





#### COVID-19 Living Evidence Synthesis #10 (Version 10.7: 21 June 2022)

# Appendix 1: Summary of Included Studies

Note: Newly added studies in blue, updated studies in green.

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	Maximum Number of follow- up time points	VOC specific data included in report
01A-3	Andrews <sup>1</sup>	UK	Persons aged >16 years	52,333,72	BNT162b2 AZD1222 (ChAdOx1) *	Full schedule	Symptomatic cases Hospitalisations Deaths	2	Delta
02B-3	Bedston <sup>2</sup>	UK	HCWs aged ≥16 years	82,959	BNT162b2	Full schedule	Any cases	3	N/A
03B-3	Britton <sup>3</sup>	USA	Adults aged ≥20 years	1,634,271	BNT162b2 mRNA-1273 Ad26.CoV2.S *	Full schedule	Symptomatic cases	6	Delta
04B-3	Bruxvoort <sup>4</sup>	USA	KPSC members aged ≥18 years	352,878 unvaccinated and 352,878 vaccinated	mRNA-1273	Full schedule	Any cases	3	Delta
05B-3	Buchan <sup>5</sup>	Canada	Adults aged >18 years	134,435	BNT162b2 Ad26.CoV2.S	Full schedule	Symptomatic cases	3	Delta Omicron

					AZD1222 (ChAdOx1) mRNA-1273				
06C-3	Cerqueira- Silva <sup>6</sup>	Brazil	Adults aged >18 years	30,910	BNT162b2, AZD1222 (ChAdOx1) Ad26.CoV2.S *	Full schedule	Symptomatic cases	1	N/A
07C-2	Chemaitell y <sup>7</sup>	Qatar	Persons aged ≥12 years in Qatar	494,859	BNT162b2	Full schedule	All cases	4	Delta
08D-2	De Gier <sup>8</sup>	Netherlan ds	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
09E-2	El Sahly <sup>9</sup>	USA	Adults aged ≥18 years with high risk for Covid-19	28,451	mRNA-1273	Full schedule	Symptomatic cases	1	N/A
10F-6	Florea <sup>10</sup>	USA	KPSC members aged >18 years	1,854,008	mRNA-1273	Full schedule	All cases Hospitalisations	2	N/A
11K-3	Katikireddi	Scotland	Adults aged >18 years	2,534,527	AZD1222 (ChAdOx1)	Full schedule	Symptomatic cases	3	N/A
12L-3	Lin <sup>12</sup>	USA	Adults aged ≥18 years in	10,600,823	BNT162b2 Ad26.CoV2.S	Full schedule	All cases Hospitalisations	3	N/A

			North Carolina		mRNA-1273 *		Deaths		
13L-7	Lytras <sup>13</sup>	Greece	Persons aged ≥15 years	9,200,000	BNT162b2 Ad26.CoV2.S AZD1222 (ChAdOx1) mRNA-1273 *	Full schedule	Deaths	1	N/A
14M-3	Machado <sup>14</sup>	Portugal	Adults aged ≥65 years	471,439,909	BNT162b2 mRNA-1273	Full schedule	Symptomatic cases Hospitalisations Deaths	1	N/A
15N-3	Nordstro m <sup>15</sup>	Sweden	Adults aged >18 years in Sweden	1,684,958	BNT162b2 AZD1222 (ChAdOx1) mRNA-1273*	Full schedule	All cases	3	N/A
16P-3	Petras <sup>16</sup>	Prague	Hospital staff aged ≥18 years	11,443	BNT162b2 Ad26.CoV2.S AZD1222 (ChAdOx1) mRNA-1273	Full schedule	All cases	1	N/A
17 <b>P-</b> 3	Poukka <sup>17</sup>	Finland	HCWs aged 16-69 years	427,905	BNT162b2 AZD1222 (ChAdOx1) mRNA-1273	Full schedule	All cases Hospitalisations \$	1	Delta
18R-4	Robles- Fontan <sup>18</sup>	Puerto Rico	Persons aged ≥12 years	88,044	BNT162b2 Ad26.CoV2.S mRNA-1273*	Full schedule	All cases Hospitalisations Deaths	1	N/A
19 <b>R-3</b>	Rosenberg	USA	Adults aged ≥18 years in	8,690,825	BNT162b2 mRNA-1273	Full schedule	All cases Hospitalisations	1	N/A

			New York State		AZD1222 (ChAdOx1) *				
208-5	Skowronsk i <sup>20</sup>	Canada	Adults aged >18 years in BC and QC	2,846,077 (872,440 BC; 1,973,637 QC)	BNT162b2 AZD1222 (ChAdOx1) mRNA-1273*	Full schedule	All cases Hospitalisations	6	Delta
21T-3	Tartof <sup>21</sup>	USA	KPSC members aged >18 years	3,436,957	BNT162b2	Full schedule	All cases Hospitalisations	4	N/A
22T-1	Thomas <sup>22</sup>	Global	Persons aged ≥16 years	44,047	BNT162b2	Full schedule	All cases	1	N/A
23T-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
25F-3	Ferdinands 24	USA	Adults aged ≥18 years	241,204	BNT162b2 mRNA-1273	Full schedule and booster	Hospitalisations	2	Delta Omicron
26H-3	Hall <sup>25</sup>	UK	Adult HCWs aged ≥18 years	35,768	BNT162b2 Ad26.CoV2.S AZD1222 (ChAdOx1) mRNA-1273	Full schedule	All cases	2	N/A
27C-3	Chemaitell y <sup>26</sup>	Qatar	Persons aged ≥12 years in Qatar	84,884	BNT162b2	Full schedule and	Symptomatic cases	9	Omicron

						booster			
28A-4	Andrews <sup>27</sup>	England	Adults aged ≥18 years	2,663,549	BNT162b2 AZD1222(ChAd Ox1) mRNA-1273*	Full schedule	Symptomatic cases	2	Delta Omicron
29C-7	Castillo <sup>28</sup>	France	Adults aged ≥50 years	1,296,351	BNT162b2 Ad26.CoV2.S AZD1222 (ChAdOx1) mRNA-1273	Full schedule	Symptomatic cases Hospitalisations	3	Delta
30S-4	Syed <sup>29</sup>	Qatar	Persons aged ≥12 years	1,241,501	BNT162b2 mRNA-1273*	Full schedule	All cases	2	N/A
31G-5	Glatman- Freedman <sup>3</sup>	Israel	Persons aged ≥16 years	1,561,812	BNT162b2	Booster	All cases Hospitalisations Deaths	3	Omicron
32H-5	Hansen <sup>31</sup>	Denmark	Persons aged ≥12 years	3.090,833	BNT162b2 mRNA-1273*	Full schedule and Booster	All cases Hospitalisations	1	Omicron
33H-5	Horne <sup>32</sup>	England	Persons aged ≥16 years	13,923,580	BNT162b2 AZD1222 (ChAdOx1)*	Full schedule	All cases Hospitalisations Deaths	3	N/A
34K-6	Kirsebom <sup>3</sup>	England	Adults aged ≥18 years	626,148	BNT162b2 AZD1222(ChAd Ox1) mRNA-1273*	Booster	Symptomatic cases Hospitalisations	1	Omicron
35L-5	Lauring <sup>34</sup>	USA	Adults aged	11,690	BNT162b2	Full	Hospitalisations	1	N/A

