99%
Time window	Time since second dose administered
VE outcome	Reported point estimate
Lower CI	Reported lower CI
Upper CI	Reported upper CI
Adjustments	What variables were used to adjust for in analyses
Comments	

Appendix 6: Excluded Studies

a) Studies excluded from the current update:

Authors	Title	Journal	Reason for exclusion
Abu-Raddad et al.	Effectiveness of BNT162b2 and mRNA-1273 COVID-19 boosters against SARS-CoV-2 Omicron (B.1.1.529) infection in Qatar	medRxiv	wrong study duration
Abu-Raddad et al.	Effect of mRNA Vaccine Boosters against SARS- CoV-2 Omicron Infection in Qatar	The New England journal of medicine	wrong study duration
AlRuthia et al.	Demographic Characteristics and Status of Vaccinated Individuals with a History of COVID- 19 Infection Pre- or Post-Vaccination: A Descriptive Study of a Nationally Representative Sample in Saudi Arabia	Vaccines	wrong comparator
Aslam et al.	Coronavirus disease 2019 vaccination is protective of clinical disease in solid organ transplant recipients	Transplant Infectious Disease	wrong outcome
Baum et al.	High vaccine effectiveness against severe Covid-19 in the elderly in Finland before and after the emergence of Omicron		wrong study duration
Berry et al.	Audit of vaccination status of health-care workers who tested positive for SARS-CoV-2	Journal of clinical virology plus	wrong outcome
Botton et al.	Effectiveness of Ad26.COV2.S Vaccine vs BNT162b2 Vaccine for COVID-19 Hospitalizations	JAMA network open	wrong comparator
Britton et al.	Association of COVID-19 Vaccination with Symptomatic SARS-CoV-2 Infection by Time since Vaccination and Delta Variant Predominance	JAMA - Journal of the American Medical Association	duplicated
Brunner et al.	Comparison of Antibody Response Durability of mRNA-1273, BNT162b2, and Ad26.COV2.S SARS-CoV-2 Vaccines in Healthcare Workers	medRxiv	wrong outcome
Buchan et al.	Effectiveness of COVID-19 vaccines against Omicron or Delta symptomatic infection and severe outcomes	medRxiv	duplicated
Butt et al.	Vaccine Effectiveness of Three vs. Two Doses of SARS-CoV-2 mRNA Vaccines in a High Risk National Population	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration
Callaghan et al.	Real-world Effectiveness of the Pfizer-BioNTech BNT162b2 and Oxford-AstraZeneca ChAdOx1-S Vaccines Against SARS-CoV-2 in Solid Organ and Islet Transplant Recipients	Transplantation	wrong outcome
Chemaitelly et al.	Duration of mRNA vaccine protection against SARS-CoV-2 Omicron BA.1 and BA.2 subvariants in Qatar		wrong study duration
Del Cura-Bilbao et al.	Effectiveness of 3 COVID-19 Vaccines in Preventing SARS-CoV-2 Infections, January-May 2021, Aragon, Spain	Emerging infectious diseases	wrong outcome
Feng et al.	Modelling COVID-19 Vaccine Breakthrough Infections in Highly Vaccinated Israel - the effects of waning immunity and third vaccination dose	medRxiv	wrong study design

Fisman et al.	Timing of Breakthrough Infection Risk After Vaccination Against SARS-CoV-2	medRxiv	wrong comparator
Gaio et al.	COVID-19 vaccine effectiveness among healthcare workers in Portugal: results from a hospital-based cohort study, December 2020 to November 2021	medRxiv	wrong comparator
Hardt et al.	Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19	medRxiv	wrong comparator
Junghans	Technical note: The calculated real world BNT162b2 vaccine efficacy was 88% when accounting for asymptomatic cases	Human vaccines & immunotherapeutics	wrong population
Khan et al.	Safety and effectiveness of the BNT162B2 mRNA COVID-19 vaccine in a nationwide cohort of patients with inflammatory bowel disease	Inflammatory Bowel Diseases	Full-text unavailable
Korves et al.	Relative effectiveness of booster vs. 2-dose mRNA Covid-19 vaccination in the Veterans Health Administration: Self-controlled risk interval analysis		wrong study duration
Kridin et al.	Determinants and Effectiveness of BNT162b2 mRNA Vaccination Among Patients with Atopic Dermatitis: A Population-Based Study	American Journal of Clinical Dermatology	wrong outcome
Lauring et al.	Clinical severity of, and effectiveness of mRNA vaccines against, covid-19 from omicron, delta, and alpha SARS-CoV-2 variants in the United States: prospective observational study	BMJ (Clinical research ed.)	wrong outcome
Layan et al.	Impact of BNT162b2 vaccination and isolation on SARS-CoV-2 transmission in Israeli households: an observational study	American journal of epidemiology	wrong outcome
Lev Zion et al.	COVID-19 vaccine effectiveness in inflammatory bowel disease patients on tumor-necrosis factor inhibitors: Real world data from a massvaccination campaign	Journal of Crohn's and Colitis	Full-text unavailable
Lytras et al.	Comparative effectiveness of COVID-19 vaccination against death and severe disease in an ongoing nationwide mass vaccination campaign	medRxiv	duplicated
Maeda et al.	Effectiveness of mRNA COVID-19 vaccines against symptomatic SARS-CoV-2 infections during the Delta variant epidemic in Japan: Vaccine Effectiveness Real-time Surveillance for SARS-CoV-2 (VERSUS)	medRxiv	wrong comparator
McConeghy et al.	Effectiveness of a SARS-CoV-2 mRNA vaccine booster dose for prevention of infection, hospitalization or death in two nation-wide nursing home systems	medRxiv	wrong study duration
McKeigue et al.	Vaccine efficacy against severe COVID-19 in relation to delta variant (B.1.617.2) and time since second dose in patients in Scotland (REACT- SCOT): a case-control study	The Lancet. Respiratory medicine	wrong outcome
Mirahmadizadeh et al.	"Effectiveness of COVID-19 Vaccines in preventing Infectiousness, Hospitalization and Mortality: A Historical Cohort Study Using Iranian Registration Data During Vaccination program"	medRxiv	wrong outcome

Mukim et al.	Covid-19 Vaccines available in India	Combinatorial chemistry & high throughput screening	Full-text unavailable
Nyberg et al.	Comparative analysis of the risks of hospitalisation and death associated with SARS-CoV-2 omicron (B.1.1.529) and delta (B.1.617.2) variants in England: a cohort study	Lancet (London, England)	wrong outcome
Oliveira et al.	Assessment of Clinical Effectiveness of BNT162b2 COVID-19 Vaccine in US Adolescents	JAMA network open	wrong population
Oliver et al.	Vaccine Effectiveness Against SARS-CoV-2 Infection and Severe Outcomes in the Maintenance Dialysis Population in Ontario, Canada	Journal of the American Society of Nephrology : JASN	wrong study duration
Olson et al.	Effectiveness of BNT162B2 Vaccine against Critical Covid-19 in Adolescents	New England Journal of Medicine	wrong population
Patalon et al.	Waning Effectiveness of the Third Dose of the BNT162b2 mRNA COVID-19 Vaccine		wrong comparator
Perry et al.	COVID-19 vaccine uptake and effectiveness in adults aged 50 years and older in Wales UK: a 1.2m population data-linkage cohort approach	Human Vaccines and Immunotherapeutics	wrong study duration
Polinski et al.	Durability of the Single-Dose Ad26.COV2.S Vaccine in the Prevention of COVID-19 Infections and Hospitalizations in the US Before and During the Delta Variant Surge	JAMA network open	wrong outcome
Porru et al.	Post-Vaccination SARS-CoV-2 Infections among Health Workers at the University Hospital of Verona, Italy: A Retrospective Cohort Survey	Vaccines	wrong outcome
Ranzani et al.	Vaccine effectiveness of ChAdOx1 nCoV-19 against COVID-19 in a socially vulnerable community in Rio de Janeiro, Brazil: a test- negative design study	Clinical Microbiology and Infection	wrong study duration
Rearte et al.	Effectiveness of rAd26-rAd5, ChAdOx1 nCoV-19, and BBIBP-CorV vaccines for risk of infection with SARS-CoV-2 and death due to COVID-19 in people older than 60 years in Argentina: a test- negative, case-control, and retrospective longitudinal study	Lancet (London, England)	wrong outcome
Reynolds et al.	COVID-19 vaccination breakthrough infections in a real-world setting: Using community reporters to evaluate vaccine effectiveness	medRxiv	wrong study design
Roberts et al.	Estimating COVID-19 Vaccination Effectiveness Using Electronic Health Records of an Academic Medical Center in Michigan	medRxiv	wrong study duration
Sadoff et al.	Final Analysis of Efficacy and Safety of Single- Dose Ad26.COV2.S	New England Journal of Medicine	wrong outcome
Salo et al.	The indirect effect of mRNA-based COVID-19 vaccination on healthcare workers' unvaccinated household members	Nature Communications	wrong outcome
Shen et al.	Efficacy of COVID-19 vaccines in patients taking immunosuppressants	Annals of the rheumatic diseases	wrong outcome
Shrotri et al.	Duration of vaccine effectiveness against SARS- CoV2 infection, hospitalisation, and death in residents and staff of Long-Term Care Facilities		wrong outcome

	(VIVALDI): a prospective cohort study, England, Dec 2020-Dec 2021		
Sobieszczyk et al.	Asymptomatic Infection and Duration of Viral Shedding in Symptomatic Breakthrough Infections in a Phase 3 Study of AZD1222 (ChAdOx1 nCoV-19)	Open Forum Infectious Diseases	conference abstract
Spensley et al.	Comparison of vaccine effectiveness against the Omicron (B.1.1.529) variant in patients receiving haemodialysis	medRxiv	wrong outcome
Sritipsukho et al.	Comparing real-life effectiveness of various COVID-19 vaccine regimens during the delta variant-dominant pandemic: a test-negative case- control study	Emerging Microbes and Infections	wrong outcome
Suah et al.	Waning COVID-19 Vaccine Effectiveness for BNT162b2 and CoronaVac in Malaysia: An Observational Study	medRxiv	wrong outcome
Sultan et al.	Distinct Vaccine Efficacy Rates Among Health Care Workers During a COVID-19 Outbreak in Jordan	medRxiv	wrong outcome
Tai et al.	Booster protection against Omicron infection in a highly vaccinated cohort		wrong study duration
Tseng et al.	Effectiveness of mRNA-1273 against SARS-CoV- 2 omicron and delta variants	medRxiv	wrong comparator
Vahidy et al.	Real-world Effectiveness of COVID-19 mRNA Vaccines against Hospitalizations and Deaths in a Retrospective Cohort	Open Forum Infectious Diseases	conference abstract
Vivaldi et al.	Risk factors for SARS-CoV-2 infection after primary vaccination with ChAdOx1 nCoV-19 or BNT1262b2 and after booster vaccination with BNT1262b2 or mRNA-1273: a population-based cohort study (COVIDENCE UK)		wrong outcome
Wright et al.	Comparative vaccine effectiveness against severe COVID-19 over time in US hospital administrative data: a case-control study	The Lancet. Respiratory medicine	wrong comparator
Young Xu et al.	Effectiveness of mRNA COVID-19 Booster Vaccines against Omicron and Delta Variants among US Veterans		wrong study duration
Zheutlin et al.	Durability of Protection against COVID-19 Breakthrough Infections and Severe Disease by Vaccines in the United States	medRxiv	wrong comparator

b) Studies excluded from the updates 1-3:

Authors	Title	Journal	Reason for exclusion
Abbasi	COVID-19 mRNA Vaccines Blunt Breakthrough Infection Severity	JAMA - Journal of the American Medical Association	wrong intervention
Abbasi	Oldest Adults Need 2 mRNA Vaccine Doses to Neutralize SARS-CoV-2	JAMA - Journal of the American Medical Association	wrong publication type
Abdool Karim & de Oliveira	New SARS-CoV-2 variants - Clinical, public health, and vaccine implications	New England Journal of Medicine	wrong intervention

Absalon et al.	Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine. Reply	The New England Iournal of Medicine	wrong intervention
Abu Raddad et al.	Effectiveness of BNT162b2 and mRNA-1273 COVID-19 boosters against SARS-CoV-2 Omicron (B.1.1.529) infection in Qatar	medRxiv	wrong outcome
Abu Raddad et al.	Waning of mRNA-1273 vaccine effectiveness against SARS-CoV-2 infection in Qatar		delayed exclusion - this is a letter of correspondence that refers to an original study
Abu Raddad et al.	Effect of vaccination and of prior infection on infectiousness of vaccine breakthrough infections and reinfections	Preprint - medRxiv	wrong outcome
Abu Raddad et al.	Protection afforded by the BNT162b2 and mRNA-1273 COVID-19 vaccines in fully vaccinated cohorts with and without prior infection	Preprint - medRxiv	wrong intervention
Abu Raddad et al.	Protection offered by mRNA-1273 versus BNT162b2 vaccines against SARS-CoV-2 infection and severe COVID-19 in Qatar	medRxiv	wrong comparator
Abu-Raddad et al.	Protection offered by mRNA-1273 versus BNT162b2 vaccines against SARS-CoV-2 infection and severe COVID-19 in Qatar	medRxiv	wrong comparator
Abu-Raddad et	Effectiveness of the BNT162b2 Covid-19 Vaccine	The New England	wrong
al.	against the B.1.1.7 and B.1.351 Variants	Journal of Medicine	intervention
Abu-Raddad et al.	Pfizer-BioNTech mRNA BNT162b2 Covid-19 vaccine protection against variants of concern after one versus two doses	Journal of Travel Medicine	wrong intervention
Abu-Sinni et al.	COVID-19 vaccine - Long term immune decline and breakthrough infections	Vaccine	wrong comparator
Ackland et al.	Evolution of case fatality rates in the second wave of coronavirus in England: effects of false positives, a Variant of Concern and vaccination	Preprint - medRxiv	wrong intervention
Adhikari & Spong	COVID-19 Vaccination in Pregnant and Lactating Women	JAMA - Journal of the American Medical Association	wrong study design
Adibi et al.	Continuing COVID-19 Vaccination of Front-Line Workers in British Columbia with the AstraZeneca Vaccine: Benefits in the Face of Increased Risk for Prothrombotic Thrombocytopenia	Preprint - medRxiv	wrong outcome
Al Qahtani et al.	Morbidity and mortality from COVID-19 post- vaccination breakthrough infections in association with vaccines and the emergence of variants in Bahrain	Preprint - Research Square	wrong intervention
Alali et al.	Effectiveness of BNT162b2 and ChAdOx1 Vaccines against Symptomatic COVID-19 among Healthcare Workers in Kuwait: A Retrospective Cohort Study	Healthcare (Basel, Switzerland)	wrong outcome
Alali et al.	Effectiveness of BNT162b2 and ChAdOx1 vaccines against symptomatic COVID-19 among Healthcare Workers in Kuwait: A retrospective cohort study	Preprint - medRxiv	wrong intervention

Albach et al.	Successful BNT162b2 booster vaccinations in a patient with rheumatoid arthritis and initially negative antibody response	Annals of the Rheumatic Diseases	wrong study design
Aldridge et al.	Waning of SARS-CoV-2 antibodies targeting the Spike protein in individuals post second dose of ChAdOx1 and BNT162b2 COVID-19 vaccines and risk of breakthrough infections: analysis of the Virus Watch community cohort	medRxiv	wrong comparator
Alencar et al.	High Effectiveness of SARS-CoV-2 Vaccines in Reducing COVID-19-Related Deaths in over 75- Year-Olds, Ceara State, Brazil	Tropical Medicine and Infectious Disease	wrong intervention
Alholm et al.	SARS-CoV-2 vaccination in gynecologic oncology	European Journal of Gynaecological Oncology	wrong publication type
Ali et al.	Evaluation of mRNA-1273 SARS-CoV-2 Vaccine in Adolescents	The New England Journal of Medicine	wrong intervention
Alkhafaji et al.	The Impact of COVID-19 Vaccine on Rate of Hospitalization and Outcome of COVID-19 Infection in a Single Center in the Eastern Province of Saudi Arabia	Research Square	wrong population
Allen et al.	Comparative transmission of SARS-CoV-2 Omicron (B.1.1.529) and Delta (B.1.617.2) variants and the impact of vaccination: national cohort study, England	medRxiv	wrong study duration
Alroy-Preis et al.	Impact and effectiveness of mRNA BNT162b2 vaccine against SARS-CoV-2 infections and COVID-19 cases, hospitalisations, and deaths following a nationwide vaccination campaign in Israel: an observational study using national surveillance data	The Lancet	wrong intervention
Altmann et al.	Immunity to SARS-CoV-2 variants of concern	Science	wrong publication type
Amatya et al.	COVID-19 in fully vaccinated Everest trekkers in Nepal	Journal of Travel Medicine	wrong study design
Amirthalingam et al.	Higher serological responses and increased vaccine effectiveness demonstrate the value of extended vaccine schedules in combating COVID-19 in England	Preprint - medRxiv	wrong intervention
Amit et al.	COVID-19 vaccine efficacy data: solid enough to delay second dose? - Authors' reply	The Lancet	wrong study design
Amit et al.	Early rate reductions of SARS-CoV-2 infection and COVID-19 in BNT162b2 vaccine recipients	The Lancet	wrong intervention
Amodio et al.	Effectiveness of mRNA COVID-19 vaccination against SARS-CoV-2 infection and COVID-19 disease in Sicily over an eight-month period	SSRN	delayed exclusion - unvaccinated group include single-dose and non mRNA vaccines
Andeweg et al.	Protection of COVID-19 vaccination and previous infection against Omicron BA.1 and Delta SARS- CoV-2 infections, the Netherlands, 22 November 2021- 19 January 2022	medRxiv	wrong study duration