			≥18 years		mRNA-1273*	schedule			
37N-5	Nyberg <sup>35</sup>	England	Adults aged ≥20 years	1,191,526	BNT162b2 AZD1222(ChAd Ox1) mRNA-1273*	Full schedule and Booster	Hospitalisations Deaths	2	Delta Omicron
38S-5	Starrfelt <sup>36</sup>	Norway	Adults aged ≥18 years	4,301,995	BNT162b2 AZD1222(ChAd Ox1) mRNA-1273*	Full schedule	All cases Hospitalisations	3	N/A
398-5	Stowe <sup>37</sup>	England	Adults aged ≥18 years	409,985	BNT162b2 AZD1222(ChAd Ox1) mRNA-1273*	Full schedule and Booster	Hospitalisations	1	Delta Omicron
40G-5	Gram <sup>38</sup>	Denmark	Persons aged ≥12 years	7,351,244	BNT162b2 mRNA-1273	Full schedule and Booster	All cases Hospitalisations	1	Delta Omicron
41L-5	Lind <sup>39</sup>	USA	Persons aged ≥5 years	130,073	BNT162b2 mRNA-1273	Full schedule	All cases	1	Omicron
42B-6	Baum <sup>40</sup>	Finland	Adults aged ≥70 years	897,932	BNT162b2 AZD1222(ChAd Ox1) mRNA-1273	Full schedule	Hospitalisations	1	Delta Omicron
43C-6	Cerqueira- Silva <sup>41</sup>	Brazil	Adults aged ≥18 years	899,050 individuals (918,219 tests)	BNT162b2 AZD1222(ChAd Ox1)	Full schedule	All cases	1	Omicron
44C-6	Cerqueira-	Brazil and	Adults aged	4,590,259	BNT162b2	Booster	All cases	1	Omicron

	Silva <sup>42</sup>	Scotland	≥18 years	individuals (4,653,517 tests)	mRNA-1273				
45G-6	Gray <sup>43</sup>	South Africa	Adults aged ≥18 years	162,637	BNT162b2 Ad26.COV2.S mRNA-1273	Full Schedule	Hospitalisation	2	Omicron
46K-6	Kirsebom <sup>4</sup>	England	Adults aged ≥40 years	10,281,119	BNT162b2, ChAdOx1-S, mRNA-1273	Booster	Symptomatic cases	2	Omicron
47N-6	Ng <sup>45</sup>	Singapore	All contact cases aged 0+ with median age of 36 years	8,470	mRNA-1273 BNT162b2.	Full Schedule	Contact cases	3	Delta
48 <b>A</b> -7	Andrejko <sup>46</sup>	USA	California Residents aged 13+ years	2,238	mRNA-1273 BNT162b2	Full Schedule	All cases	6	N/A
49C-7	Carazo <sup>47</sup>	Canada (Quebec)	community- dwelling residents aged ≥12 years	696,439	mRNA-1273 BNT162b2	Full Schedule	All cases	2	Omicron
50C-7	Chemaitell y <sup>48</sup>	Qatar	0 + years-old	138,182	BNT162b2	Booster	All cases	2	Omicron
51E-7	El Adam <sup>49</sup>	Canada (British Columbia)	HCWs within the WHITE database aged ≥18 years	23,794 HCWs for single-dose VE analyses; and 27,602	mRNA-1273 BNT162b2	Full Schedule	All cases	2	N/A

				HCWs for two- dose analyses					
52 <b>K-</b> 7	Kissling <sup>50</sup>	European countries: Croatia, France, Ireland, the Netherlan ds, Portugal, Romania, Spain, England, and Scotland	Adults aged ≥30 years	14,282	BNT162b2 Ad26.CoV2.S AZD1222 (ChAdOx1) mRNA-1273	Full Schedule	All cases	3	Delta
55 <b>R</b> -7	Richterma n <sup>51</sup>	USA	HCWs	14.520	mRNA-1273 BNT162b2	Full schedule and Booster	All cases	1	Omicron

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.

<sup>\$</sup>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 logtransformed 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) Omicron

All analyses for the current report were computed using the *metafor* package in R (version4.1.2). As of update 10.6 of our review, we used a multi-step procedure to determine which model to report according to the subgroups above.

First, when multiple studies were available for a given subgroup (e.g., when examining the effects of any vaccine type on cases), we computed three-level meta-analytic models, nesting effect sizes within studies. These models used the Restricted Maximum Likelihood procedure to obtain estimates. Moderation tests were computed to examine whether vaccine effectiveness (VE) at each follow up time period differed from the two baseline time points (e.g., 0-14 days and 14-42 days for the VE of the primary series).

Second, when only a single study was available for a given subgroup, separate random-effects models were used to estimate VE at each time point, treating all cohorts as independent groups. These models were computed using the DerSimonian and Laird procedure. This secondary option is equivalent to the meta-analytic procedure used in older versions of our review (i.e., prior to version 10.6).

Third, in cases when multiple studies were available, but the three-level models failed to produce results (e.g., due to model convergence difficulties), the results of random effects models were used instead (as per step 2). This third scenario did not occur for any of the models reported in version 10.6 of our report.

When our results tables indicate that moderation was formally tested, the subgroup employed three-level models. When tables indicate that no moderation was formally tested, the subgroups employed random effects models.

### 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). Applies to point estimates and CIs.	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: $\mathbf{VE} = (1-RR)*100$ 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: $\mathbf{VE} = (-1 + 1/RR)*100$ $\mathbf{RR} = 1 / (VE/100 + 1)$
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).
<ul><li>4. Upper CI was equal to VE</li><li>= 100% or RR = 0.</li></ul>	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 to be symmetrical (in the log RR scale) around the value of VE = 100%.
<ol> <li>A study cohort had a point estimate for VE available, but no CIs.</li> </ol>	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.
<ol> <li>A CI was reported as -/+ Infinity or a CI was reported as less than - 100% (i.e189.8%)</li> </ol>	We treated "infinity" or "less than -100%" as a missing value. We reasoned such estimates would have large enough errors as to be too imprecise to warrant including within our models.
<ol> <li>One of the CIs was equal in value to the point estimate.</li> </ol>	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.

1	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).

#### Indices of Heterogeneity

As of version 10.7 of our review, we are computing three indices of effect size heterogeneity to qualify the findings from our meta-analytic models. These indices are computed whenever we produced three-level meta-analytic models (i.e., they were not produced for random-effects models) and include:

- 1. **95% Prediction Intervals (PI).** Prediction intervals reflect the likely range within which a future effect size (i.e., a VE estimate from a new study, or VE observed in a new context) would be expected to fall. Prediction intervals are produced for every point estimate within the models (i.e., at each time point) and account for both sampling error and true variability in the population of effect sizes we are studying. Prediction intervals are represented in the same unit as our other estimates (i.e., VE as a percentage).
- a) *Formal Interpretation:* If we were to repeat our sampling of effect sizes (i.e., from primary studies) an infinite number of times, and then collected a new data point (i.e., a VE estimate from a new study), then 95% of the generated prediction intervals would be expected to capture the new data point.
- 2.  $\sigma$  (Sigma):  $\sigma$  represents the estimated standard deviation in the (true) population of VE (i.e., without sampling error). The unit of this index is the same as used during the meta-analytic process; in our case,  $\sigma$  is provided in log odds ratios. In three-level models,  $\sigma$  can be divided into two levels.
- a) *Within-Study*  $\sigma$ : Indicates variability in VE within studies.
- b) Between-Study  $\sigma$ : Indicates variability in VE between studies. The between-study  $\sigma$  is comparable in interpretation to the tau ( $\tau$ ) parameter produced in traditional random effects models.
- 3.  $I^2$ . The value of  $I^2$  (which ranges from 0 to 1) captures the proportion of variability in observed effect sizes which cannot be attributed to sampling error. For example, a value of 0 indicates that most of the variability in VE estimates may be due to sampling errors, and a value of 1 indicates that most of the variability can be attributed to true variation in VE across studies (accounting for any sampling error). This relative index of heterogeneity can be broken down into two levels:
- a) *Within-Study*  $I^2$ : Indicates the relative heterogeneity in VE observed within studies.
- b) *Between-Study*  $I^2$ : Indicates the relative heterogeneity in VE observed between studies. The betweenstudy  $I^2$  is comparable in interpretation to the  $I^2$  produced in traditional random effects models.

### 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. real-time 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.1, BA.2, B.A.3).

**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

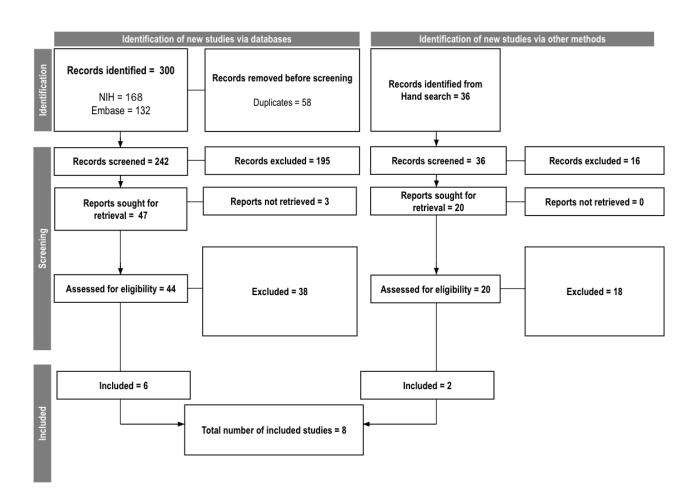
We appraised the quality of the individual studies using an adapted version of ROBINS-I. This tool classifies the Risk of Bias of a study as **Low, Moderate, Serious, Critical, or No Information**. *Low Risk of Bias indicates High Quality, and Critical Risk of Bias indicates Very Low (insufficient) Quality*. 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 6a: Flow chart of studies included in the current update:



#### Appendix 6b: Studies excluded from the current update:

Authors	Title	Journal	Reason for exclusion
Abu-Raddad et al.	Effect of mRNA Vaccine Boosters against SARS-CoV-2 Omicron Infection in Qatar	New England Journal of Medicine	wrong study duration
Martellucci et al.	Effectiveness of COVID-19 Vaccines in the General Population of an Italian Region before and during the Omicron Wave	Vaccines	wrong study duration
Akaishi et al.	Effectiveness of mRNA COVID-19 Vaccines in Japan during the Nationwide Pandemic of the Delta Variant	Tohoku Journal of Experimental Medicine	wrong study duration (follow-up period not an average above 112 days)

AlQahtani et al.	Post-vaccination outcomes in association with four COVID-19 vaccines in the Kingdom of Bahrain	Scientific reports	wrong study duration
Altarawneh et al.	Effects of Previous Infection and Vaccination on Symptomatic Omicron Infections	The New England journal of medicine	wrong study duration
Anonymous	Erratum: Department of Error (The Lancet (2022) 399(10331) (1254-1264), (S0140673622000113), (10.1016/S0140- 6736(22)00011-3))	The Lancet	No PDF available
Ashby et al.	Severity of COVID-19 after Vaccination among Hemodialysis Patients: An Observational Cohort Study	Clinical journal of the American Society of Nephrology : CJASN	wrong study duration
Aslam et al.	Association of disease severity and death outcome with vaccination status of admitted COVID-19 patients in delta period of SARS-COV-2 in mixed variety of vaccine background	Saudi journal of biological sciences	wrong outcome
Bansal et al.	Duration of COVID-19 mRNA Vaccine Effectiveness against Severe Disease	Preprint - medRxi	wrong study duration
Bestvina et al.	COVID-19 Outcomes, Patient Vaccination Status, and Cancer-Related Delays during the Omicron Wave: A Brief Report from the TERAVOLT Analysis	JTO clinical and research reports	wrong outcome
Bjork et al.	COVID-19 vaccine effectiveness against severe disease from the Omicron BA.1 and BA.2 subvariants - surveillance results from southern Sweden, December 2021 to March 2022	Preprint - medRxi	wrong study design
Branda et al.	Impact of the additional/booster dose of COVID-19 vaccine against severe disease during the epidemic phase characterized by the predominance of the Omicron variant in Italy, November 2021 - March 2022	Preprint - medRxi	wrong study duration
Cerqueira-Silva et al.	Effectiveness of CoronaVac, ChAdOx1 nCoV-19, BNT162b2, and Ad26.COV2.S among individuals with previous SARS- CoV-2 infection in Brazil: a test-negative, case-control study	The Lancet Infectious Diseases	Already included
Chen et al.	Clinical Characteristics of COVID-19 Patients Infected by the Omicron Variant of SARS-CoV-2	Frontiers in Medicine	wrong outcome
Corral-Gudino et al.	The Omicron wave and the waning of COVID-19 vaccine effectiveness. Influence of vaccine booster and age on confirmed infection incidence	European journal of internal medicine	wrong study duration