Andrejko et al.	Prevention of COVID-19 by mRNA-based vaccines within the general population of California	Clinical Infectious Diseases	wrong intervention
Andrejko et al.	Early evidence of COVID-19 vaccine effectiveness within the general population of California	Hand search; Preprint - medRxiv	wrong
Andrews et al.	Effectiveness of COVID-19 vaccines against the Omicron (B.1.1.529) variant of concern	medRxiv	duplicated
Andrews et al.	Effectiveness of COVID-19 vaccines against the Omicron (B.1.1.529) variant of concern	medRxiv	wrong comparator
Andrews et al.	Effectiveness of COVID-19 booster vaccines against covid-19 related symptoms, hospitalisation and death in England	Nature medicine	wrong comparator
Angel et al.	Association between Vaccination with BNT162b2 and Incidence of Symptomatic and Asymptomatic SARS-CoV-2 Infections among Health Care Workers	JAMA - Journal of the American Medical Association	wrong intervention
Anjan et al.	Breakthrough COVID-19 infections after mRNA vaccination in Solid Organ Transplant Recipients in Miami, Florida	Transplantation	wrong intervention
Anonymous	Exam 2: Effectiveness of SARS-CoV-2 vaccination in a Veterans Affairs Cohort of Inflammatory Bowel Disease Patients with Diverse Exposure to Immunosuppressive Medications	Gastroenterology	wrong publication type
Aran	Estimating real-world COVID-19 vaccine effectiveness in Israel	Preprint - medRxiv	wrong intervention
Arbel et al.	How many lives do COVID vaccines save? Evidence from Israel	American journal of infection control	wrong study design
Arbel et al.	How many lives do COVID vaccines save? Evidence from Israel	medRxiv	wrong comparator
Arnold et al.	Are vaccines safe in patients with Long COVID? A prospective observational study	Preprint - medRxiv	wrong intervention
Aslam et al.	COVID-19 vaccination is protective of clinical disease in solid organ transplant recipients	Transplant infectious disease : an official journal of the Transplantation Society	wrong comparator
Auvigne et al.	Serious hospital events following symptomatic infection with Sars-CoV-2 Omicron and Delta variants: an exposed-unexposed cohort study in December 2021 from the COVID-19 surveillance databases in France	medRxiv	wrong study duration
Azamgarhi et al.	BNT162b2 vaccine uptake and effectiveness in UK healthcare workers - a single centre cohort study	Nature Communications	wrong intervention
Baden et al.	Efficacy and safety of the mRNA-1273 SARS- CoV-2 vaccine	New England Journal of Medicine	wrong intervention
Baden et al.	Covid-19 in the Phase 3 Trial of mRNA-1273 During the Delta-variant Surge	medRxiv	wrong intervention
Bahl et al.	Vaccination reduces need for emergency care in breakthrough COVID-19 infections: A multicenter cohort study	Preprint - medRxiv	wrong intervention
Bailly et al.	BNT162b2 mRNA vaccination did not prevent an outbreak of SARS COV-2 variant 501Y.V2 in an	Clinical Infectious Diseases	wrong intervention

	elderly nursing home but reduced transmission and		
	Considered and the second seco		
	Responses to Moderna and Pfizer-BioNTech	MMWR. Morbidity	
Bajema et al.	COVID-19 Vaccines among Hospitalized	and mortality weekly	wrong comparator
	Veterans - Five Veterans Affairs Medical Centers,	report	<u> </u>
	United States, February 1-September 30, 2021		
	Effectiveness of COVID-19 mRNA Vaccines	MMWR Morbidity	
Baiema et al.	Against COVID-19-Associated Hospitalization -	and mortality weekly	wrong outcome
2 0,0110 00 010	Five Veterans Affairs Medical Centers, United	report	wing outcome
	States, February 1-August 6, 2021		
Balicer et al.	Effectiveness of the BN1162b2 mRNA COVID-	Preprint – Research	wrong
	Post vaccine in Pregnancy	Square	intervention
Baltas et al	and genomic analysis of 119 breakthrough	Clinical Infectious	wrong
Duitus et ui.	infections in partially vaccinated individuals	Diseases	intervention
	BNT162b2 Messenger RNA COVID-19 Vaccine		
Daman at al	Effectiveness in Patients With Inflammatory	C	J
Danon et al.	Bowel Disease: Preliminary Real-World Data	Gastroenterology	duplicated
	During Mass Vaccination Campaign		
Bar On et al.	BNT162b2 vaccine booster dose protection: A	Preprint - medRxiv	wrong
	nationwide study from Israel		intervention
Bar-On et al.	Protection of BN1162b2 vaccine booster against	New England Journal	wrong comparator
	High effectiveness of sars cov 2 vaccines in	Tropical Medicine	
Barbosa et al.	reducing covid-19-related deaths in over 75-year-	and Infectious	duplicated
201000000000	olds, Ceara State, Brazil	Disease	T
	Effectiveness of a third dose of the BNT162b2		
Barda et al.	mRNA COVID-19 vaccine for preventing severe	The Lancet	wrong comparator
	outcomes in Israel: an observational study		
	Effectiveness of COVID-19 Vaccines Against		
Barlow et al.	SARS-CoV-2 Infection During a Delta Variant	Preprint - medRxiv	wrong
	Epidemic Surge in Multnomah County, Oregon,	1	intervention
	A Public Health COVID-19 Vaccination Strategy		
Barnabas et al.	to Maximize the Health Gains for Every Single	Annals of Internal	wrong outcome
Dumabas et al.	Vaccine Dose	Medicine	wrong outcome
	Impaired immunogenicity of BNT162b2 anti-		
Barrière et al.	SARS-CoV-2 vaccine in patients treated for solid	Annals of Oncology	wrong outcome
	tumors		
	Estimating the early impact of vaccination against		
Barros et al.	COVID-19 on deaths among elderly people in	EClinicalMedicine	duplicated
	Brazil: Analyses of routinely-collected data on		1
	Effectiveness of variation against SAPS CoV 2		
	infection and Covid-19 hospitalisation among		
Baum et al.		PloS one	wrong comparator
	Finnish elderly and chronically ill-An interim		0 1
	Finnish elderly and chronically ill-An interim analysis of a nationwide cohort study		0 1
	Finnish elderly and chronically ill-An interim analysis of a nationwide cohort study Effectiveness of vaccination against SARS-CoV-2		0 1
Baum et al	Finnish elderly and chronically ill-An interim analysis of a nationwide cohort study Effectiveness of vaccination against SARS-CoV-2 infection and Covid-19 hospitalization among	Dreprint modDrive	wrong
Baum et al.	Finnish elderly and chronically ill-An interim analysis of a nationwide cohort study Effectiveness of vaccination against SARS-CoV-2 infection and Covid-19 hospitalization among Finnish elderly and chronically ill—An interim	Preprint - medRxiv	wrong intervention

	First-Dose Coronavirus 2019 Vaccination		
Belmin et al.	Coverage among the Residents of Long-Term Care Facilities in France	Gerontology	wrong outcome
Ben Dov, et al.	Impact of tozinameran (BNT162b2) mRNA vaccine on kidney transplant and chronic dialysis patients: 3-5 months followup	medRxiv	delayed exclusion - data mainly focusing on immunogenicity findings
Ben-Aharon et al.	1559O Efficacy and toxicity of BNT162b2 vaccine in cancer patients	Annals of Oncology	duplicated
Ben-Tov et al.	BNT162b2 Messenger RNA COVID-19 Vaccine Effectiveness in Patients With Inflammatory Bowel Disease: Preliminary Real-World Data During Mass Vaccination Campaign	Gastroenterology	wrong intervention
Benenson et al.	BNT162b2 mRNA Covid-19 Vaccine Effectiveness among Health Care Workers	The New England Journal of Medicine	wrong intervention
Benjamini et al.	Safety and efficacy of BNT162b mRNA Covid19 Vaccine in patients with chronic lymphocytic leukemia	Haematologica	wrong outcome
Benotmane et al.	Low immunization rates among kidney transplant recipients who received 2 doses of the mRNA- 1273 SARS-CoV-2 vaccine	Kidney International	wrong outcome
Benotmane et al.	Weak anti-SARS-CoV-2 antibody response after the first injection of an mRNA COVID-19 vaccine in kidney transplant recipients	Kidney International	wrong outcome
Berec et al.	Real-life protection provided by vaccination, booster doses and previous infection against covid-19 infection, hospitalisation or death over time in the Czech Republic: A whole country retrospective view	medRxiv	wrong comparator
Berec et al.	Real-life protection provided by vaccination, booster doses and previous infection against covid-19 infection, hospitalisation or death over time in the Czech Republic: A whole country retrospective view	medRxiv	delayed exclusion - baseline is calculated 0-2 months after 14 days post-receipt of second dose, which is beyond our 30.5 days average post- receipt of second dose threshold
Bergwerk et al.	Covid-19 Breakthrough Infections in Vaccinated Health Care Workers	The New England Journal of Medicine	wrong outcome
Bermingham et al.	Estimating the effectiveness of first dose of COVID-19 vaccine against mortality in England: a quasi-experimental study	Preprint - medRxiv	wrong intervention
Bernal et al.	Early effectiveness of COVID-19 vaccination with BNT162b2 mRNA vaccine and ChAdOx1 adenovirus vector vaccine on symptomatic disease, hospitalisations and mortality in older adults in England	Preprint - medRxiv	wrong intervention
Bernal et al.	Effectiveness of BNT162b2 mRNA vaccine and ChAdOx1 adenovirus vector vaccine on mortality following COVID-19	Preprint - medRxiv	wrong intervention

Bernal et al.	Effectiveness of COVID-19 vaccines against the B.1.617.2 variant	The New England Journal of Medicine	wrong intervention
Bhattacharya et al.	Evaluation of the dose-effect association between the number of doses and duration since the last dose of COVID-19 vaccine, and its efficacy in preventing the disease and reducing disease severity: A single centre, cross-sectional analytical study from India	Diabetes and Metabolic Syndrome: Clinical Research and Reviews	wrong study design
Bianchi et al.	BNT162b2 mRNA COVID-19 vaccine effectiveness in the prevention of SARS-CoV-2 Infection: A preliminary report	Journal of Infectious Diseases	wrong intervention
Bianchi et al.	BNT162b2 mRNA COVID-19 Vaccine Effectiveness in the Prevention of SARS-CoV-2 Infection and Symptomatic Disease in Five-Month Follow-Up: A Retrospective Cohort Study	Vaccines	wrong outcome
Bianchi, et al.	BNT162b2 mRNA COVID-19 vaccine effectiveness in the prevention of SARS-CoV-2 Infection: A preliminary report	SSRN	delayed exclusion - K-M plot included the 14 days before full vaccination - the correct FUP is non-extractable (figure 1)
Bird et al.	Response to first vaccination against SARS-CoV-2 in patients with multiple myeloma	The Lancet Haematology	wrong intervention
Bjork et al.	Effectiveness of the BNT162b2 vaccine in preventing COVID-19 in the working age population - first results from a cohort study in Southern Sweden	Preprint - medRxiv	wrong intervention
Bjork et al.	High level of protection against COVID-19 after two doses of BNT162b2 vaccine in the working age population-first results from a cohort study in Southern Sweden	Infectious Diseases	duplicated
Blain et al.	Receptor binding domain-IgG levels correlate with protection in residents facing SARS-CoV-2 B.1.1.7 outbreaks	Allergy	wrong intervention
Blaiszik et al.	The Delta Variant Had Negligible Impact on COVID-19 Vaccine Effectiveness in the USA	medRxiv	wrong study design
Bleicher et al.	Early exploration of COVID-19 vaccination safety and effectiveness during pregnancy: interim descriptive data from a prospective observational study	Vaccine	wrong outcome
Bliden et al.	Evolution of Anti-SARS-CoV-2 IgG Antibody and IgG Avidity Post Pfizer and Moderna mRNA Vaccinations	Preprint - medRxiv	wrong outcome
Bobdey et al.	Effectiveness of ChAdOx1 nCOV-19 Vaccine: Experience of a tertiary care institute	Medical Journal Armed Forces India	wrong intervention
Bollineni et al.	Characteristics and outcomes among vaccinated lung transplant patients with breakthrough COVID-19	Transplant infectious disease : an official journal of the Transplantation Society	wrong outcome

Bongiovanni et al.	Evaluation of the immune response to COVID-19 vaccine mRNA BNT162b2 and correlation with previous COVID-19 infection	Journal of Clinical Virology	wrong outcome
Bookstein Peretz et al.	Short-term outcome of pregnant women vaccinated with BNT162b2 mRNA COVID-19 vaccine	Ultrasound in Obstetrics & Gynecology	wrong intervention
Bouton et al.	COVID-19 vaccine impact on rates of SARS-CoV- 2 cases and post vaccination strain sequences among healthcare workers at an urban academic medical center: a prospective cohort study	Preprint - medRxiv	wrong outcome
Bouton et al.	Coronavirus Disease 2019 Vaccine Impact on Rates of Severe Acute Respiratory Syndrome Coronavirus 2 Cases and Postvaccination Strain Sequences Among Health Care Workers at an Urban Academic Medical Center: A Prospective Cohort Study	Open forum infectious diseases	wrong intervention
Boyarsky et al.	Antibody response to 2-dose sars-cov-2 mrna vaccine series in solid organ transplant recipients	JAMA - Journal of the American Medical Association	wrong intervention
Braeye et al.	Vaccine effectiveness against infection and onwards transmission of COVID-19: Analysis of Belgian contact tracing data, January-June 2021	Vaccine	wrong intervention
Brinkley- Bubinstein et al	Breakthrough SARS-CoV-2 Infections in Prison after Vaccination	The New England	wrong
Britton et al.	Association of COVID-19 Vaccination With Symptomatic SARS-CoV-2 Infection by Time Since Vaccination and Delta Variant Predominance	JAMA	already assessed
Brosh-Nissimov et al.	BNT162b2 vaccine breakthrough: clinical characteristics of 152 fully vaccinated hospitalized COVID-19 patients in Israel	Clinical Microbiology and Infection	wrong outcome
Brouqui et al.	COVID-19 re-infection	European Journal of Clinical Investigation	wrong intervention
Brunelli et al.	Comparative Effectiveness of mRNA-Based BNT162b2 Vaccine versus Adenovirus Vector- Based Ad26.COV2.S Vaccine for Prevention of COVID-19 among Dialysis Patients	Journal of the American Society of Nephrology : JASN	wrong comparator
Brunner et al.	Comparison of Antibody Response Durability of mRNA-1273, BNT162b2, and Ad26.COV2.S SARS-CoV-2 Vaccines in Healthcare Workers	New England Journal of Medicine	wrong outcome
Brunner et al.	SARS-CoV-2 Postvaccination Infections Among Staff Members of a Tertiary Care University Hospital—Vienna, January-July 2021; an Exploratory Study on 8 500 Employees with Better Outcome of Vector than m-RNA Vaccine	Preprint - SSRN	wrong intervention
Bruxvoort et al.	Effectiveness of mRNA-1273 against delta, mu, and other emerging variants of SARS-CoV-2: test negative case-control study	BMJ (Clinical research ed.)	wrong comparator
Bruxvoort et al.	Real-world effectiveness of the mRNA-1273 vaccine against COVID-19: Interim results from a prospective observational cohort study	Lancet Regional Health. Americas	wrong outcome
Bruxvoort, Katia J. and Sy, Lina S. and Qian, Lei	Effectiveness of mRNA-1273 against Delta, Mu, and other emerging variants	medRxiv	delayed exclusion - baseline VE assessed at 14-60

and Ackerson, Bradley K. and Luo, Yi and Lee, Gina S. and Tian, Yun and Florea, Ana and Aragones, Michael and Tubert, Julia E. and Takhar, Harpreet S. and Ku, Jennifer H. and Paila, Yamuna D. and Talarico, Carla A. and Tseng, Hung Fu			(below our 30-day threshold)
Buchan et al.	Effectiveness of COVID-19 vaccines against Omicron or Delta symptomatic infection and	medRxiv	wrong comparator
Buchan et al.	Effectiveness of COVID-19 vaccines against Omicron or Delta infection	medRxiv	delayed exclusion - study ID 05-3 is a more recent version of this study
Bukhari et al.	Real-World Effectiveness of COVID-19 Vaccines: the Diverging Pattern of COVID-19 Cases and Deaths in Countries with High Vaccination Rates	Preprint - SSRN	wrong intervention
Buonfrate et al.	Antibody response induced by the BNT162b2 mRNA COVID-19 vaccine in a cohort of health- care workers, with or without prior SARS-CoV-2 infection: a prospective study	Clinical Microbiology and Infection	wrong intervention
Burd et al.	The Israeli study of Pfizer BNT162b2 vaccine in pregnancy: Considering maternal and neonatal benefits	Journal of Clinical Investigation	wrong publication type
Butt et al.	Real-world Effectiveness of the SARS-CoV-2 mRNA Vaccines in Preventing Confirmed Infection in Patients on Chronic Hemodialysis	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration
Butt et al.	Effectiveness of the SARS-CoV-2 mRNA Vaccines in Pregnant Women	Preprint - Research Square	wrong intervention
Butt et al.	Outcomes among patients with breakthrough SARS-CoV-2 infection after vaccination in a high- risk national population	EClinicalMedicine	wrong intervention
Butt et al.	Rate and risk factors for breakthrough SARS-CoV-2 infection after vaccination	The Journal of Infection	wrong intervention
Butt et al.	SARS-CoV-2 Vaccine Effectiveness in a High-Risk National Population in a Real-World Setting	Annals of Internal Medicine	wrong intervention
Butt et al.	SARS-CoV-2 vaccine effectiveness in preventing confirmed infection in pregnant women	The Journal of clinical investigation	wrong study duration
Cabezas et al.	Effects of BNT162b2 mRNA Vaccination on COVID-19 Disease, Hospitalisation and Mortality in Nursing Homes and Healthcare Workers: A	Hand search; Preprint - SSRN	duplicated

	Prospective Cohort Study Including 28,594 Nursing Home Residents, 26,238 Nursing Home Staff, and 61,951 Healthcare Workers in Catalonia		
Cabezas et al.	Effects of BNT162b2 mRNA Vaccination on COVID-19 Disease, Hospitalisation and Mortality in Nursing Homes and Healthcare Workers: A Prospective Cohort Study Including 28,594 Nursing Home Residents, 26,238 Nursing Home Staff, and 61,951 Healthcare Workers in Catalonia	Preprint - SSRN	wrong intervention
Cabezas, et al.	Associations of BNT162b2 vaccination with SARS-CoV-2 infection and hospital admission and death with covid-19 in nursing homes and healthcare workers in Catalonia: Prospective cohort study	BMJ	delayed exclusion - prospective cohort evaluated VE data among nursing home residents, nursing home staff, and healthcare workers. Incidence rates, and adjusted hazard ratios for covid-19 infection according to vaccination status in study population is presented in Table 2 (but no information of individual level follow up; the authors presented only Exposure person days). Kaplan-Meier estimates of COVID infection according to vaccination status in study population is presented visually in study population is presented visually in Figure 3 (but no extractable information presented).
Callaghan et al.	Real-world Effectiveness of the Pfizer-BioNTech BNT162b2 and Oxford-AstraZeneca ChAdOx1-S Vaccines Against SARS-CoV-2 in Solid Organ and Islet Transplant Recipients	Transplantation	wrong outcome
Carazo et al.	Single-dose mRNA vaccine effectiveness against SARS-CoV-2 in healthcare workers extending 16 weeks post-vaccination: a test-negative design from Quebec, Canada	Preprint - medRxiv	wrong intervention

Carazo et al.	Single-dose mRNA vaccine effectiveness against SARS-CoV-2 in healthcare workers extending 16 weeks post-vaccination: a test-negative design from Quebec, Canada	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	duplicated
Cardona et al.	SARS-CoV-2 Vaccinated Breakthrough Infections With Fatal and Critical Outcomes in the Department of Antioquia, Colombia	Research Square	wrong outcome
Carrera et al.	How well do hemodialysis patients respond to the BNT162b2 mRNA COVID-19 vaccine	Journal of the American Society of Nephrology	wrong intervention
Cerqueira Silva et al.	Influence of age on the effectiveness and duration of protection in Vaxzevria and CoronaVac vaccines	Preprint - medRxiv	wrong intervention
Cerqueira-Silva et al.	Vaccine effectiveness of heterologous CoronaVac plus BNT162b2 in Brazil	Nature Medicine	already assessed
Cerqueira-Silva et al.	Influence of age on the effectiveness and duration of protection of Vaxzevria and CoronaVac vaccines: A population-based study	Lancet Regional Health. Americas	wrong intervention
Chadeau Hyam et al.	REACT-1 round 15 final report: Increased breakthrough SARS-CoV-2 infections among adults who had received two doses of vaccine, but booster doses and first doses in children are providing important protection	medRxiv	wrong comparator
Chadeau Hyam et al.	REACT-1 study round 14: High and increasing prevalence of SARS-CoV-2 infection among school-aged children during September 2021 and vaccine effectiveness against infection in England	medRxiv	wrong comparator
Chadeau-Hyam et al.	SARS-CoV-2 infection and vaccine effectiveness in England (REACT-1): a series of cross-sectional random community surveys	The Lancet. Respiratory medicine	wrong comparator
Chagla	The BNT162b2 (BioNTech/Pfizer) vaccine had 95% efficacy against COVID-19 >=7 days after the 2nd dose	Annals of Internal Medicine	wrong intervention
Charles Pon Ruban et al.	Effectiveness of vaccination in preventing severe SARS CoV-2 infection in South India-a hospital- based cross-sectional study	medRxiv	wrong study design
Charmet et al.	Impact of original, B.1.1.7, and B.1.351/P.1 SARS- CoV-2 lineages on vaccine effectiveness of two doses of COVID-19 mRNA vaccines: Results from a nationwide case-control study in France	The Lancet Regional Health-Europe	wrong intervention
Chauhan et al.	SARS-CoV-2 Vaccine-Induced Antibody Response and Reinfection in Persons with Past Natural Infection	Preprint - medRxiv	wrong intervention
Chemaitelly et al.	Duration of protection of BNT162b2 and mRNA- 1273 COVID-19 vaccines against symptomatic SARS-CoV-2 Omicron infection in Qatar	medRxiv	already assessed
Chemaitelly et al.	mRNA-1273 COVID-19 vaccine effectiveness against the B.1.1.7 and B.1.351 variants and severe COVID-19 disease in Qatar	Hand search; Nature Medicine	wrong intervention
Chemaitelly et al.	Pfizer-BioNTech mRNA BNT162b2 Covid-19 vaccine protection against variants of concern after one versus two doses	Journal of Travel Medicine	duplicated

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Chemaitelly et al.	MRNA-1273 COVID-19 vaccine effectiveness against the B.1.1.7 and B.1.351 variants and severe	Nature Medicine	wrong intervention
Chen et al.	Prediction of long-term kinetics of vaccine-elicited neutralizing antibody and time-varying vaccine- specific efficacy against the SARS-CoV-2 Delta variant by clinical endpoint	BMC medicine	wrong intervention
Chin et al.	Effectiveness of COVID-19 vaccines among incarcerated people in California state prisons: retrospective cohort study	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study design
Chin et al.	Effectiveness of COVID-19 Vaccines among Incarcerated People in California State Prisons: A Retrospective Cohort Study	Preprint - medRxiv	wrong intervention
Chin et al.	Effectiveness of the mRNA-1273 Vaccine during a SARS-CoV-2 Delta Outbreak in a Prison	The New England journal of medicine	wrong outcome
Chodick et al.	The effectiveness of the TWO-DOSE BNT162b2 vaccine: analysis of real-world data	Clinical Infectious Diseases	wrong intervention
Christie et al.	Decreases in COVID-19 Cases, Emergency Department Visits, Hospital Admissions, and Deaths Among Older Adults Following the Introduction of COVID-19 Vaccine - United States, September 6, 2020-May 1, 2021	MMWR. Morbidity and mortality weekly report	wrong population
Chung et al.	Effectiveness of BNT162b2 and mRNA-1273 covid-19 vaccines against symptomatic SARS- CoV-2 infection and severe covid-19 outcomes in Ontario, Canada: Test negative design study	The BMJ	wrong intervention
Clemens et al.	Efficacy of ChAdOx1 nCoV-19 (AZD1222) vaccine against SARS-CoV-2 lineages circulating in Brazil; an exploratory analysis of a randomised controlled trial	Preprint - Research Square	wrong intervention
Clemens et al.	Efficacy of ChAdOx1 nCoV-19 (AZD1222) vaccine against SARS-CoV-2 lineages circulating in Brazil	Nature communications	duplicated
Clifford et al.	Effectiveness of BNT162b2 and ChAdOx1 against SARS-CoV-2 household transmission: a prospective cohort study in England	medRxiv	wrong comparator
Coggiola et al.	SARS-CoV-2 infection: efficacy of extensive vaccination of the healthcare workforce in a large Italian hospital	La Medicina del lavoro	wrong study design
Cohen et al.	Comparative Efficacy over time of the mRNA-1273 (Moderna) vaccine and the BNT162b2 (Pfizer-BioNTech) vaccine	Research Square	wrong comparator
Cohn et al.	SARS-CoV-2 vaccine protection and deaths among US veterans during 2021	Science	wrong comparator
Cohn et al.	Breakthrough SARS-CoV-2 infections in 620,000 US Veterans, February 1, 2021 to August 13, 2021	medRxiv	wrong intervention
Consonni et al.	Effectiveness of BNT162b2 COVID-19 vaccine among healthcare workers of a large hospital, Milan, Italy	Safety and Health at Work	already assessed

Consonni et al.	Effectiveness of COVID-19 vaccine in health care workers, Milan, Italy	Occupational and Environmental Medicine	Full text unavailable
Cook et al.	Clinical characteristics and outcomes of COVID- 19 breakthrough infections among vaccinated patients with systemic autoimmune rheumatic diseases	Preprint - medRxiv	wrong outcome
Corchado Garcia et al.	Real-world effectiveness of Ad26.COV2.S adenoviral vector vaccine for COVID-19	Preprint - medRxiv	wrong intervention
Corchado-Garcia et al.	Real-world effectiveness of Ad26. COV2. S adenoviral vector vaccine for COVID-19	SSRN	wrong study duration
Corchado-Garcia et al.	Analysis of the Effectiveness of the Ad26.COV2.S Adenoviral Vector Vaccine for Preventing COVID-19	JAMA network open	wrong outcome
Corrao et al.	Persistence of protection against SARS-CoV-2 clinical outcomes up to 9 months since vaccine completion: a retrospective observational analysis in Lombardy, Italy	The Lancet. Infectious diseases	already assessed
Corrao et al.	Persistence of protection against SARS-CoV-2 clinical outcomes up to 9 months since vaccine completion: a retrospective observational analysis in Lombardy, Italy	The Lancet. Infectious diseases	wrong comparator
Corrao et al.	Persistence of protection against SARS-CoV-2 clinical outcomes up to 9 months since vaccine completion: a retrospective observational analysis in Lombardy, Italy	The Lancet Infectious Diseases	delayed exclusion - definition of unvaccinated group is unclear
Cox et al.	An observational cohort study on the incidence of SARS-CoV-2 infection and B.1.1.7 variant infection in healthcare workers by antibody and vaccination status	Clinical Infectious Diseases	duplicated
Dagan et al.	BNT162b2 mRNA Covid-19 Vaccine in a Nationwide Mass Vaccination Setting	The New England Journal of Medicine	wrong intervention
Dagan et al.	Effectiveness of the BNT162b2 mRNA COVID- 19 vaccine in pregnancy	Nature Medicine	wrong intervention
Dahlem et al.	Humoral Response after SARS-CoV-2 mRNA Vaccination in a Cohort of Hemodialysis Patients and Kidney Transplant Recipients	Journal of the American Society of Nephrology	duplicated
Danthu et al.	Humoral Response after SARS-Cov-2 mRNA Vaccine in a Cohort of Hemodialysis Patients and Kidney Transplant Recipients	Journal of the American Society of Nephrology: JASN	wrong intervention
Das et al.	Relation of vaccination with severity, oxygen requirement and outcome of COVID-19 infection in Chattogram, Bangladesh	Preprint - medRxiv	wrong intervention
Dash et al.	Breakthrough SARS-CoV-2 infections in an eastern state of India: A preliminary report	Preprint - Research Square	wrong outcome
Dashdorj et al.	Direct Comparison of Antibody Responses to Four SARS-CoV-2 Vaccines in Mongolia	Preprint - medRxiv	wrong outcome
Deiana et al.	Impact of Full Vaccination with mRNA BNT162b2 on SARS-CoV-2 Infection: Genomic and Subgenomic Viral RNAs Detection in Nasopharyngeal Swab and Saliva of Health Care Workers	Microorganisms	wrong outcome
Dickerman et al.	Comparative effectiveness of BNT162B2 and mRNA-1273 vaccines in U.S. Veterans	New England Journal of Medicine	wrong comparator

	The BNT162b2 vaccine is associated with lower	Journal of the	
Domi et al.	new COVID-19 cases in nursing home residents	American Geriatrics	wrong
2 0111 00 01	and staff	Society	intervention
	Asymptomatic COVID-19 cases among older	000000	
	patients despite BNT162b2 vaccination: A case	The Journal of	wrong
Donadio et al.	series in a geriatric rehabilitation ward during an	Infection	intervention
	outbreak		
	Effectiveness of BNT162b2 and mRNA-1273		
	Second Doses and Boosters for SARS-CoV-2		
Drawz et al.	infection and SARS-CoV-2 Related	medRxiv	wrong comparator
	Hospitalizations: A Statewide Report from the		0 1
	Minnesota Electronic Health Record Consortium		
	Effectiveness of BNT162b2 and mRNA-1273	Clinical infectious	
	Second Doses and Boosters for SARS-CoV-2	diseases : an official	
Drawz et al.	infection and SARS-CoV-2 Related	publication of the	wrong comparator
	Hospitalizations: A Statewide Report from the	Infectious Diseases	0 1
	Minnesota Electronic Health Record Consortium	Society of America	
Dr. Dianaia at al	Efficacy of the ChAdOx1 nCoV-19 Covid-19	New England Journal	J
Du Plessis et al.	Vaccine against the B.1.351 Variant	of Medicine	duplicated
	Diminishing immune responses against variants of		
Dulovic et al.	concern in dialysis patients four months after	Preprint - medRxiv	wrong outcome
	SARS-CoV-2 mRNA vaccination		
	Antibody responses to the BNT162b2 mRNA		Wrong
Ebinger et al.	vaccine in individuals previously infected with	Nature Medicine	intervention
	SARS-CoV-2		intervention
	Prior COVID-19 Infection and Antibody		
Ebinger et al.	Response to Single Versus Double Dose mRNA	Preprint - medRxiv	wrong outcome
	SARS-CoV-2 Vaccination		
	BNT 13b2 Pfizer vaccine protects against SARS-	The Jou r nal of	
Edelstein et al.	CoV-2 respiratory mucosal colonization even after	Hospital Infection	wrong outcome
	prolonged exposure to positive family members	p	
	Safety and humoral responses to BN1162b2	0 · · · · · · · · · · · · · · · · · · ·	
Efrati et al.	mRNA vaccination of SARS-CoV-2 previously	Scientific Reports	wrong outcome
	infected and naive populations		
T-11 / 1	Efficacy, safety, and lot to lot immunogenicity of		wrong
Ella et al.	an inactivated SARS-Cov-2 vaccine (BBV 152): a,	Preprint - medKxiv	intervention
	double-blind, randomised, controlled phase 3 trial	D	
		Rapid increase in	
Elliott of al	Rapid increase in Omicron infections in England	England during	www.e.e.c.outeo.ee.c
Emott et al.	during December 2021: REACT-1 study	England during	wrong outcome
		BEACT 1 study	
	REACT-1 round 13 final report: exponential	KEACT-1 Study	
	growth high prevalence of SARS-CoV-2 and	Hand search: Preprint	Wrong
Elliott et al.	vaccine effectiveness associated with Delta variant	- medRxiv	intervention
	in England during May to July 2021	meenearv	intervention
	Efficacy of ChAdOx1 nCoV-19 (AZD1222)		
	vaccine against SARS-CoV-2 variant of concern		wrong
Emary et al.	202012/01 (B 1 1 7): an exploratory analysis of a	The Lancet	intervention
	randomised controlled trial		
	Effectiveness of two-dose vaccination with mRNA	American journal of	
	COVID-19 vaccines against COVID-19-associated	transplantation :	
Embi et al.	hospitalizations among immunocompromised	official journal of the	wrong outcome
	adults-Nine States, January-September 2021	American Society of	

		Transplantation and the American Society of Transplant Surgeons	
Embi et al.	Effectiveness of 2-Dose Vaccination with mRNA COVID-19 Vaccines Against COVID-19- Associated Hospitalizations Among Immunocompromised Adults - Nine States, January-September 2021	MMWR. Morbidity and mortality weekly report	wrong study duration
Emborg et al.	Vaccine effectiveness of the BNT162b2 mRNA COVID-19 vaccine against RT-PCR confirmed SARS-CoV-2 infections, hospitalisations and mortality in prioritised risk groups	Preprint - medRxiv	wrong intervention
Epaulard et al.	Symptoms and severity in vaccinated and unvaccinated patients hospitalised with SARS- CoV-2 delta (B.1.617.2) variant infection	medRxiv	wrong comparator
Espi et al.	A prospective observational study for justification, safety, and efficacy of a third dose of mRNA vaccine in patients receiving maintenance hemodialysis	Kidney international	wrong outcome
Espi et al.	Justification, safety, and efficacy of a third dose of mRNA vaccine in maintenance hemodialysis patients: a prospective observational study	Preprint - medRxiv	wrong outcome
Eyre et al.	The impact of SARS-CoV-2 vaccination on Alpha & Delta variant transmission. medRxiv 2021	Preprint].[Google Scholar]	wrong study duration
Fabiani et al.	Effectiveness of mRNA vaccines and waning of protection against SARS-CoV-2 infection and severe covid-19 during predominant circulation of the delta variant in Italy: retrospective cohort study	BMJ (Clinical research ed.)	wrong comparator
Fabiani et al.	Effectiveness of the comirnaty (BNT162b2, BioNTech/Pfizer) vaccine in preventing SARS- CoV-2 infection among healthcare workers, Treviso province, Veneto region, Italy, 27 December 2020 to 24 March 2021	Eurosurveillance	wrong intervention
Fabiani et al.	Risk of SARS-CoV-2 infection and subsequent hospital admission and death at different time intervals since first dose of COVID-19 vaccine administration, Italy, 27 December 2020 to mid- April 2021	Eurosurveillance	wrong intervention
Falsey et al.	Phase 3 Safety and Efficacy of AZD1222 (ChAdOx1 nCoV-19) Covid-19 Vaccine	The New England journal of medicine	wrong study duration
Farah et al.	Effectiveness of Pfizer-BioNTech Vaccine Against COVID-19 Associated Hospitalizations among Lebanese Adults ,â•75 years- Lebanon, April-May 2021	medRxiv	wrong outcome
Faria et al.	Performance of vaccination with CoronaVac in a cohort of healthcare workers (HCW) - preliminary report	Preprint - medRxiv	wrong intervention
Felip et al.	1591P Immune response after vaccination against SARS-COV-2 in lung cancer (LC) patients (p). Prospective study in the Medical Oncology Department at the Catalan Institute of Oncology- Badalona, Spain: COVID-lung vaccine	Annals of Oncology	wrong outcome