Fano et al.	COVID-19 vaccines coverage and	Expert Review	No PDF available
	effectiveness against SARS-CoV-2	of Vaccines	
	infection among residents in the largest		
	Health Authority of Lazio region (Italy): a		
	population-based cohort study		
Gazit et al.	Short term, relative effectiveness of four	The BMJ	wrong comparator
	doses versus three doses of BNT162b2		
	vaccine in people aged 60 years and older		
	in Israel: Retrospective, test negative,		
	case-control study		
Glatman-	Effectiveness of BNT162b2 Vaccine	Emerging	Already included
Freedman et al.	Booster against SARS-CoV-2 Infection	Infectious	
	and Breakthrough Complications, Israel	Diseases	
Gram et al.	Vaccine effectiveness against SARS-CoV-	Preprint -	Already included
	2 infection and COVID-19-related	medRxi	
	hospitalization with the Alpha, Delta and		
	Omicron SARS-CoV-2 variants: a		
	nationwide Danish cohort study		
Gray et al.	SAFETY and EFFECTIVENESS of the	Topics in	No PDF available
	Ad26.COV2.S VACCINE in SOUTH	Antiviral	
	AFRICA	Medicine	
Grewal et al.	Effectiveness of a Fourth Dose of		wrong study
	COVID-19 Vaccine among Long-Term		duration
	Care Residents in Ontario, Canada: Test-		
	Negative Design Study		
Hara et al.	Real-World Effectiveness of the mRNA	Vaccines	wrong study
	COVID-19 Vaccines in Japan: A Case-		duration
	Control Study		
Hines et al.	SARS-CoV-2 VACCINE	Topics in	wrong publication
	EFFECTIVENESS for IN-HOSPITAL	Antiviral	type
	MORTALITY-ZAMBIA, 2021	Medicine	
Jawad et al.	EVALUATION OF COVID-19	Wiadomosci	wrong study
	VACCINES EFFICACY IN IRAQI	lekarskie	duration
	PEOPLES	(Warsaw, Poland	
T 1		: 1960)	<b>D</b> 1 1 11
Lee et al.	Vaccine effectiveness against COVID-19	The Lancet	Excluded because
	breakthrough infections in patients with	Oncology	of critical RoB
	cancer (UKCCEP): a population-based		
Lauda ( 1	test-negative case-control study		
Lewis et al.	Effectiveness of the Ad26.COV2.S (Jo	Clinical	wrong comparator
	hnson & Johnson) COVID-19 Vaccine	infectious	
	for Preventing COVID-19	diseases	
	Hospitalizations and Progression to High		
T:	Disease Severity in the United States	「 「 「 一 一 一	( 1
Lin et al.	EFFECTIVENESS of COVID-19	Topics in	wrong study
	VACCINATION among PEOPLE	Antiviral	duration
	LIVING with HIV during AN	Medicine	
	OUTBREAK		

Lytras et al.	Comparative effectiveness and durability of COVID-19 vaccination against death and severe disease in an ongoing	Journal of medical virology	wrong comparator
Machado et al.	nationwide mass vaccination campaignSAFETY OF VACCINATIONAGAINST SARS-COV-2 IN PEOPLEWITH RHEUMATIC ANDMUSCULOSKELETAL DISEASES:RESULTS FROM THE EULARCORONAVIRUS VACCINE (COVAX)PHYSICIAN-REPORTED REGISTRY	Rheumatology (United Kingdom)	wrong outcome
Marra et al.	Effectiveness of heterologous COVID-19 vaccine booster dosing in Brazilian healthcare workers, 2021	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration
Mirahmadizadeh et al.	Effectiveness of Coronavirus Disease 2019 Vaccines in Preventing Infection, Hospital Admission, and Death: A Historical Cohort Study Using Iranian Registration Data During Vaccination Program	Open forum infectious diseases	wrong study duration
Monge et al.	Effectiveness of a second dose of an mRNA vaccine against SARS-CoV-2 Omicron infection in individuals previously infected by other variants	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration
Monge et al.	Effectiveness of mRNA vaccine boosters against infection with the SARS-CoV-2 omicron (B.1.1.529) variant in Spain: a nationwide cohort study	The Lancet. Infectious diseases	wrong study duration
Murali et al.	Effectiveness of ChAdOx1 nCoV-19 Corona Virus Vaccine (CovishieldTM) in preventing SARS-CoV2 infection, Chennai, Tamil Nadu, India, 2021	Preprint - medRxi	wrong study duration
Nasreen et al.	Effectiveness of COVID-19 vaccines against hospitalization and death in Canada: A multiprovincial test-negative design study	Preprint - medRxi	wrong outcome
Naylor et al.	Effectiveness of first, second, and third COVID-19 vaccine doses in solid organ transplant recipients: A population-based cohort study from Canada	American Journal of Transplantation	wrong study duration

Oliver et al.	Vaccine Effectiveness Against SARS-	Journal of the	wrong study
Oliver et al.	CoV-2 Infection and Severe Outcomes in	American	wrong study duration
	the Maintenance Dialysis Population in	Society of	duration
	Ontario, Canada	Nephrology	
Patalon et al.	Waning effectiveness of the third dose of	Nature	wrong study
Fataloli et al.	the BNT162b2 mRNA COVID-19	Communications	duration
	vaccine	Communications	duration
Petrie et al.	Effectiveness of COVID-19 mRNA	Duranist	
Petrie et al.		Preprint - medRxi	wrong study duration
	vaccine booster dose relative to primary	meanxi	duration
	series during a period of Omicron circulation		
D' / 1			1
Price et al.	BNT162b2 Protection against the	New England	wrong population,
	Omicron Variant in Children and	Journal of	youth
<u> </u>	Adolescents Vaccine effectiveness and duration of	Medicine	T 1 1 11
Suarez Castillo et		Global	Excluded because
al.	protection against symptomatic infections	epidemiology	of critical RoB
	and severe Covid-19 outcomes in adults		
	aged 50Å years and over, France, January		
0 1	to mid-December 2021		
Sun et al.	COVID-19 BOOSTER VACCINE	Topics in	Conference report
	EFFECTIVENESS in PEOPLE with and	Antiviral	
0 1 1	WITHOUT IMMUNE DYSFUNCTION	Medicine	
Syed et al.	Effectiveness of COVID-19 vaccines	Journal of	Alereadu included
		Infection	
Tsundue et al.	First and second doses of Covishield	BMJ global	wrong study design
	vaccine provided high level of protection	health	
	against SARS-CoV-2 infection in highly		
	transmissible settings: results from a		
	prospective cohort of participants residing		
	in congregate facilities in India		-
Tucker et al.	Evaluating clinical effectiveness of SARS-	Transplant	no VE data, wrong
	CoV-2 vaccine in solid organ transplant	infectious	time points
	recipients: A propensity score matched	disease : an	
	analysis	official journal	
		of the	
		Transplantation	
		Society	
Voko et al.	Effectiveness and waning of protection	Preprint -	no useful data,
	with different SARS-CoV-2 primary and	medRxiv	baseline is long
	booster vaccines during the Delta		
	pandemic wave in 2021 in Hungary		
	(HUN-VE 3 study)		
Wright et al.	Comparative vaccine effectiveness against	The Lancet	data in figures
	severe COVID-19 over time in US	Respiratory	
	hospital administrative data: a case-control	Medicine	
	study		

# Appendix 7: Studies excluded from the updates 1-6:

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 Journal 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	Preprint - medRxiv	wrong outcome
Abu-Raddad et al.	Waning mRNA-1273 Vaccine Effectiveness against SARS-CoV-2 Infection in Qatar	New England Journal of Medicine	wrong publication type
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	Preprint - medRxiv	wrong comparator
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	Preprint - 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
Abu-Raddad et al.	Protection offered by mRNA-1273 versus BNT162b2 vaccines against SARS-CoV-2 infection and severe COVID-19 in Qatar	Preprint - medRxiv	wrong comparator
Abu-Raddad et al.	Effectiveness of the BNT162b2 Covid-19 Vaccine against the B.1.1.7 and B.1.351 Variants	The New England Journal of Medicine	wrong 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
Akaishi et al.	Effectiveness of mRNA COVID-19 Vaccines in Japan During the Nationwide Pandemic of the Delta Variant	The Tohoku journal of experimental medicine	wrong outcome, wrong comparator
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	Preprint - 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	Preprint - 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
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
Altarawneh et al.	Effect of prior infection, vaccination, and hybrid immunity against symptomatic BA.1 and BA.2 Omicron infections and severe COVID-19 in Qatar	Preprint - medRxiv	wrong study duration
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	Prep <del>r</del> int - 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
Amodio et al.	Effectiveness of mRNA COVID-19 Vaccination on SARS-CoV-2 Infection and COVID-19 in Sicily over an Eight-Month Period	Vaccines	wrong study duration
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	Preprint - medRxiv	wrong study duration
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	Preprint - 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 intervention
Andrews et al.	Effectiveness of COVID-19 vaccines against the Omicron (B.1.1.529) variant of concern	Preprint - medRxiv	duplicated
Andrews et al.	Effectiveness of COVID-19 vaccines against the Omicron (B.1.1.529) variant of concern	Preprint - 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
Anonymous et al.	Covid-19 vaccine booster dose: demonstrated clinical efficacy during Delta variant predominance, and no new safety signals	Prescrire International	No pdf found
Araminda & Ramatillah	Evaluation comparison between Astrazeneca and Moderna vaccine's side effects and efficacy among Indonesia society based on sociodemography	International Journal of Applied Pharmaceutics	wrong study design
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	Preprint - medRxiv	wrong comparator
Arbel et al.	Effectiveness of a second BNT162b2 booster vaccine against hospitalization and death from COVID-19 in adults aged over 60 years	Nature medicine	wrong study duration
Arnold et al.	Are vaccines safe in patients with Long COVID? A prospective observational study	Preprint - medRxiv	wrong intervention
Arora et al.	Adverse events and breakthrough infections associated with COVID-19 vaccination in the Indian population	Journal of Medical Virology	wrong study duration
Arregoces- Castillo et al.	Effectiveness of COVID-19 vaccines in older adults in Colombia: a retrospective, population- based study of the ESPERANZA cohort	The Lancet. Healthy longevity	wrong outcome

Aslam et al.	Coronavirus disease 2019 vaccination is protective of clinical disease in solid organ	Transplant Infectious Disease	wrong outcome
	transplant recipients		
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	Preprint - 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	Preprint - 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 elderly nursing home but reduced transmission and disease severity	Clinical Infectious Diseases	wrong intervention
Bajema et al.	Comparative Effectiveness and Antibody Responses to Moderna and Pfizer-BioNTech COVID-19 Vaccines among Hospitalized Veterans - Five Veterans Affairs Medical Centers, United States, February 1-September 30, 2021	MMWR. Morbidity and mortality weekly report	wrong comparator
Bajema et al.	Effectiveness of COVID-19 mRNA Vaccines Against COVID-19-Associated Hospitalization - Five Veterans Affairs Medical Centers, United States, February 1-August 6, 2021	MMWR. Morbidity and mortality weekly report	wrong outcome
Balicer et al.	Effectiveness of the BNT162b2 mRNA COVID-19 Vaccine in Pregnancy	Preprint – Research Square	wrong intervention
Baltas et al.	Post-vaccination COVID-19: A case-control study and genomic analysis of 119 breakthrough infections in partially vaccinated individuals	Clinical Infectious Diseases	wrong intervention
Banon et al.	BNT162b2 Messenger RNA COVID-19 Vaccine Effectiveness in Patients With Inflammatory Bowel Disease: Preliminary Real- World Data During Mass Vaccination Campaign	Gastroenterology	duplicated
Bar On et al.	BNT162b2 vaccine booster dose protection: A nationwide study from Israel	Preprint - medRxiv	wrong intervention

Barbosa 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	duplicated
Barda et al.	Effectiveness of a third dose of the BNT162b2 mRNA COVID-19 vaccine for preventing severe outcomes in Israel: an observational study	The Lancet	wrong comparator
Barlow et al.	Effectiveness of COVID-19 Vaccines Against SARS-CoV-2 Infection During a Delta Variant Epidemic Surge in Multnomah County, Oregon, July 2021	Preprint - medRxiv	wrong intervention
Barnabas et al.	A Public Health COVID-19 Vaccination Strategy to Maximize the Health Gains for Every Single Vaccine Dose	Annals of Internal Medicine	wrong outcome
Bar-On et al.	Protection of BNT162b2 vaccine booster against Covid-19 in Israel	New England Journal of Medicine	wrong comparator
Barrière et al.	Impaired immunogenicity of BNT162b2 anti- SARS-CoV-2 vaccine in patients treated for solid tumors	Annals of Oncology	wrong outcome
Barros 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	duplicated
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
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
Baum et al.	Effectiveness of vaccination against SARS-CoV- 2 infection and Covid-19 hospitalisation among Finnish elderly and chronically ill-An interim analysis of a nationwide cohort study	PloS one	wrong comparator
Baum et al.	Effectiveness of vaccination against SARS-CoV- 2 infection and Covid-19 hospitalization among Finnish elderly and chronically ill—An interim analysis of a nationwide cohort study	Preprint - medRxiv	wrong intervention
Behera et al.	Effectiveness of COVID-19 vaccine (Covaxin) against breakthrough SARS-CoV-2 infection in India	Human Vaccines and Immunotherapeutics	wrong outcome
Bello Chavolla et al.	Effectiveness of a nation-wide COVID-19 vaccination program in Mexico		wrong study duration
Belmin et al.	First-Dose Coronavirus 2019 Vaccination 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	Preprint - 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
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
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
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	Preprint - 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	Preprint - 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
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
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
Björk et al.	COVID-19 vaccine effectiveness against severe disease from SARS-CoV-2 Omicron BA.1 and BA.2 subvariants - surveillance results from southern Sweden, December 2021 to March 2022	Euro surveillance : bulletin Europeen sur les maladies transmissibles = European communicable disease bulletin	wrong study duration
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	Preprint - 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
Botton et al.	Effectiveness of Ad26.COV2.S Vaccine vs BNT162b2 Vaccine for COVID-19 Hospitalizations	JAMA Network Open	wrong comparator
Bookstein Peretz et al.	Short-term outcome of pregnant women vaccinated with BNT162b2 mRNA COVID-19 vaccine	Ultrasound in Obstetrics & Gynecology	wrong intervention
Botton et al.	Effectiveness of Ad26.COV2.S Vaccine vs BNT162b2 Vaccine for COVID-19 Hospitalizations	JAMA network open	wrong comparator
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
Braeye et al.	Vaccine effectiveness against onward transmission of SARS-CoV2-infection by variant of concern and time since vaccination, Belgian contact tracing, 2021	Vaccine	no usable data