Feng et al.	Correlates of protection against symptomatic and asymptomatic SARS-CoV-2 infection	Preprint - medRxiv	wrong outcome
Fernando et al.	Neutralizing SARS-CoV-2 Antibody Response and Protective Effect of 2 Doses of ChAdOx1 nCoV- 19 and BBV152 Vaccines in hemodialysis Patients: A Preliminary Report	Kidney International Reports	wrong outcome
Firinu et al.	Evaluation of antibody response to BNT162b2 mRNA COVID-19 vaccine in patients affected by immune-mediated inflammatory diseases up to 5 months after vaccination	Preprint - Research Square	wrong outcome
Fisman et al.	Timing of Breakthrough Infection Risk After Vaccination Against SARS-CoV-2	Timing of Breakthrough Infection Risk After Vaccination Against SARS-CoV-2	wrong comparator
Fisman et al.	Timing of Breakthrough Infection Risk After Vaccination Against SARS-CoV-2	medRxiv	delayed exclusion - definition of unvaccinated group is unclear
Flacco et al.	Risk of SARS-CoV-2 reinfection 18 months after primary infection: population-level observational study	medRxiv	wrong study duration
Folegatti et al.	Safety and immunogenicity of the ChAdOx1 nCoV-19 vaccine against SARS-CoV-2: a preliminary report of a phase 1/2, single-blind, randomised controlled trial	Hand search; The Lancet	wrong outcome
Fontan et al.	Time-Varying Effectiveness of Three Covid-19 Vaccines in Puerto Rico	medRxiv	wrong outcome
Foulkes et al.	COVID-19 vaccine coverage in health-care workers in England and effectiveness of BNT162b2 mRNA vaccine against infection (SIREN): a prospective, multicentre, cohort study	The Lancet	wrong intervention
Fournier et al.	SARS-CoV-2 Vaccination and Protection Against Clinical Disease: A Retrospective Study, Bouches- du-Rhône District, Southern France, 2021	Frontiers in Microbiology	delayed exclusion - baseline is <14 days, which is beyond our 30.5 days average post- receipt of second dose threshold.
Frenck et al.	Safety, immunogenicity, and efficacy of the BNT162B2 covid-19 vaccine in adolescents	New England Journal of Medicine	wrong intervention
Friedrichs et al.	Immunogenicity and safety of anti-SARS-CoV-2 mRNA vaccines in patients with chronic inflammatory conditions and immunosuppressive therapy in a monocentric cohort	Annals of the Rheumatic Diseases	wrong intervention
Fu et al.	POS-941 THE EFFECTIVENESS OF COVID- 19 VACCINE IN REDUCING THE SEVERITY AND MORTALITY RATE AMONG THE END STAGE KIDNEY DISEASE WITH COVID-19	Kidney International Reports	Full-text not found
Fuca et al.	Antibody response to mRNA-1273 SARS-COV-2 vaccine in hemodialysis patients with and without prior COVID-19	Clinical Journal of the American Society of Nephrology	wrong

	Immunogenicity and safety of the BNT162B2		
Furer et al.	mRNA COVID-19 vaccine in adult patients with	Annals of the	wrong
	autoimmune inflammatory rheumatic diseases and	Rheumatic Diseases	intervention
	general population: A multicenter study		
	COVID-19 vaccine effectiveness among		
Gaio et al.	healthcare workers in Portugal: results from a	medRxiv	wrong
	hospital-based cohort study, December 2020 to		intervention
	November 2021		
Compared at al	Early observations on the impact of a healthcare	The Journal of	wrong
Garvey et al.	major UK tertiary centre	Infection	intervention
	major of citiary centre	Clinical infectious	
	BNT162b2 mRNA Vaccine Effectiveness Given	diseases : an official	
Gazit et al.	Confirmed Exposure: Analysis of Household	publication of the	wrong comparator
Guzit et un	Members of COVID-19 Patients	Infectious Diseases	wrong companator
		Society of America	
	BNT162b2 mRNA Vaccine Effectiveness Given		
Gazit et al.	Confirmed Exposure; Analysis of Household	Preprint - medRxiv	wrong
	Members of COVID-19 Patients	_	intervention
	Comparing SARS-CoV-2 natural immunity to		Wrong
Gazit et al.	vaccine-induced immunity: reinfections versus	Preprint - medRxiv	intervention
	breakthrough infections		littervention
	SARS-CoV-2 vaccine breakthrough infections	Infection Control and	wrong
Geysels et al.	among healthcare workers in a large Belgian	Hospital	intervention
	hospital network	Epidemiology	
Ghadiri et al.	The study of COVID-19 infection following	Multiple scierosis and	wrong outcome
	COVISHIELD (AZD1222) VaccINe effectiveness	Telated disorders	
	among healthcare and frontline Workers of INdian	Medical Journal Armed Forces India	Wrong
Ghosh et al.	Armed Forces: Interim results of VIN-WIN		intervention
	cohort study		
	COVID-19 vaccine effectiveness among the staff	A (D' 1'	
Giansante et al.	of the Bologna Health Trust, Italy, December	Acta Bio-medica:	wrong
	2020-April 2021	Atenei Parmensis	intervention
Gilbert et al	Immune Correlates Analysis of the mRNA-1273	Proprint mod Print	wrong
Ondert et al.	COVID-19 Vaccine Efficacy Trial		intervention
	North West London Covid-19 Vaccination		
Glampson et al.	Programme: Real-world evidence for Vaccine	JMIR Public Health	wrong
P	uptake and effectiveness: Retrospective Cohort	and Surveillance	intervention
	Study		
	The BN 1162b2 vaccine effectiveness against new		
Glatman-	breakthrough gases: A pation wide retrospective	FRieMedicine	wrong study
Freedman et al.	longitudinal multiple cohort analysis using	EDIOMEDICITE	duration
	individualised data		
	Effectiveness of BNT162b2 Vaccine in		
Glatman-	Adolescents during Outbreak of SARS-CoV-2	Emerging infectious	wrong study
Freedman et al.	Delta Variant Infection, Israel, 2021	diseases	duration
	New infections by SARS-CoV-2 variants of		. 1
Goes et al.	concern after natural infections and post-	intection, Genetics	wrong study
	vaccination in Rio de Janeiro, Brazil	and Evolution	uesign
	Asymptomatic and Symptomatic COVID-19		wrong
Gohil et al.	Infections Among Health Care Personnel Before	JAMA network open	intervention
	and After Vaccination		

Coldborg at al	Protection of previous SARS-CoV-2 infection is similar to that of RN/T162b2 vaccing protection.	Proprint medRyin	wrong
Goldberg et al.	similar to that of DIN 1102D2 vaccine protection: A three-month nationwide experience from Israel	Preprint - meakxiv	intervention
Goldberg et al	Waning Immunity after the BNT162b2 Vaccine in	The New England	wrong comparator
Goldberg et al.	Israel	journal of medicine	wrong comparator
	BNT162b2 mRNA COVID-19 (Comirnaty)		
Goldin et al.	Vaccine Effectiveness in Elderly Patients Who	Gerontology	wrong outcome
	Live in Long-Term Care Facilities: A Nationwide Cohort		
	Association Between BNT162b2 Vaccination and		
Goldshtein et al.	Incidence of SARS-CoV-2 Infection in Pregnant	JAMA	wrong
	Women	5	intervention
	Is the BioNTech-Pfizer COVID-19 vaccination		Wrong
Gomes et al.	effective in elderly populations? Results from	Preprint - medRxiv	intervention
	population data from Bavaria, Germany		inter vention
	Is the BNT162b2 COVID-19 vaccine effective in	DI C	1 1 . 1
Gomes et al.	elderly populations? Results from population data	Plos one	duplicated
	Efficacy of SARS-CoV-2 vaccine in thoracic		
	cancer patients: a prospective study supporting a		wrong
Gounant et al.	third dose in patients with minimal serologic	Preprint - medRxiv	intervention
	response after two vaccine doses		
Gower et al	Effectiveness of Covid-19 Vaccines against the	New England Journal	duplicated
Gower et al.	B.1.617.2 (Delta) Variant	of Medicine	dupileated
	Effectiveness of the Pfizer-BioNTech and Oxford-		
C	AstraZeneca vaccines on covid-19 related	'T'I DMI	1 1 4 1
Gower et al.	symptoms, nospital admissions, and mortality in	The BMJ	duplicated
	study		
	Vaccine effectiveness against SARS-CoV-2		
	infection, hospitalization, and death when		wrong study duration
Gram et al.	combining a first dose ChAdOx1 vaccine with a	PLoS medicine	
	subsequent mRNA vaccine in Denmark: A		
	nationwide population-based cohort study		
Cram at al	Vaccine effectiveness when combining the	Duonvint modDrive	wrong
Gram et al.	COVID-19 vaccine as the second dose	Preprint - medicali	intervention
	Interim estimates of COVID-19 vaccine		
	effectiveness against COVID-19,Äiassociated		
Constant of al	emergency department or urgent care clinic	Morbidity and	wrong study
Grannis et al.	encounters and hospitalizations among adults	Report	duration
	during SARS-CoV-2 B. 1.617. 2 (Delta) variant	керон	
	predominance, AîNine States, June, AiAugust 2021		
	Impact of SARS-CoV-2 Delta variant on	The Length and and	
Grant et al.	affectiveness: Results from a nationwide case	health Europe	duration
	control study in France	nearth. Europe	duration
	Vaccine effectiveness against hospital admission in		
	South African health care workers who received a		
Gray et al.	homologous booster of Ad26.COV2 during an	medRxiv	wrong
	Omicron COVID19 wave: Preliminary Results of		muervenuon
	the Sisonke 2 Study		

	Relative Viralance of SARS CoV 2 Among		
Crime at al	Vaccineted and Unvaccineted Individuals	modPrin	wrong study
Grinna et al.	Vaccinated and Univaccinated Individuals	mearcaiv	duration
	Hospitalized with SARS-CoV-2	I 1 C	
Guarino et al.	Effectiveness of SARS-Cov-2 vaccination in liver	Journal of	wrong outcome
	transplanted patients: the debate is open!	Hepatology	0
	The incidence and in-hospital mortality of	D 1 1D 1	wrong study
Guha et al.	COVID-19 patients post-vaccination in eastern	Preprint - medRxiv	design
	India		
	Impact and effectiveness of mRNA BNT162b2		
	vaccine against SARS-CoV-2 infections and		
Haas et al	COVID-19 cases, hospitalisations, and deaths	The Lancet	wrong
Traas et al.	following a nationwide vaccination campaign in	The Lancet	intervention
	Israel: an observational study using national		
	surveillance data		
	Infections, Hospitalizations, and Deaths Averted		
II. a a at al	Via Direct Effects of the Pfizer-BioNTech	Duraning CODNI	wrong
Haas et al.	BNT162b2 mRNA COVID-19 Vaccine in a	Preprint - SSKIN	intervention
	Nationwide Vaccination Campaign, Israel		
	Effectiveness and durability of protection against		
	future SARS-CoV-2 infection conferred by		delayed exclusion
TT 11 . 1	COVID-19 vaccination and previous infection;	10	- a published
Hall et al.	findings from the UK SIREN prospective cohort	medKxiv	version of this
	study of healthcare workers March 2020 to		article is available
	September 2021		
	Randomized Trial of a Third Dose of mRNA-1273	New England Journal	
Hall et al.	Vaccine in Transplant Recipients	of Medicine	wrong comparator
Hammerman et	Effectiveness of the BNT162b2 Vaccine after	The New England	wrong
al.	Recovery from Covid-19	journal of medicine	intervention
) • • • • • • • • • • • • • • • • • • •	delayed exclusion
	Vaccine effectiveness against SARS-CoV-2		- last follow-up
	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants		- last follow-up period is 91-150
Hansen et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or	medRxiv	- last follow-up period is 91-150 days, which is
Hansen et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort	medRxiv	- last follow-up period is 91-150 days, which is insufficient to
Hansen et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study	medRxiv	- last follow-up period is 91-150 days, which is insufficient to meet our 112-day
Hansen et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study	medRxiv	- last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit.
Hansen et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study	medRxiv	- last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit.
Hansen et al. Hardt et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19	medRxiv medRxiv	- last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention
Hansen et al. Hardt et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission	medRxiv medRxiv Hand search: Preprint	- last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong
Hansen et al. Hardt et al. Harris et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England	medRxiv medRxiv Hand search; Preprint - medRxiv	- last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong intervention
Hansen et al. Hardt et al. Harris et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among	medRxiv medRxiv Hand search; Preprint - medRxiv	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong intervention
Hansen et al. Hardt et al. Harris et al. Havers et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years -	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv	- last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong intervention
Hansen et al. Hardt et al. Harris et al. Havers et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong intervention
Hansen et al. Hardt et al. Harris et al. Havers et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong intervention wrong outcome
Hansen et al. Hardt et al. Harris et al. Havers et al. Herisbanu et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong intervention wrong outcome
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong outcome
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia SARS-CoV-2-antibody response in health care	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong intervention wrong outcome
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia SARS-CoV-2-antibody response in health care workers after vaccination or natural infection in a	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong outcome wrong outcome
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al. Herzberg et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia SARS-CoV-2-antibody response in health care workers after vaccination or natural infection in a longitudinal observational study	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood Preprint - medRxiv	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong outcome wrong outcome wrong intervention
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al. Herzberg et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia SARS-CoV-2-antibody response in health care workers after vaccination or natural infection in a longitudinal observational study Reduced SARS-CoV-2 infection and death after	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood Preprint - medRxiv	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong outcome wrong outcome wrong intervention
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al. Herzberg et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia SARS-CoV-2-antibody response in health care workers after vaccination or natural infection in a longitudinal observational study Reduced SARS-CoV-2 infection and death after two doses of COVID-19 vaccines in a series of	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood Preprint - medRxiv	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong outcome wrong outcome wrong intervention
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al. Herzberg et al. Heudel et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia SARS-CoV-2-antibody response in health care workers after vaccination or natural infection in a longitudinal observational study Reduced SARS-CoV-2 infection and death after two doses of COVID-19 vaccines in a series of 1503 cancer patients	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood Preprint - medRxiv Annals of Oncology	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong outcome wrong outcome wrong intervention wrong intervention
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al. Herzberg et al. Heudel et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia SARS-CoV-2-antibody response in health care workers after vaccination or natural infection in a longitudinal observational study Reduced SARS-CoV-2 infection and death after two doses of COVID-19 vaccines in a series of 1503 cancer patients Effactiveness of the ChAdOv1 vaccine in the	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood Preprint - medRxiv Annals of Oncology	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong outcome wrong outcome wrong intervention wrong intervention
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al. Herzberg et al. Heudel et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia SARS-CoV-2-antibody response in health care workers after vaccination or natural infection in a longitudinal observational study Reduced SARS-CoV-2 infection and death after two doses of COVID-19 vaccines in a series of 1503 cancer patients Effectiveness of the ChAdOx1 vaccine in the elderly during SARS CoV 2 Camma variant	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood Preprint - medRxiv Annals of Oncology	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong outcome wrong outcome wrong intervention wrong intervention wrong intervention
Hansen et al. Hardt et al. Harris et al. Havers et al. Herishanu et al. Herzberg et al. Heudel et al. Hitchings et al.	Vaccine effectiveness against SARS-CoV-2 infection with the Omicron or Delta variants following a two-dose or booster BNT162b2 or mRNA-1273 vaccination series: A Danish cohort study Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19 Impact of vaccination on household transmission of SARS-COV-2 in England COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021 Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia SARS-CoV-2-antibody response in health care workers after vaccination or natural infection in a longitudinal observational study Reduced SARS-CoV-2 infection and death after two doses of COVID-19 vaccines in a series of 1503 cancer patients Effectiveness of the ChAdOx1 vaccine in the elderly during SARS-CoV-2 Gamma variant transmission in Brazil	medRxiv medRxiv Hand search; Preprint - medRxiv Preprint - medRxiv Blood Preprint - medRxiv Annals of Oncology Preprint - medRxiv	 last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit. wrong intervention wrong outcome wrong outcome wrong intervention wrong intervention wrong intervention

Hitchings et al.	Effectiveness of ChAdOx1 vaccine in older adults during SARS-CoV-2 Gamma variant circulation in	Nature	duplicated
	Sao Paulo	Communications	
Hoehl et al.	A new group at increased risk of a SARS-CoV-2 infection emerges: The recently vaccinated	Vaccine	wrong intervention
Hollinghurst et al.	COVID-19 Infection Risk amongst 14,104 Vaccinated Care Home Residents: A national observational longitudinal cohort study in Wales, United Kingdom, December 2020 to March 2021	Preprint - medRxiv	wrong intervention
Hoque et al.	Serial evaluation of anti-SARS-CoV-2 IgG antibody and breakthrough infections in BNT162b2 Vaccinated migrant workers from Bangladesh	medRxiv	wrong comparator
Horst	Covid-19 and Patients with IBD: Who Is at Highest Risk for Severe Complications?	Digestive Diseases and Sciences	wrong publication type
Hu et al.	Effectiveness of inactive COVID-19 vaccines against severe illness in B.1.617.2 (Delta) variant- infected patients in Jiangsu, China	Preprint - medRxiv	wrong intervention
Hulme et al.	Comparative effectiveness of ChAdOx1 versus BNT162b2 COVID-19 vaccines in Health and Social Care workers in England: a cohort study using OpenSAFELY	medRxiv	wrong intervention
Hung & Poland	Single-dose Oxford-AstraZeneca COVID-19 vaccine followed by a 12-week booster	The Lancet	wrong intervention
Hyams et al.	Effectiveness of BNT162b2 and ChAdOx1 nCoV- 19 COVID-19 vaccination at preventing hospitalisations in people aged at least 80 years: a test-negative, case-control study	The Lancet Infectious Diseases	wrong intervention
Hyams et al.	Assessing the Effectiveness of BNT162b2 and ChAdOx1nCoV-19 COVID-19 Vaccination in Prevention of Hospitalisations in Elderly and Frail Adults: A Single Centre Test Negative Case- Control Study	Hand search; Preprint - SSRN	wrong intervention
Iliaki et al.	COVID-19 Vaccine Efficacy in a Diverse Urban Healthcare Worker Population	Preprint - medRxiv	wrong intervention
Ioannou et al.	COVID-19 Vaccination Effectiveness Against Infection or Death in a National U.S. Health Care System : A Target Trial Emulation Study	Annals of internal medicine	wrong study duration
Irizarry et al.	Time-Varying Effectiveness of Three Covid-19 Vaccines in Puerto Rico	SSRN	delayed exclusion - study ID 18-3 is a more recent version of this study
Iskander et al.	Effectiveness of vaccination against reported SARS-CoV-2 infection in United States Coast Guard personnel between May and August 2021: A time-series analysis	medRxiv	wrong comparator
Ismail et al.	Effectiveness of BNT162b2 mRNA and ChAdOx1 adenovirus vector COVID-19 vaccines on risk of hospitalisation among older adults in England: an observational study using surveillance data	Hand search - Public Health England preprint	wrong intervention