Braeye et al.	COVID-19 Vaccine effectiveness against symptomatic infection and hospitalization in	Preprint - medRxiv	no follow-up data
	Belgium, July 2021-APRIL 2022		
Brinkley- Rubinstein et al.	Breakthrough SARS-CoV-2 Infections in Prison after Vaccination	The New England Journal of Medicine	wrong intervention
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
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	Preprint - medRxiv	wrong outcome
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 et al.	Effectiveness of mRNA-1273 against Delta, Mu, and other emerging variants	Preprint - medRxiv	delayed exclusion - baseline VE assessed at 14-60 (below our 30-day threshold)
Buchan et al.	Effectiveness of COVID-19 vaccines against Omicron or Delta symptomatic infection and severe outcomes	Preprint - medRxiv	duplicated
Buchan et al.	Effectiveness of COVID-19 vaccines against Omicron or Delta symptomatic infection and severe outcomes	Preprint - medRxiv	wrong comparator
Buchan et al.	Effectiveness of COVID-19 vaccines against Omicron or Delta infection	Preprint - 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.	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
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
Butt et al.	Relative Vaccine Effectiveness of a SARS-CoV- 2 mRNA Vaccine Booster Dose Against the Omicron Variant	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration; Data reported in figures only
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	Hand search; Preprint - SSRN	duplicated
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 Figure 3 (but
			no extractable
			information
			presented).
Callaghan et al.	Real-world Effectiveness of the Pfizer-	Transplantation	wrong outcome
0	BioNTech BNT162b2 and Oxford-AstraZeneca	1	0
	ChAdOx1-S Vaccines Against SARS-CoV-2 in		
	Solid Organ and Islet Transplant Recipients		
Callaghan et al.	Real-world Effectiveness of the Pfizer-	Transplantation	wrong outcome
Ganaghan et al.	BioNTech BNT162b2 and Oxford-AstraZeneca	1 milliophantacion	wrong outcome
	ChAdOx1-S Vaccines Against SARS-CoV-2 in		
	Solid Organ and Islet Transplant Recipients		
Carazo et al.	Single-dose mRNA vaccine effectiveness against	Preprint - medRxiv	wrong
Calazo et al.	SARS-CoV-2 in healthcare workers extending	i iepiint - mearxiv	intervention
	e		intervention
	16 weeks post-vaccination: a test-negative design		
Carazo et al.	from Quebec, Canada	Clinical infectious	dualizated
Carazo et al.	Single-dose mRNA vaccine effectiveness against		duplicated
	SARS-CoV-2 in healthcare workers extending	diseases : an official	
	16 weeks post-vaccination: a test-negative design	publication of the	
	from Quebec, Canada	Infectious Diseases	
		Society of America	
Cardona et al.	SARS-CoV-2 Vaccinated Breakthrough	Research Square	wrong outcome
	Infections With Fatal and Critical Outcomes in		
	the Department of Antioquia, Colombia		
Carrera et al.	How well do hemodialysis patients respond to	Journal of the	wrong
	the BNT162b2 mRNA COVID-19 vaccine	American Society of	intervention
		Nephrology	
Castillo et al.	Vaccine effectiveness and duration of protection	Preprint - medRxiv	Already included
	against symptomatic and severe Covid-19 during		
	the first year of vaccination in France		
Cerqueira Silva	Influence of age on the effectiveness and	Preprint - medRxiv	wrong
et al.	duration of protection in Vaxzevria and		intervention
	CoronaVac vaccines		
Cerqueira-Silva	Vaccine effectiveness of heterologous	Nature Medicine	already assessed
et al.	CoronaVac plus BNT162b2 in Brazil		
Cerqueira-Silva	Influence of age on the effectiveness and	Lancet Regional	wrong
et al.	duration of protection of Vaxzevria and	Health. Americas	intervention
	CoronaVac vaccines: A population-based study		
Cerqueira-Silva	Effectiveness of CoronaVac, ChAdOx1 nCoV-	The Lancet.	wrong study
et al.	19, BNT162b2, and Ad26.COV2.S among	Infectious diseases	duration
ci an	17, 17, 11, 10, 10, and 110, 00, 12.0 annong	miceuous uiscases	auranon

	individuals with previous SARS-CoV-2 infection in Brazil: a test-negative, case-control study		
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	Preprint - 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	Preprint - 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	Preprint - 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 mRNA vaccine protection against SARS-CoV-2 Omicron BA.1 and BA.2 subvariants in Qatar		wrong study duration
Chemaitelly et al.	Duration of protection of BNT162b2 and mRNA-1273 COVID-19 vaccines against symptomatic SARS-CoV-2 Omicron infection in Qatar	Preprint - medRxiv	already assessed
Chemaitelly et al.	Duration of protection of BNT162b2 and mRNA-1273 COVID-19 vaccines against symptomatic SARS-CoV-2 Omicron infection in Qatar	Preprint - medRxiv	Already assessed before
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
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.	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
Chevallier et al.	Effectiveness of a third dose of BNT162b2 anti- SARS-CoV-2 mRNA vaccine over a 6-month follow-up period in allogenic hematopoietic stem cells recipients	Hematological Oncology	wrong study duration
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	Preprint - medRxiv	wrong intervention
Cohen et al.	Effectiveness of the BNT162b vaccine fourth dose in reducing SARS-CoV-2 infection among healthcare workers in Israel, a multi-center cohort study	Preprint - medRxiv	wrong comparator
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	Data reported in figures only
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
Corrao et al.	Balancing Benefits and Harms of COVID-19 Vaccines: Lessons from the Ongoing Mass Vaccination Campaign in Lombardy, Italy	Vaccines	Wrong intervention
Couderc et al.	Acceptance, efficacy, and safety of COVID-19 vaccination in older patients with cancer	Journal of geriatric oncology	wrong study duration

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
Dale et al.	Investigation of A SARS-CoV-2 Delta (B.1.617.2) Variant Outbreak Among Residents of a Skilled Nursing Facility and Vaccine Effectiveness Analysis - Maricopa County, Arizona, June-July 2021	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration
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
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
Demir et al.	Differences in clinical outcomes of COVID-19 among vaccinated and unvaccinated kidney transplant recipients	Vaccine	wrong outcome
De Salazar et al.	High coverage COVID-19 mRNA vaccination rapidly controls SARS-CoV-2 transmission in long-term care facilities	Communications medicine	wrong study design
Dickerman et al.	Comparative effectiveness of BNT162B2 and mRNA-1273 vaccines in U.S. Veterans	New England Journal of Medicine	wrong comparator
Domi et al.	The BNT162b2 vaccine is associated with lower new COVID-19 cases in nursing home residents and staff	Journal of the American Geriatrics Society	wrong intervention
Donadio et al.	Asymptomatic COVID-19 cases among older patients despite BNT162b2 vaccination: A case	The Journal of Infection	wrong intervention

	series in a geriatric rehabilitation ward during an outbreak		
Drawz et al.	Effectiveness of BNT162b2 and mRNA-1273 Second Doses and Boosters for SARS-CoV-2 infection and SARS-CoV-2 Related Hospitalizations: A Statewide Report from the Minnesota Electronic Health Record Consortium	Preprint - medRxiv	wrong comparator
Drawz et al.	Effectiveness of BNT162b2 and mRNA-1273 Second Doses and Boosters for SARS-CoV-2 infection and SARS-CoV-2 Related Hospitalizations: A Statewide Report from the Minnesota Electronic Health Record Consortium	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong comparator
Du Plessis et al.	Efficacy of the ChAdOx1 nCoV-19 Covid-19 Vaccine against the B.1.351 Variant	New England Journal of Medicine	duplicated
Dulovic et al.	Diminishing immune responses against variants of concern in dialysis patients four months after SARS-CoV-2 mRNA vaccination	Preprint - medRxiv	wrong outcome
Ebinger et al.	Antibody responses to the BNT162b2 mRNA vaccine in individuals previously infected with SARS-CoV-2	Nature Medicine	wrong intervention
Ebinger et al.	Prior COVID-19 Infection and Antibody Response to Single Versus Double Dose mRNA SARS-CoV-2 Vaccination	Preprint - medRxiv	wrong outcome
Edelstein et al.	BNT 13b2 Pfizer vaccine protects against SARS-CoV-2 respiratory mucosal colonization even after prolonged exposure to positive family members	The Journal of Hospital Infection	wrong outcome
Efrati et al.	Safety and humoral responses to BNT162b2 mRNA vaccination of SARS-CoV-2 previously infected and naive populations	Scientific Reports	wrong outcome
Ella et al.	Efficacy, safety, and lot to lot immunogenicity of an inactivated SARS-CoV-2 vaccine (BBV152): a, double-blind, randomised, controlled phase 3 trial	Preprint - medRxiv	wrong intervention
Elliott et al.	Rapid increase in Omicron infections in England during December 2021: REACT-1 study	Rapid increase in Omicron infections in England during December 2021: REACT-1 study	wrong outcome
Elliott et al.	REACT-1 round 13 final report: exponential growth, high prevalence of SARS-CoV-2 and vaccine effectiveness associated with Delta variant in England during May to July 2021	Hand search; Preprint - medRxiv	wrong intervention
Emary et al.	Efficacy of ChAdOx1 nCoV-19 (AZD1222) vaccine against SARS-CoV-2 variant of concern	The Lancet	wrong intervention

	202012/01 (B.1.1.7): an exploratory analysis of a randomised controlled trial		
Embi et al.	Effectiveness of two-dose vaccination with mRNA COVID-19 vaccines against COVID- 19-associated hospitalizations among immunocompromised adults-Nine States, January-September 2021	American journal of transplantation : official journal of the American Society of Transplantation and the American Society of Transplant Surgeons	wrong outcome
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	Preprint - medRxiv	wrong comparator
Eick-Cost et al.	Effectiveness of mRNA-1273, BNT162b2, and JNJ-78436735 COVID-19 Vaccines among US Military Personnel before and during the Predominance of the Delta Variant	JAMA Network Open	wrong study duration
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 an mRNA vaccine booster dose against SARS-CoV-2 infection and severe COVID-19 in persons aged >=60 years and other high-risk groups during predominant circulation of the Delta variant in Italy, 19 July to 12 December 2021	Expert review of vaccines	Already assessed before

Fabiani, M. et al.	Effectiveness of an mRNA vaccine booster dose against SARS-CoV-2 infection and severe COVID-19 in persons aged >=60 years and other high-risk groups during predominant circulation of the delta variant in Italy, 19 July to 12 December 2021	Expert Review of Vaccines	wrong study duration
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
Fano et al.	COVID-19 vaccines coverage and effectiveness against SARS-CoV-2 infection among residents in the largest Health Authority of Lazio region (Italy): a population-based cohort study	Expert review of vaccines	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	Preprint - 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.	Modelling COVID-19 Vaccine Breakthrough Infections in Highly Vaccinated Israel - the effects of waning immunity and third vaccination dose	Preprint - medRxiv	wrong study design
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
Fillmore et al.	Inadequate sars-cov-2 vaccine effectiveness in patients with multiple myeloma: A large nationwide veterans affairs study	Blood	wrong study duration

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	Preprint - medRxiv	wrong comparator
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	Preprint - 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	Preprint - medRxiv	wrong study duration
Florea et al.	Durability of mRNA-1273 against COVID-19 in the time of Delta: Interim results from an observational cohort study	PloS one	wrong study duration
Folegatti et al.	Safety and immunogenicity of the ChAdOx1 nCoV-19	Hand search; The Lancet	wrong outcome
Fontan et al.	Time-Varying Effectiveness of Three Covid-19 Vaccines in Puerto Rico	Preprint - 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 intervention
Furer et al.	Immunogenicity and safety of the BNT162B2 mRNA COVID-19 vaccine in adult patients with autoimmune inflammatory rheumatic diseases and general population: A multicenter study	Annals of the Rheumatic Diseases	wrong intervention
Gaio et al.	COVID-19 vaccine effectiveness among healthcare workers in Portugal: results from a hospital-based cohort study, December 2020 to November 2021	Preprint - 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	Preprint - medRxiv	wrong intervention
Garvey et al.	Early observations on the impact of a healthcare worker COVID-19 vaccination programme at a major UK tertiary centre	The Journal of Infection	wrong intervention
Gazit et al.	BNT162b2 mRNA Vaccine Effectiveness Given Confirmed Exposure: Analysis of Household Members of COVID-19 Patients	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong comparator
Gazit et al.	BNT162b2 mRNA Vaccine Effectiveness Given Confirmed Exposure; Analysis of Household Members of COVID-19 Patients	Preprint - medRxiv	wrong intervention
Gazit et al.	Comparing SARS-CoV-2 natural immunity to vaccine-induced immunity: reinfections versus breakthrough infections	Preprint - medRxiv	wrong intervention
Gazit et al.	Relative Effectiveness of Four Doses Compared to Three Dose of the BNT162b2 Vaccine in Israel	Preprint - medRxiv	wrong intervention
Gazit et al.	Relative Effectiveness of Four Doses Compared to Three Dose of the BNT162b2 Vaccine in Israel	Preprint - medRxiv	wrong study duration
Geysels et al.	SARS-CoV-2 vaccine breakthrough infections among healthcare workers in a large Belgian hospital network	Infection Control and Hospital Epidemiology	wrong intervention
Ghadiri et al.	The study of COVID-19 infection following vaccination in patients with multiple sclerosis	Multiple sclerosis and related disorders	wrong outcome
Ghosh et al.	COVISHIELD (AZD1222) VaccINe effectiveness among healthcare and frontline Workers of INdian Armed Forces: Interim results of VIN-WIN cohort study	Medical Journal Armed Forces India	wrong intervention
Giansante et al.	COVID-19 vaccine effectiveness among the staff of the Bologna Health Trust, Italy, December 2020-April 2021	Acta Bio-medica: Atenei Parmensis	wrong intervention