Israel et al.	Large-scale study of antibody titer decay following BNT162b2 mRNA vaccine or SARS-CoV-2 infection	Preprint - medRxiv	wrong outcome
Israel, et al.	Elapsed time since BNT162b2 vaccine and risk of SARS-CoV-2 infection in a large cohort	medRxiv	delayed exclusion - study included only vaccinated individuals. The authors presented risk of COVID infection according to the time since the vaccination (greater or lower than 146 days) in Table 3 (but no indication of individual level follow-up time).
Issac et al.	SARS-CoV-2 Breakthrough Infections among the Healthcare Workers Post-Vaccination with ChAdOx1 nCoV-19 Vaccine in the South Indian State of Kerala	Preprint - medRxiv	wrong intervention
Italian Instituto Superiore di Sanita	Impact of COVID-19 vaccination on the risk of SARS-CoV-2 infection and hospitalization and death in Italy	Report forwarded by PHAC	wrong comparator
Jablonska et al.	The real-life impact of vaccination on COVID-19 mortality in Europe and Israel	Preprint - medRxiv	wrong population
Jacobson et al.	Post-vaccination SARS-CoV-2 infections and incidence of presumptive B.1.427/B.1.429 variant among healthcare personnel at a northern California academic medical center	Clinical Infectious Diseases	wrong intervention
Jacobson et al.	Post-vaccination SARS-CoV-2 infections and incidence of the B.1.427/B.1.429 variant among healthcare personnel at a northern California academic medical center	Preprint - medRxiv	duplicated
Jacquemont et al.	Minimal change disease relapse following SARS- CoV-2 mRNA vaccine	Kidney International	wrong study design
Jagadeesh	Clinical outcomes in vaccinated individuals	Preprint - medRxiv	wrong
Jalali et al.	Increased household transmission and immune escape of the SARS-CoV-2 Omicron variant compared to the Delta variant: evidence from Norwegian contact tracing and vaccination data	medRxiv	wrong study duration
Jara et al.	Effectiveness of an Inactivated SARS-CoV-2 Vaccine in Chile	Hand search; New England Journal of Medicine	wrong intervention
Jeulin et al.	Comparative analysis of post-vaccination anti- spike IgG antibodies in old Nursing Home Residents and in middle-aged Healthcare workers	Preprint - medRxiv	wrong outcome
June Choe et al.	Safety and effectiveness of BNT162b2 mRNA Covid-19 vaccine in adolescents	Vaccine	wrong population

Kale et al.	Clinicogenomic analysis of breakthrough infections by SARS CoV2 variants after ChAdOx1 nCoV-19 vaccination in healthcare workers	Hand search; Preprint - medRxiv	wrong intervention
Kamar et al.	Three Doses of an mRNA Covid-19 Vaccine in Solid-Organ Transplant Recipients	The New England Journal of Medicine	wrong intervention
Kannian et al.	Booster and anergic effects of the Covishield vaccine among healthcare workers in South India	Preprint - medRxiv	wrong outcome
Katz et al.	Early effectiveness of BNT162b2 Covid-19 vaccine in preventing SARS-CoV-2 infection in healthcare personnel in six Israeli hospitals (CoVEHPI)	Vaccine	wrong outcome
Katz et al.	Covid-19 Vaccine Effectiveness in Healthcare Personnel in six Israeli Hospitals (CoVEHPI)	Preprint - medRxiv	wrong intervention
Kaur et al.	Occurrence of COVID-19 in priority groups receiving ChAdOx1 nCoV-19 coronavirus vaccine (recombinant): a preliminary analysis from north India	Journal of Medical Virology	wrong intervention
Keegan et al.	Progress of the Delta variant and erosion of vaccine effectiveness, a warning from Utah	Preprint - medRxiv	wrong study design
Keehner et al.	SARS-CoV-2 Infection after Vaccination in Health Care Workers in California	The New England Journal of Medicine	wrong intervention
Keehner, et al	Resurgence of SARS-CoV-2 Infection in a Highly Vaccinated Health System Workforce.	The New England Journal of Medicine	delayed exclusion - a series of cross- sectional analysis over months (no indication of individual level follow-up times)
Keeling et al.	Waning, boosting and a path to endemicity for SARS-CoV-2	medRxiv	wrong population
Kepten et al.	BNT162B2 mRNA covid-19 vaccine in a nationwide mass vaccination setting	New England Journal of Medicine	duplicated
Kertes et al.	Effectiveness of the mRNA BNT162b2 vaccine six months after vaccination: Findings from a large Israeli HMO.	Hand search; Preprint - medRxiv	wrong control
Khan & Mahmud	Effectiveness of SARS-CoV-2 vaccination in a Veterans Affairs Cohort of Inflammatory Bowel Disease Patients with Diverse Exposure to Immunosuppressive Medications	Gastroenterology	wrong study duration
Khan et al.	SAFETY AND EFFECTIVENESS OF THE BNT162B2 MRNA COVID-19 VACCINE IN A NATIONWIDE COHORT OF PATIENTS WITH INFLAMMATORY BOWEL DISEASE	Gastroenterology	Full text unavailable
Khan et al.	Effectiveness of SARS-CoV-2 Vaccination in a Veterans Affairs Cohort of Patients With Inflammatory Bowel Disease With Diverse Exposure to Immunosuppressive Medications	Gastroenterology	wrong intervention
Khoury et al.	COVID-19 vaccine - Long term immune decline and breakthrough infections	Vaccine	wrong comparator
Kim et al.	mRNA Vaccine Effectiveness against COVID-19 among Symptomatic Outpatients Aged ≥16 Years in the United States, February - May 2021	The Jou r nal of Infectious Diseases	wrong intervention

Kim et al.	mRNA Vaccine Effectiveness against COVID-19 among Symptomatic Outpatients Aged >=16 Years in the United States, February - May 2021	The Jou r nal of infectious diseases	wrong comparator
Kislaya et al.	Comparative complete scheme and booster effectiveness of COVID-19 vaccines in preventing SARS-CoV-2 infections with SARS-CoV-2 Omicron (BA.1) and Delta (B.1.617.2) variants	medRxiv	wrong comparator
Kislaya et al.	Comparative Effectiveness of Coronavirus Vaccine in Preventing Breakthrough Infections among Vaccinated Persons Infected with Delta and Alpha Variants	Emerging infectious diseases	wrong study duration
Kislaya et al.	Delta variant and mRNA Covid-19 vaccines effectiveness: higher odds of vaccine infection breakthroughs	Preprint - medRxiv	wrong intervention
Kissling et al.	Vaccine effectiveness against symptomatic SARS- CoV-2 infection in adults aged 65 years and older in primary care: I-MOVE-COVID-19 project, Europe, December 2020 to May 2021	Hand search; Eurosurveillance	wrong intervention
Klaassen et al.	Population immunity to pre-Omicron and Omicron SARS-CoV-2 variants in US states and counties through December 1, 2021	medRxiv	wrong intervention
Klaser et al.	COVID-19 due to the B.1.617.2 (Delta) variant compared to B.1.1.7 (Alpha) variant of SARS- CoV-2: two prospective observational cohort studies	medRxiv	wrong study duration
Knobel et al.	Coronavirus disease 2019 (COVID-19) mRNA vaccine effectiveness in asymptomatic healthcare workers	Infection Control and Hospital Epidemiology	wrong intervention
Knobel et al.	COVID-19 mRNA vaccine effectiveness in asymptomatic healthcare workers	Infection Control and Hospital Epidemiology	wrong intervention
Knoll et al.	Oxford-AstraZeneca COVID-19 vaccine efficacy	The Lancet	wrong publication type
Kontou et al.	Antibody response following a two-dose mRNA vaccination regimen, in health care workers of a tertiary hospital in Athens, Greece	Journal of Personalized Medicine	wrong intervention
Koshy	Effectiveness of ChAdOx1 nCOV-19 Vaccine: Experience of a tertiary care institute	Medical Journal Armed Forces India	wrong outcome
Krisztina et al.	Real-time monitoring of the effectiveness of six COVID-19 vaccines in Hungary in 2021 using the screening method	medRxiv	wrong intervention
Kugeler et al.	Estimating the number of symptomatic SARS- CoV-2 infections among vaccinated individuals in the United State - January-April, 2021	Preprint - medRxiv	wrong study design
Kustin et al.	Evidence for increased breakthrough rates of SARS-CoV-2 variants of concern in BNT162b2 mRNA vaccinated individuals	Preprint - medRxiv	wrong study design
Lamacchia et al.	Clinical and immunological features of SARS- CoV-2 breakthrough infections in vaccinated individuals requiring hospitalization	medRxiv	wrong outcome
Landre et al.	1600P Suboptimal response to COVID-19 mRNA vaccines in older patients with cancer	Annals of Oncology	wrong comparator
Lange et al.	Immune response to COVID-19 mRNA vaccine-a pilot study	Vaccines	wrong intervention

Lanini et al.	A single intramuscular injection of monoclonal antibody MAD0004J08 induces in healthy adults SARS-CoV-2 neutralising antibody titres exceeding those induced by infection and vaccination	Preprint - medRxiv	wrong intervention
Lanthier et al.	[In subjects 16 years of age and older, is messenger RNA vaccine BNT162b2 against COVID-19 effective and safe?]	La Revue de Médecine Interne	wrong intervention
Larese Filon et al.	Incidence of COVID-19 infection in hospital workers from March 1, 2020 to May 31, 2021 routinely tested, before and after vaccination with BNT162B2	Scientific reports	wrong study duration
Lauring et al.	Clinical Severity and mRNA Vaccine Effectiveness for Omicron, Delta, and Alpha SARS-CoV-2 Variants in the United States: A Prospective Observational Study	medRxiv	wrong comparator
Layan et al.	Impact of BNT162b2 vaccination and isolation on SARS-CoV-2 transmission in Israeli households: an observational study	Preprint - medRxiv	wrong intervention
Lee et al.	POS-950 COVID-19 IN END STAGE KIDNEY DISEASE WITH RENAL REPLACEMENT THERAPIES: OUR EXPERIENCE IN PENANG	Kidney International Reports	Full-text not found
Lefèvre et al.	Beta SARS-CoV-2 variant and BNT162b2 vaccine effectiveness in long-term care facilities in France	The Lancet. Healthy longevity	wrong study duration
Lefèvre et al.	Impact of B. 1.351 (beta) SARS-CoV-2 variant on BNT162b2 mRNA vaccine effectiveness in long- term care facilities of eastern France: a retrospective cohort study	medRxiv	duplicated
Leo	Effectiveness of the mRNA BNT162b2 vaccine against SARS-CoV-2 severe infections in the Israeli over 60 population: a temporal analysis done by using the national surveillance data	medRxiv	wrong study duration
Lev-Tzion et al.	COVID-19 vaccine is effective in inflammatory bowel disease patients and is not associated with disease exacerbation	Clinical gastroenterology and hepatology : the official clinical practice journal of the American Gastroenterological Association	wrong outcome
Lewis et al.	Effectiveness of mRNA vaccines in preventing COVID-19 hospitalization by age and burden of chronic medical conditions among immunocompetent US adults, March-August 2021	The Journal of infectious diseases	wrong study duration
Lillie et al.	First dose of BNT162b2 mRNA vaccine in a Health Care Worker cohort is associated with reduced symptomatic and asymptomatic SARS- CoV-2 infection	Clinical Infectious Diseases	wrong intervention
Lim et al.	POS-962 A SURVEY OF COVID-19 INFECTION AMONG VACCINATED AND UNVACCINATED PATIENTS ON RENAL REPLACEMENT THERAPY: A SINGLE CENTRE EXPERIENCE	Kidney International Reports	Full-text not found

Lin et al.	Effectiveness of Covid-19 Vaccines over a 9- Month Period in North Carolina	The New England	wrong
Lippi & Mattiuzzi	Primary COVID-19 vaccine cycle and booster doses efficacy: analysis of Italian nationwide vaccination campaign	European journal of public health	delayed exclusion - baseline is < 6 month, which is beyond our 30.5 days average post- receipt of second dose threshold
Lippi et al.	Real-world analysis of age-dependent efficacy of COVID-19 vaccination	Research Square	wrong comparator
Liu, Cong and Lee, Junghwan and Ta, Casey and Soroush, Ali and Rogers, James R. and Kim, Jae Hyun and Natarajan, Karthik and Zucker, Jason and Weng, Chunhua	A Retrospective Analysis of COVID-19 mRNA Vaccine Breakthrough Infections ,Äi Risk Factors and Vaccine Effectiveness	medRxiv	delayed exclusion - no comparative data for unvaccinated individuals
Lo Sasso et al.	Evaluation of Anti-SARS-Cov-2 S-RBD IgG Antibodies after COVID-19 mRNA BNT162b2 Vaccine	Diagnostics (Basel, Switzerland)	wrong outcome
Lopez Bernal et	Effectiveness of Covid-19 Vaccines against the	The New England	duplicated
Lopez Bernal et al.	Effectiveness of the Pfizer-BioNTech and Oxford- AstraZeneca vaccines on covid-19 related symptoms, hospital admissions, and mortality in older adults in England: test negative case-control study	BMJ (Clinical Research Ed.)	wrong intervention
Lumley et al.	An observational cohort study on the incidence of SARS-CoV-2 infection and B.1.1.7 variant infection in healthcare workers by antibody and vaccination status	Preprint - medRxiv	duplicated
Lumley et al.	An observational cohort study on the incidence of SARS-CoV-2 infection and B.1.1.7 variant infection in healthcare workers by antibody and vaccination status	Clinical Infectious Diseases	wrong intervention
Ma et al.	Effectiveness of Covid-19 Vaccines against the SARS-COV-2-Delta (B.1.617.2) in China-A Real World Study	medRxiv	wrong outcome
Madhi et al.	ChAdOx1 nCoV-19 Vaccine Efficacy against the B 1 351 Variant Reply	The New England Journal of Medicine	wrong publication
Madhi et al.	Safety and efficacy of the ChAdOx1 nCoV-19 (AZD1222) Covid-19 vaccine against the B.1.351 variant in South Africa	Preprint - medRxiv	duplicated
Maeda et al.	Effectiveness of mRNA COVID-19 vaccines against symptomatic SARS-CoV-2 infections during the Delta variant epidemic in Japan: Vaccine Effectiveness Real-time Surveillance for SARS-CoV-2 (VERSUS)	medRxiv	wrong comparator

Mahase	Covid-19: Pfizer vaccine's efficacy declined from 96% to 84% four months after second dose, company reports	BMJ (Clinical Research Ed.)	wrong publication type
Mallow et al.	Real world SARS-COV-2 vaccine effectiveness in a Miami academic institution	The American journal of emergency medicine	wrong study duration
Maltezou et al.	COVID-19 vaccination significantly reduces morbidity and absenteeism among healthcare personnel: A prospective multicenter study	Vaccine	wrong study duration
Maneikis et al.	Immunogenicity of the BNT162b2 COVID-19 mRNA vaccine and early clinical outcomes in patients with haematological malignancies in Lithuania: a national prospective cohort study	The Lancet Haematology	wrong intervention
Manley et al.	SARS-CoV-2 vaccine effectiveness and breakthrough infections in maintenance dialysis patients	medRxiv	wrong outcome
Manley et al.	SARS-CoV-2 vaccine effectiveness and breakthrough infections in maintenance dialysis patients	medRxiv	wrong study duration
Martinez-Baz et al.	Effectiveness of COVID-19 vaccines in preventing SARS-CoV-2 infection and hospitalisation, Navarre, Spain, January to April 2021	Eurosurveillance	wrong intervention
Martínez-Baz et al.	Product-specific COVID-19 vaccine effectiveness against secondary infection in close contacts, Navarre, Spain, April to August 2021	Euro surveillance : bulletin Europeen sur les maladies transmissibles = European communicable disease bulletin	wrong comparator
Martinot et al.	Outbreak of SARS-CoV-2 infection in a long-term care facility after COVID-19 BNT162b2 mRNA vaccination	Clinical Microbiology and Infection	wrong intervention
Massimo et al.	COVID-19 convalescent plasma donors: impact of vaccination on antibody levels, breakthrough infections and reinfection rate	Preprint - medRxiv	wrong intervention
Massonnaud et al.	Evaluating COVID-19 booster vaccination strategies in a partially vaccinated population: a modeling study	SSRN	wrong study design
Mateo-Urdiales et al.	Risk of SARS-CoV-2 infection and subsequent hospital admission and death at different time intervals since first dose of COVID-19 vaccine administration, Italy, 27 December 2020 to mid- April 2021	Hand search; Eurosurveillance	wrong intervention
Mateus et al.	Low dose mRNA-1273 COVID-19 vaccine generates durable T cell memory and antibodies enhanced by pre-existing crossreactive T cell memory	Preprint - medRxiv	wrong outcome
Mathema et al.	Post-vaccination SARS-COV-2 among healthcare workers in New Jersey: a genomic epidemiological study	Preprint - medRxiv	wrong intervention
Mattar et al.	Efficacy of the CoronaVac® Vaccine in a Region of the Colombian Amazon, Was Herd Immunity Achieved?	Preprint - Research Square	wrong intervention

Mattiuzzi & Lippi	Primary COVID-19 vaccine cycle and booster doses efficacy: analysis of Italian nationwide	European journal of public health	wrong comparator
Mattiuzzi & Lippi	Efficacy of COVID-19 vaccine booster doses in older people	European geriatric medicine	wrong comparator
Mattiuzzi & Lippi	COVID-19 vaccination is highly effective to prevent SARS-CoV-2 circulation	Research Square	wrong comparator
Mazagatos et al.	Effectiveness of mRNA COVID-19 vaccines in preventing SARS-CoV-2 infections and COVID- 19 hospitalisations and deaths in elderly long-term care facility residents, Spain, weeks 53 2020 to 13 2021	Eurosurveillance	wrong intervention
McConaghy et al.	An assessment of the impact of the vaccination program on coronavirus disease 2019 (COVID-19) outbreaks in care homes in Northern Ireland-A pilot study	Infection Control and Hospital Epidemiology	wrong intervention
McConeghy et al.	Effectiveness of a SARS-CoV-2 mRNA vaccine booster dose for prevention of infection, hospitalization or death in two nation-wide nursing home systems	medRxiv	wrong outcome
McDade et al.	Durability of antibody response to vaccination and surrogate neutralization of emerging variants based on SARS-CoV-2 exposure history	Scientific Reports	wrong intervention
McEllistrem et al.	Introduction of the BNT162b2 vaccine during a COVID-19 nursing home outbreak	American Journal of Infection Control	wrong intervention
McEvoy et al.	Real-world Effectiveness of 2-dose SARS-CoV-2 Vaccination in Kidney Transplant Recipients	medRxiv	wrong comparator
McKeigue et al.	Efficacy of vaccination against severe COVID-19 in relation to Delta variant and time since second dose: the REACT-SCOT case-control study	medRxiv	wrong comparator
McKeon et al.	Real-world effectiveness and immunogenicity of mRNA-1273 in dialysis patients	Journal of the American Society of Nephrology	wrong intervention
McLean et al.	mRNA COVID-19 vaccine effectiveness against SARS-CoV-2 infection in a prospective community cohort, rural Wisconsin, November 2020-December 2021	medRxiv	wrong outcome
McLean et al.	mRNA COVID-19 vaccine effectiveness against SARS-CoV-2 infection in a prospective community cohort, rural Wisconsin, November 2020 to December 2021	Influenza and other respiratory viruses	wrong study duration
Medeiros et al.	Reduced T cell and antibody responses to inactivated coronavirus vaccine among males and individuals above 55 years old	Preprint - medRxiv	wrong intervention
Medina-Pestana et al.	Inactivated Whole-virus Vaccine Triggers Low Response Against SARS-CoV-2 Infection Among Renal Transplant Patients: Prospective Phase 4 Study Results	Transplantation	wrong intervention
Meggiolaro et al.	Effectiveness of vaccination against symptomatic and asymptomatic SARS-CoV-2 infection: a systematic review and meta-analysis	Preprint - medRxiv	wrong study design
Mehta & Silveira	COVID-19 after two doses of mRNA vaccines in kidney transplant recipients	American Journal of Transplantation	wrong

Menascu et al.	Safety and efficacy of COVID-19 Pfizer- BNT162b2 m-RNA vaccine in young MS population	Multiple Sclerosis Journal	wrong comparator
Menni et al.	Vaccine side-effects and SARS-CoV-2 infection after vaccination in users of the COVID Symptom Study app in the UK: a prospective observational study	The Lancet Infectious Diseases	wrong intervention
Meo et al.	Effect of Pfizer/BioNTech and Oxford/AstraZeneca vaccines against COVID-19 morbidity and mortality in real-world settings at countrywide vaccination campaign in Saudi Arabia	European review for medical and pharmacological sciences	wrong outcome
Meo et al.	COVID-19 vaccines: Comparison of biological, pharmacological characteristics and adverse effects of Pfizer/BioNTech and Moderna vaccines	European Review for Medical and Pharmacological Sciences	wrong study design
Meylan	Efficacy and safety of BioNTech/Pfizer and Moderna vaccines	Revue Medicale Suisse	wrong publication type
Meylan	Safety and efficacy of the Oxford-AstraZeneca vaccine: Interim analysis of four randomized controlled trials	Revue Medicale Suisse	wrong intervention
Michos et al.	Association of total and neutralizing SARS-CoV-2 spike -receptor binding domain antibodies with epidemiological and clinical characteristics after immunization with the 1st and 2nd doses of the BNT162b2 vaccine	Vaccine	wrong outcome
Mielke et al.	Fully Vaccinated and Boosted Patients Requiring Hospitalization for COVID-19: an Observational Cohort Analysis	medRxiv	wrong outcome
Mirahmadizadeh et al.	,ÄúEffectiveness of COVID-19 Vaccines in preventing Infectiousness, Hospitalization and Mortality: A Historical Cohort Study Using Iranian Registration Data During Vaccination program,Äù	medRxiv	wrong study duration
Miron et al.	Effectiveness of COVID-19 Vaccines BNT162b2 and mRNA-1273 by Days from Vaccination: A Reanalysis of Clinical Trial Data	Preprint - SSRN	wrong intervention
Mittelman et al.	Effectiveness of the BNT162b2mRNA Covid-19 Vaccine in Patients with Hematological Neoplasms	Blood	wrong study duration
Mizrahi et al.	Correlation of SARS-CoV-2 Breakthrough Infections to Time-from-vaccine; Preliminary Study	Preprint - medRxiv	wrong outcome
Mizrahi et al.	Correlation of SARS-CoV-2-breakthrough infections to time-from-vaccine	Nature Communications	duplicated
Molani et al.	Time to reinfection and vaccine breakthrough SARS-CoV-2 infections: a retrospective cohort study	medRxiv	wrong outcome
Moline et al.	Effectiveness of COVID-19 Vaccines in Preventing Hospitalization Among Adults Aged >=65 Years - COVID-NET, 13 States, February- April 2021	Morbidity and Mortality Weekly Report	wrong intervention
Moncunill et al.	Determinants of early antibody responses to COVID-19 mRNA vaccines in exposed and naive healthcare workers	medRxiv	wrong study duration
Monge et al.	Direct and Indirect Effectiveness of mRNA Vaccination against Severe Acute Respiratory	Emerging Infectious Diseases	wrong intervention

	Syndrome Coronavirus 2 in Long-Term Care Facilities, Spain		
Monge et al.	Direct and Indirect Effectiveness of mRNA Vaccination against Severe Acute Respiratory Syndrome Coronavirus 2 in Long-Term Care Facilities, Spain	Emerging infectious diseases	wrong study duration
Mor et al.	BNT162b2 Vaccination efficacy is marginally affected by the SARS-CoV-2 B.1.351 variant in fully vaccinated individuals	Preprint - medRxiv	wrong population
Mor et al.	BNT162b2 vaccine effectiveness was marginally affected by the SARS-CoV-2 beta variant in fully vaccinated individuals	Journal of clinical epidemiology	duplicated
Moustsen Helms et al.	Vaccine effectiveness after 1st and 2nd dose of the BNT162b2 mRNA Covid-19 Vaccine in long-term care facility residents and healthcare workers—a Danish cohort study	Preprint - medRxiv	wrong intervention
Muhsen et al.	Effectiveness of BNT162b2 mRNA COVID-19 vaccine against acquisitions of SARS-CoV-2 among health care workers in long-term care facilities: a prospective cohort study	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration
Muhsen et al.	Effectiveness of BNT162b2 mRNA COVID-19 vaccine against acquisitions of SARS-CoV-2 among health care workers in long-term care facilities: a prospective cohort study	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration
Munitz et al.	BNT162b2 vaccination effectively prevents the rapid rise of SARS-CoV-2 variant B.1.1.7 in high- risk populations in Israel	Cell Reports Medicine	wrong intervention
Murillo-Zamora et al.	Effectiveness of BNT162b2 COVID-19 Vaccine in Preventing Severe Symptomatic Infection among Healthcare Workers	Medicina (Kaunas, Lithuania)	wrong intervention
Murt et al.	Antibody responses to the SARS-CoV-2 vaccines in hemodialysis patients: Is inactivated vaccine effective?	Therapeutic apheresis and dialysis : official peer-reviewed journal of the International Society for Apheresis, the Japanese Society for Apheresis, the Japanese Society for Dialysis Therapy	wrong comparator
Musser et al.	Delta variants of SARS-CoV-2 cause significantly increased vaccine breakthrough COVID-19 cases in Houston, Texas	Preprint - medRxiv	wrong study design
Naaber et al.	Declined antibody responses to COVID-19 mRNA vaccine within first three months	Preprint - medRxiv	wrong outcome
Naito et al.	Real-world evidence for the effectiveness and breakthrough of BNT162b2 mRNA COVID-19 vaccine at a medical center in Japan	Human vaccines & immunotherapeutics	wrong outcome
Naleway et al.	Incidence of SARS-CoV-2 Infection, Emergency Department Visits, and Hospitalizations Because of COVID-19 Among Persons Aged ,â•12 Years, by COVID-19 Vaccination Status - Oregon and Washington, July 4-September 25, 2021	MMWR. Morbidity and mortality weekly report	wrong study duration

Nanduri et al.	Effectiveness of Pfizer-BioNTech and Moderna Vaccines in Preventing SARS-CoV-2 Infection Among Nursing Home Residents Before and During Widespread Circulation of the SARS-CoV- 2 B.1.617.2 (Delta) Variant - National Healthcare Safety Network, March 1-August 1, 2021	Morbidity and Mortality Weekly Report	wrong study design
Naranbhai et al.	Comparative immunogenicity and effectiveness of mRNA-1273, BNT162b2 and Ad26.COV2.S COVID-19 vaccines	medRxiv	wrong population
Nasreen et al.	Effectiveness of COVID-19 vaccines against symptomatic SARS-CoV-2 infection and severe outcomes with variants of concern in Ontario	Nature microbiology	wrong study duration
Nasreen et al.	Effectiveness of COVID-19 vaccines against variants of concern in Ontario, Canada	Preprint - medRxiv	wrong intervention
Nasreen et al.	Effectiveness of COVID-19 vaccines against variants of concern, Canada	Hand search; Preprint - medRxiv	wrong intervention
Nasreen et al.	Effectiveness of mRNA and ChAdOx1 COVID- 19 vaccines against symptomatic SARS-CoV-2 infection and severe outcomes with variants of concern in Ontario	medRxiv	wrong study duration
Nguyen et al.	Comparative effectiveness of ChAdOx1 versus BNT162b2 vaccines against SARS-CoV-2 infections in England and Wales: A cohort analysis using trial emulation in the Virus Watch community data	medRxiv	wrong comparator
Nomura et al.	Age and smoking predict antibody titres at 3 months after the second dose of the BNT162b2 COVID-19 vaccine	Preprint - medRxiv	wrong outcome
Nordström et al.	Effectiveness of heterologous ChAdOx1 nCoV-19 and mRNA prime-boost vaccination against symptomatic Covid-19 infection in Sweden: A nationwide cohort study	The Lancet regional health. Europe	wrong study duration
Nunes et al.	mRNA vaccines effectiveness against COVID-19 hospitalizations and deaths in older adults: a cohort study based on data-linkage of national health registries in Portugal	Preprint - medRxiv	wrong intervention
Nunes et al.	mRNA vaccine effectiveness against COVID-19- related hospitalisations and deaths in older adults: a cohort study based on data linkage of national health registries in Portugal, February to August 2021	Euro surveillance : bulletin Europeen sur les maladies transmissibles = European communicable disease bulletin	wrong study duration
Nunez Lopez et al.	Effectiveness of the BNT162b2 mRNA Covid-19 vaccine in Spanish healthcare workers	Enfermedades Infecciosas y Microbiologia Clinica	wrong intervention
Olson et al.	Effectiveness of Pfizer-BioNTech mRNA Vaccination Against COVID-19 Hospitalization Among Persons Aged 12-18 Years - United States, June-September 2021	MMWR. Morbidity and mortality weekly report	wrong study duration
Oster et al.	Association Between Exposure Characteristics and the Risk for COVID-19 Infection Among Health Care Workers With and Without BNT162b2 Vaccination	JAMA network open	wrong study design

Ostropolets & Hripcsak	COVID-19 vaccination effectiveness rates by week and sources of bias	medRxiv	delayed exclusion - VE for full vaccination is not stratified by time since full vaccination (see appendix 7-9). As for VE that is stratified by time (Figure 3 and 4), time is calculated from receipt of first dose, not second. There are no week-by-week estimates for single-dose Janssen because of the small sample size
Paetzold et al.	The effects of rapid mass vaccination against SARS-CoV-2 and its Variants-of-Concern: Evidence from an early VoCs hotspot	Preprint – Research Square	wrong study design
Painter et al.	Rapid induction of antigen-specific CD4+ T cells guides coordinated humoral and cellular immune responses to SARS-CoV-2 mRNA vaccination	Preprint - bioRxiv	wrong outcome
Pajon et al.	Initial Analysis of Viral Dynamics and Circulating Viral Variants During the mRNA-1273 Phase 3 COVE Trial	medRxiv	wrong study duration
Palich et al.	Weak immunogenicity after a single dose of SARS- CoV-2 mRNA vaccine in treated cancer patients	Annals of Oncology	wrong outcome
Palladino et al.	A quantitative risk-benefit analysis of ChAdOx1 nCoV-19 vaccine among people under 60 in Italy	Preprint - medRxiv	wrong study design
Panasoff et al.	Specific antibody response of patients with common variable immunodeficiency to BNT162b2 coronavirus disease 2019 vaccination	Annals of Allergy, Asthma and Immunology	wrong outcome
Papousek et al.	Experience with the production of COVID-19 convalescent plasma in a tertiary hospital	Vox Sanguinis	wrong outcome
Paris et al.	Effectiveness of mRNA-BNT162b2, mRNA-1273, and ChAdOx1 nCoV-19 vaccines against COVID- 19 in healthcare workers: an observational study using surveillance data	Clinical Microbiology and Infection	wrong intervention
Parry et al.	Extended interval BNT162b2 vaccination enhances peak antibody generation in older people	Preprint - medRxiv	wrong outcome
Parry et al.	Antibody responses after first and second Covid- 19 vaccination in patients with chronic lymphocytic leukaemia	Blood Cancer Journal	wrong outcome
Parry et al.	Antibody responses after first and second Covid- 19 vaccination in patients with chronic lymphocytic leukaemia	Blood cancer Journal	wrong outcome
Pascucci et al.	Evaluation of the Effectiveness and Safety of the BNT162b2 COVID-19 Vaccine in the Vaccination Campaign among the Health Workers of	International journal of environmental research and public health	wrong study duration

	Fondazione Policlinico Universitario Agostino		
	Gemelli IRCCS		
Passalacqua et	Efficacy of SARS-CoV-2 vaccination in cancer	т ·	wrong study
al.	patients during treatment: A prospective	Tumori	duration
	Observational study (ANTICOV trial)		
	P: NT 1) 1/1 CIA 10 1 C V 10 (0 f 1		
D 1	BioN Tech) and the ChAdOxT nCoV-19 (Oxford-	10	
Pattni et al.	AstraZeneca) vaccines for feducing susceptibility	medKxiv	wrong outcome
	to infection with the Delta variant (B.1.017.2) of		
	SARS-COV-2		
Davison of al	unagination with COVID 10 Vagains (Ch AdOv1	Placed	wrong study
Paulsen et al.	PCov 10	DIOOU	design
	EDA authorized mPNA COVID 10 yearings are		
Damlouvalri at al	offortive per real world avidence synthesized	Med (New York,	wrong
rawiowski et al.	enecuve per real-world evidence synthesized	N.Y.)	intervention
	Sustained T cell immunity, protection and boosting		
Powne et al	using extended dosing intervals of BNT162b2	Hand search; Preprint	wrong outcome
I ayne et ai.	mRNA vaccine	- SSRN	wrong outcome
	COVID 19 infection and vaccination in patients	Pediatric	
Peet et al.	with autoinflammatory diseases on biologics	Rheumatology	wrong outcome
	POS-912 FEFECTIVENESS OF SARS-COV 2	Kilcullatology	
Pefaur Penna et	VACCINATION IN KIDNEV TRANSPLANT	Kidney International	Full-text not
al.	PATIENTS IN CHILE	Reports	found
	Durability of mRNA-1273 vaccine-induced	Science (New York	
Pegu et al.	antibodies against SARS-CoV-2 variants	NY)	wrong outcome
	BNT162b2 vaccination in heart transplant		
Peled et al.	recipients: Clinical experience and antibody	Journal of Heart and	wrong
1 0100 00 00	response	Lung Transplantation	intervention
	Serum antibody response to BNT162b2 after	European Journal of	
Perkmann et al.	natural SARS-CoV-2 infection	Clinical Investigation	wrong outcome
	Interim Estimates of Vaccine Effectiveness of		
D ¹¹ 1 11 / 1	Pfizer-BioNTech and Moderna COVID-19	Morbidity and	wrong
Pilishvili et al.	Vaccines Among Health Care Personnel - 33 U.S.	Mortality Weekly	intervention
	Sites, January-March 2021	Report	
Dolimale at al	Effectiveness of the Single-Dose Ad26.COV2.S	m ad Davier	www.ma.contac.ma.
Polifiski et al.	COVID Vaccine	meurxiv	wrong outcome
	Post-Vaccination SARS-CoV-2 Infections among		
Porru et al.	Health Workers at the University Hospital of	Vaccines	wrong outcome
	Verona, Italy: A Retrospective Cohort Survey		
	Impact of Delta on viral burden and vaccine		Wrong
Pouwels et al.	effectiveness against new SARS-CoV-2 infections	Preprint - medRxiv	intervention
	in the UK		intervention
	Effect of Delta variant on viral burden and vaccine		
Pouwels et al.	effectiveness against new SARS-CoV-2 infections	Nature medicine	duplicated
	in the UK		
Pozdnyakova et	Decreased Antibody Responses to Ad26.COV2.S		
al.	Relative to SARS-CoV-2 mRNA Vaccines in	Gastroenterology	wrong outcome
	Patients with Inflammatory Bowel Disease		
Pozzetto et al	Immunogenicity and efficacy of heterologous	Preprint - Research	wrong
1 0220110 Ct al.	ChadOx1/BNT162b2 vaccination	Square	intervention
Prabhu et al	Antibody Response to Coronavirus Disease 2019	Obstetrics and	wrong
i iaonu ci ali	(COVID-19) Messenger RNA Vaccination in	Gynecology	intervention

	Pregnant Women and Transplacental Passage Into Cord Blood		
Pramod et al.	Effectiveness of Covishield vaccine in preventing Covid-19 - A test-negative case-control study	Vaccine	wrong study duration
Prasad et al.	COVID-19 Vaccination Associated with Reduced Post-Operative SARS-CoV-2 Infection and Morbidity	Annals of Surgery	wrong intervention
Pratesi et al.	BNT162b2 mRNA SARS-CoV-2 vaccine elicits high avidity and neutralizing antibodies in healthcare workers	Vaccines	wrong outcome
Pratò et al.	SARS-CoV-2 Transmission Risk to Household and Family Contacts by Vaccinated Healthcare Workers	Journal of Occupational and Environmental Medicine	wrong intervention
Prendecki et al.	Comparison of humoral and cellular responses in kidney transplant recipients receiving BNT162b2 and ChAdOx1 SARS-CoV-2 vaccines	Preprint - medRxiv	wrong outcome
Prendecki et al.	Humoral and T-cell responses to SARS-CoV-2 vaccination in patients receiving immunosuppression	Annals of the Rheumatic Diseases	wrong outcome
Prieto Alhambra et al.	Comparative effectiveness and safety of homologous two-dose ChAdOx1 versus heterologous vaccination with ChAdOx1 and BNT162b2: a cohort analysis	Research Square	wrong comparator
Pritchard et al.	Impact of vaccination on new SARS-CoV-2 infections in the UK	Nature Medicine	wrong intervention
Prunas et al.	Waning Effectiveness of the BNT162b2 Vaccine Against Infection in Adolescents	medRxiv	wrong population
Prunas et al.	Vaccination with BNT162b2 reduces transmission of SARS-CoV-2 to household contacts in Israel	Preprint - medRxiv	wrong study design
Puranik et al.	Comparative effectiveness of mRNA-1273 and BNT162b2 against symptomatic SARS-CoV-2 infection	Med (New York, N.Y.)	wrong comparator
Puranik et al.	Comparison of Two Highly-Effective mRNA Vaccines for COVID-19 During Periods of Alpha and Delta Variant Prevalence	Preprint - medRxiv	duplicated
Puranik, et al.	Comparison of two highly-effective mRNA vaccines for COVID-19 during periods of Alpha and Delta variant prevalence	medRxiv	delayed exclusion - retrospective cohort study (matched unvaccinated and vaccinated individuals). The authors present Kaplan-Meier plots with VE data, but no extractable information (Figure 2 and Figure S2). Additional VE by month data presented in the

			Table 3 for Breakthrough infections, that comes from modelling (but no indication of the individual level follow-up time across the specified time period)
Ramirez et al.	Correspondence on 'Immunogenicity and safety of anti-SARS-CoV-2 mRNA vaccines in patients with chronic inflammatory conditions and immunosuppressive therapy in a monocentric cohort'	Annals of the Rheumatic Diseases	wrong outcome
Ramirez et al.	SARS-CoV-2 Breakthrough Infections in Fully Vaccinated Individuals	Preprint - medRxiv	wrong outcome
Ranzani et al.	Vaccine effectiveness of ChAdOx1 nCoV-19 against COVID-19 in a socially vulnerable community in Rio de Janeiro, Brazil: a test- negative design study	Clinical microbiology and infection : the official publication of the European Society of Clinical Microbiology and Infectious Diseases	wrong study duration
Redjoul et al.	Antibody response after second BNT162b2 dose in allogeneic HSCT recipients	The Lancet	wrong outcome
Redmond et al.	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection in vaccinated and unvaccinated healthcare personnel in a Veterans' Affairs healthcare system	Infection Control and Hospital Epidemiology	wrong intervention
Regev Yochay et al.	4th Dose COVID mRNA Vaccines,Äô Immunogenicity & Efficacy Against Omicron VOC	medRxiv	wrong comparator
Revon-Riviere et al.	The BNT162b2 mRNA COVID-19 vaccine in adolescents and young adults with cancer: A monocentric experience	European Journal of Cancer	wrong intervention
Revon-Riviere et al.	The BNT162b2 mRNA COVID-19 vaccine in adolescents and young adults with cancer: A monocentric experience	European Journal of Cancer	wrong study duration
Risk et al.	Comparative Effectiveness of COVID-19 Vaccines against the Delta Variant	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong comparator
Roberts et al.	Estimating COVID-19 Vaccination Effectiveness Using Electronic Health Records of an Academic Medical Center in Michigan	medRxiv	wrong comparator
Robilotti et al.	Clinical and Genomic Characterization of SARS CoV-2 infections in mRNA Vaccinated Health Care Personnel in New York City	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration

Rodríguez- Espinosa et al.	Incidence of severe breakthrough SARS-CoV-2 infections in vaccinated kidney transplant and haemodialysis patients	Journal of nephrology	wrong comparator
Roest et al.	BNT162b2 mRNA Covid-19 vaccine in a nationwide mass vaccination setting	New England Journal of Medicine	duplicated
Rosenberg et al.	New COVID-19 Cases and Hospitalizations Among Adults, by Vaccination Status — New York, May 3–July 25, 2021	Hand search; Morbidity and Mortality Weekly Report	wrong intervention
Rosenberg et al.	COVID-19 Vaccine Effectiveness by Product and Timing in New York State	medRxiv	wrong outcome
Rosero Bixby	Vaccine effectiveness of Pfizer-BioNTech and Oxford-AstraZeneca to prevent severe COVID-19 in Costa Rica by September and October 2021: A nationwide, observational study of hospitalisations prevalence	Europe PMC	wrong study duration
Rosero-Bixby	Vaccine effectiveness of Pfizer-BioNTech and Oxford-AstraZeneca to prevent severe COVID-19 in Costa Rica by September and October 2021: A nationwide, observational study of hospitalisations prevalence	medRxiv	wrong study duration
Rovida, et al.	SARS-CoV-2 vaccine breakthrough infections are asymptomatic or mildly symptomatic and are infrequently transmitted	medRxiv	delayed exclusion - not enough time of follow up (4 months criterion)
Russo et al.	SARS-COV-2 vaccination with BNT162B2 in renal transplant patients: Risk factors for impaired response and immunological implications	Clinical Transplantation	wrong outcome
Saban et al.	Changes in infectivity, severity and vaccine effectiveness against delta COVID-19 variant ten months into the vaccination program: The Israeli case	Preventive medicine	wrong intervention
Sabnis et al.	Break-through COVID-19 infection rate with Indian strain in Single-center Healthcare Workers: A real world data	Preprint - medRxiv	wrong outcome
Saciuk et al.	Pfizer-BioNTech vaccine effectiveness against Sars-Cov-2 infection: Findings from a large observational study in Israel	Preventive medicine	wrong study duration
Saciuk et al.	Pfizer-BioNTech Vaccine Effectiveness Against SARS-CoV-2 Infection: Findings From a Large Observational Study in Israel	Hand search; Preprint - SSRN	duplicated
Saciuk et al.	Pfizer-BioNTech Vaccine Effectiveness Against SARS-CoV-2 Infection: Findings From a Large Observational Study in Israel	Preprint - SSRN	wrong intervention
Saciuk et al.	Effectiveness of a third dose of BNT162b2 mRNA vaccine	The Journal of infectious diseases	wrong comparator
Sacks	The single-dose J&J vaccine had 67% efficacy against moderate to severe-critical COVID-19 at >=14 d	Annals of Internal Medicine	wrong publication type
Sadoff et al.	Safety and Efficacy of Single-Dose Ad26.COV2.S Vaccine against Covid-19	The New England Journal of Medicine	delayed exclusion - data is in graphs and not easily extractable at this point in time

Sagiraju et al.	The effectiveness of SARS-CoV-2 vaccination in preventing severe illness and death—real-world data from a cohort of patients hospitalized with COVID-19	Preprint - medRxiv	wrong intervention
Sansone et al.	Effectiveness of BNT162b2 vaccine against SARS- CoV-2 among healthcare workers	La Medicina del Lavoro	wrong intervention
Sarkar et al.	Seroprevalence and Dynamics of anti-SARS-CoV- 2 antibody among healthcare workers following ChAdOx1 nCoV-19 vaccination	Preprint - medRxiv	wrong intervention
Saul et al.	Reanalysis of the Pfizer mRNA BNT162b2 SARS- CoV-2 vaccine data fails to find any increased efficacy following the boost: Implications for vaccination policy and our understanding of the mode of action	Preprint - medRxiv	wrong intervention
Saure et al.	Dynamic IgG seropositivity after rollout of CoronaVac and BNT162b2 COVID-19 vaccines in Chile: a sentinel surveillance study	The Lancet Infectious Diseases	wrong outcome
Scobie et al.	Monitoring incidence of covid-19 cases, hospitalizations, and deaths, by vaccination status,Äî13 US jurisdictions, April 4,ÄiJuly 17, 2021	Morbidity and Mortality Weekly Report	wrong comparator
Selby et al.	Effect of severe acute respiratory coronavirus virus 2 (SARS-CoV-2) mRNA vaccination in healthcare workers with high-risk coronavirus disease 2019 (COVID-19) exposure	Infection Control and Hospital Epidemiology	wrong intervention
Self et al.	Comparative Effectiveness of Moderna, Pfizer- BioNTech, and Janssen (Johnson & Kamp; Johnson) Vaccines in Preventing COVID-19 Hospitalizations Among Adults Without Immunocompromising Conditions - United States, March-August 2021	MMWR. Morbidity and mortality weekly report	wrong comparator
Shah et al.	Effect of vaccination on transmission of COVID- 19: an observational study in healthcare workers and their households	Preprint - medRxiv	wrong intervention
Shapiro et al.	Efficacy of booster doses in augmenting waning immune responses to COVID-19 vaccine in patients with cancer	Cancer cell	wrong comparator
Sharma et al.	Effectiveness of a third dose of BNT162b2 or mRNA-1273 vaccine for preventing post- vaccination COVID-19 infection: an observational study	medRxiv	wrong outcome
Sharma et al.	COVID-19 Vaccine Breakthrough Infections in Veterans Health Administration	medRxiv	wrong comparator
Sheikh et al.	BNT162b2 and ChAdOx1 nCoV-19 vaccine effectiveness against death from the delta variant	New England Journal of Medicine	wrong study duration
Sheikh et al.	SARS-CoV-2 Delta VOC in Scotland: demographics, risk of hospital admission, and vaccine effectiveness	The Lancet	wrong intervention
Shinde et al.	Efficacy of NVX-CoV2373 Covid-19 Vaccine against the B.1.351 Variant	Hand search; New England Journal of Medicine	wrong intervention
Shostak et al.	Early humoral response among lung transplant recipients vaccinated with BNT162b2 vaccine	The Lancet Respiratory Medicine	wrong

	Coronavirus Disease 2019 (COVID-19) Vaccine		
Shrestha et al.	Boosting in Persons Already Protected by Natural	medRxiv	wrong comparator
	or Vaccine-Induced Immunity		
Shrestha, et al.	or Vaccine-Induced Immunity Necessity of COVID-19 vaccination in previously infected individuals	medRxiv	delayed exclusion - a retrospective cohort study that estimated cumulative incidence of COVID infection over five months, among previously infected subjects who received the vaccine, compared with those of previously infected subjects who remained unvaccinated, previously uninfected subjects who received the vaccine, and previously uninfected subjects who received the vaccine, and previously uninfected subjects who remained unvaccinated. Figure 3 reports Simon-Makuch plot with cumulative incidence of COVID-19, but has no extractable information (authors presented only the number
			of individuals at risk among all the groups of interest)
Sibbel et al.	Real-World Effectiveness and Immunogenicity of BNT162b2 and mRNA-1273 SARS-CoV-2 Vaccines in Patients on Hemodialysis	Journal of the American Society of Nephrology	wrong intervention
Sibbel et al.	Real-World Effectiveness and Immunogenicity of BNT162b2 and mRNA-1273 SARS-CoV-2 Vaccines in Patients on Hemodialysis	Journal of the American Society of Nephrology : JASN	wrong study duration
Silzle et al.	Effectiveness of the BNT162b2 mRNA COVID- 19 vaccine in patients with multiple myeloma three and six months after vaccination	Swiss Medical Weekly	wrong outcome
Singer et al.	Effectiveness of BNT162b2 mRNA COVID-19 vaccine against SARS-CoV-2 variant Beta (B.1.351)	EClinicalMedicine	wrong study duration

	among persons identified through contact tracing		
	in Israel: A prospective cohort study		
	Effectiveness of BN1162b2 mRNA COVID-19		
Singer et al.	Vaccine Against SARS-CoV-2 Variant Beta	Preprint - SSRN	wrong
8	(B.1.351) Among Persons Identified Through	-L	intervention
	Contact Tracing in Israel		
	Antibody Response after First-dose of ChAdOx1-		
0.1.1	nCOV (Covishield) and BBV-152 (Covaxin)	D ID I	wrong
Singh et al.	amongst Health Care Workers in India:	Preprint - medRxiv	intervention
	Preliminary Results of Cross-sectional Coronavirus		
	Vaccine-induced Antibody Titre (COVAT) study		
Skowronski & de	Safety and efficacy of the BN1162B2 mRNA	New England Journal	wrong
Serres	$\frac{1}{10000000000000000000000000000000000$	of Medicine	intervention
	Comparative single-dose mRNA and ChAdOx1	771 I I C	
Skowronski et al.	vaccine effectiveness against SARS-CoV-2,	The Journal of	wrong
	including variants of concern: test-negative design,	infectious diseases	intervention
	British Columbia, Canada		
Sucitly at al	Genomic and Virological Characterization of		
Smith et al.	SARS-Cov-2 variants in a Subset of Unvaccinated	medKxiv	wrong population
	and vaccinated U.S. Military Personnel		
Sman alars at al	Comparison of vaccine effectiveness against the		wrong study
spensley et al.	Omicron (B.1.1.529) variant in patients receiving	medKxiv	duration
	Association of a Third Dose of RNT162h2		
Spitzer et al	Vaccine With Incidence of SARS CoV 2 Infection	ΙΔΜΔ	wrong comparator
Spitzer et al.	Among Health Care Workers in Israel	J ² 11V1/1	wrong comparator
	Comparing real-life effectiveness of various		
	COVID-19 vaccine regimens during the delta	Emerging microbes &	wrong study
Sritipsukho et al.	variant-dominant pandemic: A test-negative case-	infections	duration
	control study	milections	uululoli
	Comparing real-life effectiveness of various		
	COVID-19 vaccine regimens during the delta	Emerging microbes &	wrong study
Sritipsukho et al.	variant-dominant pandemic: A test-negative case-	infections	duration
	control study		
	Age and product dependent vaccine effectiveness		
0, 01, 1	against SARS-CoV-2 infection and hospitalisation	medRxiv	wrong comparator
Starrfelt et al.	among adults in Norway: A national cohort study,		
	January - September 2021		
	Age and product dependent vaccine effectiveness	ID .	
Stannfalt at al	against SARS-CoV-2 infection and hospitalisation		
Starriett et al.	among adults in Norway: a national cohort study,	medKxiv	wrong outcome
	January ,Äi September 2021		
			delayed exclusion
			- a cohort study,
			estimating vaccine
			effectiveness
Starrfelt, et al.	High vaccine effectiveness against COVID-19		among residents
	infection and severe disease among residents and	modPrin	and health care
	staff of long-term care facilities in Norway,	meanaiv	workers in long-
	November – June 2021		term care facilities.
			COVID-19
			vaccine
			effectiveness
			against infection,

			hospitalisation and death presented from Cox models in Tables 2 and 3 (but no information about individual level follow up; authors presented only person time at risk.
Stowe et al.	Effectiveness of COVID-19 vaccines against hospital admission with the Delta (B.1.617.2) variant	Hand search; Public Health England pre- prints	wrong intervention
Suah et al.	Waning COVID-19 Vaccine Effectiveness for BNT162b2 and CoronaVac in Malaysia: An Observational Study	medRxiv	wrong outcome
Suah et al.	PICK-ing Malaysia's Epidemic Apart: Effectiveness of a Diverse COVID-19 Vaccine Portfolio	Vaccines	wrong outcome
Sultan et al.	Distinct Vaccine Efficacy Rates Among Health Care Workers During a COVID-19 Outbreak in Jordan	medRxiv	wrong outcome
Svoboda et al.	Safety and Efficacy of Sars-Cov-2 Vaccines in Hodgkin Lymphoma Patients Receiving PD-1 Inhibitors	Blood	wrong outcome
Swift et al.	Effectiveness of mRNA COVID-19 vaccines against SARS-CoV-2 infection in a cohort of healthcare personnel	Clinical Infectious Diseases	wrong intervention
Tahor et al.	Evidence for increased breakthrough rates of SARS-CoV-2 variants of concern in BNT162b2- mRNA-vaccinated individuals	Nature Medicine	duplicated
Tande et al.	Impact of the COVID-19 Vaccine on Asymptomatic Infection Among Patients Undergoing Pre-Procedural COVID-19 Molecular Screening	Clinical Infectious Diseases	wrong intervention
Tande et al.	mRNA Vaccine Effectiveness Against Asymptomatic SARS-CoV-2 Infection Over a Seven-Month Period	Infection Control and Hospital Epidemiology	wrong study design
Tang et al.	Asymptomatic and Symptomatic SARS-CoV-2 Infections after BNT162b2 Vaccination in a Routinely Screened Workforce	JAMA - Journal of the American Medical Association	wrong intervention
Tang et al.	BNT162b2 and mRNA-1273 COVID-19 vaccine effectiveness against the Delta (B.1.617.2) variant in Qatar	Preprint - medRxiv	wrong study design
Tang et al.	BNT162b2 and mRNA-1273 COVID-19 vaccine effectiveness against the SARS-CoV-2 Delta variant in Qatar	Nature Medicine	duplicated
Tanislav et al.	Effect of SARS-CoV-2 vaccination among health care workers in a geriatric care unit after a B.1.1.7-variant outbreak	Public Health	wrong intervention
Taquet et al.	Six-month sequelae of post-vaccination SARS- CoV-2 infection: a retrospective cohort study of 10,024 breakthrough infections	medRxiv	wrong outcome

	Effectiveness of a third dose of BNT162b2		delayed exclusion
Tartof et al.	mRNA COVID-19 vaccine in a large US health	SSRN	- duplicate of
	system: A retrospective cohort study		Study ID 21-3
Tartof et al	vaccine up to 6 months in a large integrated health	Lancet (London,	duplicated
Tartor et al.	system in the USA: a retrospective cohort study	England)	dupileated
T 1 1 . 1	Can a second booster dose be delayed in patients	D 1D	
Taubel et al.	who have had COVID-19?	Preprint - medRxiv	wrong outcome
	Assessment of effectiveness of 1 dose of		Wrong
Tene et al.	BNT162B2 vaccine for SARS-CoV-2 infection 13	JAMA network open	intervention
	to 24 days after immunization		
Tene et al.	The effectiveness of the TWO-DOSE BN1162b2	Clinical Infectious	wrong
	Effectiveness of SAPS CoV 2 mPNA Vaccines	Diseases	intervention
Tenforde et al	for Preventing Covid-19 Hospitalizations in the	Clinical Infectious	wrong study
I chiorde et al	United States	Diseases	design
	Effectiveness of a Third Dose of Pfizer-BioNTech		
	and Moderna Vaccines in Preventing COVID-19	MMWR. Morbidity	
Tenforde et al.	Hospitalization Among Immunocompetent and	and mortality weekly	wrong study
	Immunocompromised Adults - United States,	report	duration
	August-December 2021		
	Effectiveness of Pfizer-BioNTech and Moderna	Morbidity and Mortality Weekly Report	wrong intervention
Tenforde et al.	Vaccines Against COVID-19 Among Hospitalized		
	March 2021		
	Match 2021		delayed exclusion
	Sustained Effectiveness of Pfizer-BioNTech and Moderna Vaccines Against COVID-19 Associated Hospitalizations Among Adults - United States,		- case-control
		Morbidity and Mortality Weekly Report (MMWR) - CDC	study, assessing
			vaccine
			effectiveness
			against
			hospitalization in
			a multistate
Tonfordo et al			network over 24
Temorue, et al.			offoctivoposs
	March-July 2021		across diverse
			time points
			presented in
			Supplementary
			material (as
			figures, with no
			extractable
			information)
Thancarai at al	Predominance of delta variant among the COVID-	The Journal of	Wrone outcome
I hangaraj et al.	May 2021	Infection	wrong outcome
	Effectiveness of ChAdOx1 nCoV-19 vaccine		
Thiruvengadam et al.	against SARS-CoV-2 infection during the delta	The Lancet. Infectious diseases	. 1
	(B.1.617.2) variant surge in India: a test-negative,		wrong study
	case-control study and a mechanistic study of post-		duration
	vaccination immune responses		
Thiruvengadam	Cellular Immune Responses are Preserved and	Preprint - SSRN	wrong
et al.	May Contribute to Chadox1 ChAdOx1 nCoV-19	riepinie obiev	intervention

	Vaccine Effectiveness Against Infection Due to SARS-CoV-2 B.1.617.2 Delta Variant Despite Reduced Virus Neutralisation		
Thomas et al.	Efficacy and safety of the BNT162b2 mRNA COVID-19 vaccine in participants with a history of cancer: subgroup analysis of a global phase 3 randomized clinical trial	Vaccine	wrong comparator
Thomas et al.	1558O COVID-19 vaccine in participants (ptcpts) with cancer: Subgroup analysis of efficacy/safety from a global phase III randomized trial of the BNT162b2 (tozinameran) mRNA vaccine	Annals of Oncology	wrong outcome
Thomas et al.	Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine through 6 Months	The New England journal of medicine	duplicated
Thomas, et al.	Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine through 6 Months	The New England Journal of Medicine	delayed exclusion - pre-print version of the article (the published version is included in the main document)
Thompson et al.	Effectiveness of a Third Dose of mRNA Vaccines Against COVID-19-Associated Emergency Department and Urgent Care Encounters and Hospitalizations Among Adults During Periods of Delta and Omicron Variant Predominance - VISION Network, 10 States, August 2021-January 2022	MMWR. Morbidity and mortality weekly report	wrong comparator
Thompson et al.	Interim Estimates of Vaccine Effectiveness of BNT162b2 and mRNA-1273 COVID-19 Vaccines in Preventing SARS-CoV-2 Infection Among Health Care Personnel, First Responders, and Other Essential and Frontline Workers - Eight U.S. Locations, December 2020-March 2021	Morbidity and Mortality Weekly Report	wrong intervention
Thompson et al.	Prevention and Attenuation of Covid-19 with the BNT162b2 and mRNA-1273 Vaccines	New England Journal of Medicine	wrong intervention
Thompson et al.	Effectiveness of covid-19 vaccines in ambulatory and inpatient care settings	New England Journal of Medicine	duplicated
Toback et al.	Safety, Immunogenicity, and Efficacy of a COVID-19 Vaccine (NVX-CoV2373) Co- administered With Seasonal Influenza Vaccines	Preprint - medRxiv	wrong intervention
Toker et al.	Vaccination status among patients with the need for emergency hospitalizations related to COVID- 19	The American journal of emergency medicine	wrong comparator
Toniasso et al.	Reduction in COVID-19 prevalence in healthcare workers in a university hospital in southern Brazil after the start of vaccination	International Journal of Infectious Diseases: IJID	wrong intervention
Tran et al.	Efficacy of COVID-19 vaccination on the symptoms of patients with long COVID: a target trial emulation using data from the ComPaRe e- cohort in France	SSRN	wrong outcome
Trapani et al.	COVID-19 vaccines in patients with cancer	The Lancet Oncology	wrong publication type
Tré-Hardy et al.	Waning antibodies in SARS-CoV-2 naïve vaccines: Results of a three-month interim analysis of	The Journal of Infection	wrong

	ongoing immunogenicity and efficacy surveillance of the mRNA-1273 vaccine in healthcare workers		
Tré-Hardy, et al.	Six-month interim analysis of ongoing immunogenicity surveillance of the mRNA-1273 vaccine in healthcare workers: A third dose is expected	Journal of Infection	delayed exclusion - data mainly focusing on immunogenicity findings.
Tsapepas et al.	Clinically Significant COVID-19 Following SARS- CoV-2 Vaccination in Kidney Transplant Recipients	American Journal of Kidney Diseases	wrong outcome
Tseng et al.	Effectiveness of mRNA-1273 against SARS-CoV- 2 Omicron and Delta variants	Nature medicine	wrong comparator
Tseng et al.	Effectiveness of mRNA-1273 against SARS-CoV- 2 omicron and delta variants		delayed exclusion - baseline is 14-90 days, which is beyond our 30.5 days average post- receipt of second dose threshold
Tsiatis et al.	Estimating vaccine efficacy over time after a randomized study is unblinded	Biometrics	wrong study design
Tyagi et al.	Breakthrough COVID19 infections after vaccinations in healthcare and other workers in a chronic care medical facility in New Delhi, India	Diabetes & Metabolic Syndrome	wrong outcome
Uschner et al.	Breakthrough SARS-CoV-2 Infections after Vaccination in North Carolina	medRxiv	wrong outcome
Uzun et al.	COVID-19: vaccination vs. hospitalization	Infection	wrong outcome
Vahidy et al.	Real World Effectiveness of COVID-19 mRNA Vaccines against Hospitalizations and Deaths in the United States	Preprint - medRxiv	article withdrawn
Vaishya et al.	SARS-CoV-2 infection after COVID-19 immunization in healthcare workers: A retrospective, pilot study	The Indian Journal of Medical Research	NO PDF
Vasileiou et al.	Interim findings from first-dose mass COVID-19 vaccination roll-out and COVID-19 hospital admissions in Scotland: a national prospective cohort study	The Lancet	wrong intervention
Vasileiou et al.	Effectiveness of First Dose of COVID-19 Vaccines Against Hospital Admissions in Scotland: National Prospective Cohort Study of 5.4 Million People	Hand search; Preprint - SSRN	wrong intervention
Vergnes	Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine	The New England Journal of Medicine	wrong intervention
Victor et al.	Protective Effect of COVID-19 Vaccine Among Health Care Workers During the Second Wave of the Pandemic in India	Mayo Clinic proceedings	wrong intervention
Victora et al.	Estimating the early impact of vaccination against COVID-19 on deaths among elderly people in Brazil: Analyses of routinely-collected data on vaccine coverage and mortality	EClinicalMedicine	wrong study design
Vijayasingham et al.	Sex-disaggregated data in COVID-19 vaccine trials	The Lancet	wrong study design
Villela et al.	Effectiveness of Mass Vaccination in Brazil against Severe COVID-19 Cases	medRxiv	wrong outcome

Vitek et al.	Vaccine effectiveness against severe acute respiratory infections (SARI) COVID-19 hospitalisations estimated from real-world surveillance data, Slovenia, October 2021	Eurosurveillance	wrong comparator
Vivaldi et al.	Correlation between post-vaccination titres of combined IgG, IgA, and IgM anti-Spike antibodies and protection against breakthrough SARS-CoV-2 infection: a population-based longitudinal study (COVIDENCE UK)	medRxiv	wrong comparator
Vokó et al.	Nationwide effectiveness of five SARS-CoV-2 vaccines in Hungary-the HUN-VE study	Clinical microbiology and infection : the official publication of the European Society of Clinical Microbiology and Infectious Diseases	wrong study duration
Voysey et al.	Safety and efficacy of the ChAdOx1 nCoV-19 vaccine (AZD1222) against SARS-CoV-2: an interim analysis of four randomised controlled trials in Brazil, South Africa, and the UK	The Lancet	wrong intervention
Voysey et al.	Single-dose administration and the influence of the timing of the booster dose on immunogenicity and efficacy of ChAdOx1 nCoV-19 (AZD1222) vaccine: a pooled analysis of four randomised trials	The Lancet	wrong intervention
Wadei et al.	COVID-19 infection in solid organ transplant recipients after SARS-CoV-2 vaccination	American Journal of Transplantation	wrong intervention
Wagner et al.	COVID-19 vaccine: mRNA-1273 is effective and safe	Pneumologie	foreign language
Waldhorn et al.	Six-Month Efficacy and Toxicity Profile of BNT162b2 Vaccine in Cancer Patients with Solid Tumors	Cancer discovery	wrong comparator
Waldhorn, et al.	Six Month Efficacy and Toxicity Profile of BNT162b2 Vaccine in Cancer Patients with Solid Tumors	Cancer Discovery	delayed exclusion - data mainly focusing on immunogenicity findings. Also, study included only vaccinated individuals (no unvaccinated controls)
Wang et al.	Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine	The New England Journal of Medicine	wrong intervention
Wang et al.	The impacts of COVID-19 vaccine timing, number of doses, and risk prioritization on mortality in the US	Preprint - medRxiv	wrong study design
Wang et al.	Increased risk for COVID-19 breakthrough infection in fully vaccinated patients with substance use disorders in the United States between December 2020 and August 2021	World Psychiatry	wrong comparator
Waxman et al.	Comparison of Natural and BNT162b2 Vaccine- induced Immunity, with and without an Enhancer or Booster Dose, on the Risk of COVID-19- Related Hospitalization in Israel	Research Square	wrong study duration

Westholter &	SARS-CoV-2 outbreak in a long-term care facility	Clinical Infectious	wrong
Taube	after vaccination with BN1162b2	Diseases	intervention
Whitaker et al.	Pfizer-BioNTech and Oxford AstraZeneca COVID-19 vaccine effectiveness and immune response among individuals in clinical risk groups	The Journal of infection	wrong study duration
Whitaker et al.	Pfizer-BioNTech and Oxford AstraZeneca COVID-19 vaccine effectiveness and immune response among individuals in clinical risk groups	Hand search - Public Health England preprints	wrong intervention
White et al.	Incident SARS-CoV-2 Infection among mRNA- Vaccinated and Unvaccinated Nursing Home Residents	The New England Journal of Medicine	wrong intervention
Wickert et al.	Estimates of Single Dose and Full Dose BNT162b2 Vaccine Effectiveness among USAF Academy cadets, 1 Mar - 1 May 2021	Preprint - medRxiv	wrong intervention
Williams et al.	Measuring vaccine efficacy against infection and disease in clinical trials: sources and magnitude of bias in COVID-19 vaccine efficacy estimates	Preprint - medRxiv	wrong intervention
Williams et al.	COVID-19 Outbreak Associated with a SARS- CoV-2 P.1 Lineage in a Long-Term Care Home after Implementation of a Vaccination Program – Ontario, April-May 2021	Hand search; Clinical Infectious Diseases	wrong intervention
Wise et al.	Covid-19: New data on Oxford AstraZeneca vaccine backs 12 week dosing interval	BMJ (Clinical Research Ed.)	wrong publication
Wise et al.	Covid-19: People who have had infection might only need one dose of mRNA vaccine	BMJ (Clinical Research Ed.)	wrong publication type
Wise et al.	Covid-19: People who have had infection might only need one dose of mRNA vaccine	BMJ (Clinical Research Ed.)	duplicated
Wise et al.	Covid-19: Pfizer BioNTech vaccine reduced cases by 94% in Israel, shows peer reviewed study	BMJ (Clinical Research Ed.)	wrong publication
Wu et al.	1562MO Effectiveness of COVID-19 vaccination in cancer patients: A nationwide Veterans Affairs study	Annals of Oncology	wrong outcome
Xie et al.	Comparative effectiveness of the BNT162b2 vs ChAdOx1 vaccine against Covid-19	medRxiv	wrong comparator
Xiong et al.	Age and Gender Disparities in Adverse Events Following COVID-19 Vaccination: Real-World Evidence Based on Big Data for Risk Management	Frontiers in Medicine	wrong intervention
Yadav et al.	The high mortality and impact of vaccination on COVID-19 in hemodialysis population in India during the second wave	Kidney International Reports	wrong intervention
Yan et al.	Rate and risk factors for breakthrough SARS-CoV- 2 infection after vaccination	Journal of Infection	wrong intervention
Yassi et al.	Infection control, occupational and public health measures including mRNA-based vaccination against SARS-CoV-2 infections to protect healthcare workers from variants of concern: a 14- month observational study using surveillance data	Preprint - medRxiv	wrong intervention
Yelin et al.	Associations of the BNT162b2 COVID-19 vaccine effectiveness with patient age and comorbidities	Preprint - medRxiv	wrong intervention
Young Xu	Effectiveness of mRNA COVID-19 Vaccines against Omicron among Veterans	medRxiv	wrong study duration

Young Xu et al.	Coverage and Effectiveness of mRNA COVID-19 Vaccines among Veterans	Preprint - medRxiv	wrong intervention
Young-Xu et al.	Coverage and Estimated Effectiveness of mRNA COVID-19 Vaccines Among US Veterans	JAMA network open	wrong study duration
Yu Chen et al.	POS-977 RISK OF COVID-19 INFECTION POST VACCINATION PROGRAMME IN PATIENTS WITH END STAGE KIDNEY DISEASE IN PENANG STATE	Kidney International Reports	Full-text not found
Zacay et al.	BNT162b2 Vaccine Effectiveness in Preventing Asymptomatic Infection With SARS-CoV-2 Virus: A Nationwide Historical Cohort Study	Open Forum Infectious Diseases	wrong intervention
Zambrano et al.	Effectiveness of BNT162b2 (Pfizer-BioNTech) mRNA Vaccination Against Multisystem Inflammatory Syndrome in Children Among Persons Aged 12-18 Years - United States, July- December 2021	MMWR. Morbidity and mortality weekly report	wrong outcome
Zaqout et al.	The initial impact of a national BNT162b2 mRNA COVID-19 vaccine rollout	International Journal of Infectious Diseases: IJID	wrong intervention
Zheutlin et al.	Durability of Protection against COVID-19 Breakthrough Infections and Severe Disease by Vaccines in the United States	medRxiv	wrong comparator