Gilbert et al.	Immune Correlates Analysis of the mRNA-1273 COVID-19 Vaccine Efficacy Trial	Preprint - medRxiv	wrong intervention
Glampson et al.	North West London Covid-19 Vaccination Programme: Real-world evidence for Vaccine uptake and effectiveness: Retrospective Cohort Study	JMIR Public Health and Surveillance	wrong intervention
Glatman- Freedman et al.	The BNT162b2 vaccine effectiveness against new COVID-19 cases and complications of breakthrough cases: A nation-wide retrospective longitudinal multiple cohort analysis using individualised data	EBioMedicine	wrong study duration
Glatman- Freedman et al.	Effectiveness of BNT162b2 Vaccine in Adolescents during Outbreak of SARS-CoV-2 Delta Variant Infection, Israel, 2021	Emerging infectious diseases	wrong study duration
Goes et al.	New infections by SARS-CoV-2 variants of concern after natural infections and post- vaccination in Rio de Janeiro, Brazil	Infection, Genetics and Evolution	wrong study design
Gohil et al.	Asymptomatic and Symptomatic COVID-19 Infections Among Health Care Personnel Before and After Vaccination	JAMA network open	wrong intervention
Goldberg et al.	Protection of previous SARS-CoV-2 infection is similar to that of BNT162b2 vaccine protection: A three-month nationwide experience from Israel	Preprint - medRxiv	wrong intervention
Goldberg et al.	Protection of previous SARS-CoV-2 infection is similar to that of BNT162b2 vaccine protection: A three-month nationwide experience from Israel	American journal of epidemiology	wrong study duration
Goldberg et al.	Waning Immunity after the BNT162b2 Vaccine in Israel	The New England journal of medicine	wrong comparator
Goldin et al.	BNT162b2 mRNA COVID-19 (Comirnaty) Vaccine Effectiveness in Elderly Patients Who Live in Long-Term Care Facilities: A Nationwide Cohort	Gerontology	wrong outcome
Goldshtein et al.	Association Between BNT162b2 Vaccination and Incidence of SARS-CoV-2 Infection in Pregnant Women	JAMA	wrong intervention
Gomes et al.	Is the BioNTech-Pfizer COVID-19 vaccination effective in elderly populations? Results from population data from Bavaria, Germany	Preprint - medRxiv	wrong intervention
Gomes et al.	Is the BNT162b2 COVID-19 vaccine effective in elderly populations? Results from population data from Bavaria, Germany	PloS one	duplicated
Gounant et al.	Efficacy of SARS-CoV-2 vaccine in thoracic cancer patients: a prospective study supporting a third dose in patients with minimal serologic response after two vaccine doses	Preprint - medRxiv	wrong intervention
Gower et al.	Effectiveness of Covid-19 Vaccines against the B.1.617.2 (Delta) Variant	New England Journal of Medicine	duplicated

Gower et al.	Effectiveness of the Pfizer-BioNTech and Oxford-AstraZeneca vaccines on covid-19	The BMJ	duplicated
	related symptoms, hospital admissions, and mortality in older adults in England: Test		
	negative case-control study		
Gram et al.	Vaccine effectiveness against SARS-CoV-2 infection, hospitalization, and death when combining a first dose ChAdOx1 vaccine with a subsequent mRNA vaccine in Denmark: A nationwide population-based cohort study	PLoS medicine	wrong study duration
Gram et al.	Vaccine effectiveness when combining the ChAdOx1 vaccine as the first dose with an mRNA COVID-19 vaccine as the second dose	Preprint - medRxiv	wrong intervention
Grannis et al.	Interim estimates of COVID-19 vaccine effectiveness against COVID-19,Äiassociated emergency department or urgent care clinic encounters and hospitalizations among adults during SARS-CoV-2 B. 1.617. 2 (Delta) variant predominance, ÄîNine States, June, ÄiAugust 2021	Morbidity and Mortality Weekly Report	wrong study duration
Grant et al.	Impact of SARS-CoV-2 Delta variant on incubation, transmission settings and vaccine effectiveness: Results from a nationwide case- control study in France	The Lancet regional health. Europe	wrong study duration
Gray et al.	Vaccine effectiveness against hospital admission in South African health care workers who received a homologous booster of Ad26.COV2 during an Omicron COVID19 wave: Preliminary Results of the Sisonke 2 Study	Preprint - medRxiv	wrong intervention
Grima et al.	Relative Virulence of SARS-CoV-2 Among Vaccinated and Unvaccinated Individuals Hospitalized with SARS-CoV-2	Preprint - medRxiv	wrong study duration
Grgič Vitek et al.	mRNA vaccine effectiveness against hospitalisation due to severe acute respiratory infection (SARI) COVID-19 during Omicron variant predominance estimated from real-world surveillance data, Slovenia, February to March 2022	Euro surveillance : bulletin European sur les maladies transmissibles = European communicable disease bulletin	wrong study duration
Guarino et al.	Effectiveness of SARS-Cov-2 vaccination in liver transplanted patients: the debate is open!	Journal of Hepatology	wrong outcome
Guha et al.	The incidence and in-hospital mortality of COVID-19 patients post-vaccination in eastern India	Preprint - medRxiv	wrong study design
Haas 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	The Lancet	wrong intervention

	Israel: an observational study using national surveillance data		
Haas et al.	Infections, Hospitalizations, and Deaths Averted Via Direct Effects of the Pfizer- BioNTech BNT162b2 mRNA COVID-19 Vaccine in a Nationwide Vaccination Campaign, Israel	Preprint - SSRN	wrong intervention
Hall et al.	Effectiveness and durability of protection against future SARS-CoV-2 infection conferred by COVID-19 vaccination and previous infection; findings from the UK SIREN prospective cohort study of healthcare workers March 2020 to September 2021	Preprint - medRxiv	delayed exclusion - a published version of this article is available
Hall et al.	Randomized Trial of a Third Dose of mRNA- 1273 Vaccine in Transplant Recipients	New England Journal of Medicine	wrong comparator
Hall et al.	Protection against SARS-CoV-2 after covid-19 vaccination and previous infection	New England Journal of Medicine	Already assessed before
Hammerman et al.	Effectiveness of the BNT162b2 Vaccine after Recovery from Covid-19	The New England journal of medicine	wrong intervention
Hammerman et al.	Effectiveness of the BNT162B2 vaccine after recovery from CoviD-19	New England Journal of Medicine	wrong outcome
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	Preprint - medRxiv	delayed exclusion - last follow-up period is 91-150 days, which is insufficient to meet our 112-day lower limit.
Hardt et al.	Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19	Preprint - medRxiv	wrong comparator
Hardt et al.	Efficacy and Safety of a Booster Regimen of Ad26.COV2.S Vaccine against Covid-19	Preprint - medRxiv	wrong intervention
Harris et al.	Impact of vaccination on household transmission of SARS-COV-2 in England	Hand search; Preprint - medRxiv	wrong intervention
Havers et al.	COVID-19-associated hospitalizations among vaccinated and unvaccinated adults ≥18 years - COVID-NET, 13 states, January 1 - July 24, 2021	Preprint - medRxiv	wrong outcome
Herishanu et al.	Efficacy of the BNT162b2 mRNA COVID-19 vaccine in patients with chronic lymphocytic leukemia	Blood	wrong outcome
Hermosilla et al.	Comparative effectiveness and safety of homologous two-dose ChAdOx1 versus heterologous vaccination with ChAdOx1 and BNT162b2	Nature communications	wrong comparator
Herzberg et al.	SARS-CoV-2-antibody response in health care workers after vaccination or natural infection in a longitudinal observational study	Preprint - medRxiv	wrong intervention

Heudel et al.	Reduced SARS-CoV-2 infection and death after two doses of COVID-19 vaccines in a series of 1503 cancer patients	Annals of Oncology	wrong intervention
Hitchings et al.	Effectiveness of the ChAdOx1 vaccine in the elderly during SARS-CoV-2 Gamma variant transmission in Brazil	Preprint - medRxiv	wrong intervention
Hitchings et al.	Effectiveness of ChAdOx1 vaccine in older adults during SARS-CoV-2 Gamma variant circulation in Sao Paulo	Nature Communications	duplicated
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
Horne et al.	Waning effectiveness of BNT162b2 and ChAdOx1 COVID-19 vaccines over six months since second dose: a cohort study using linked electronic health records	Preprint - medRxiv	Already included
Hoque et al.	Serial evaluation of anti-SARS-CoV-2 IgG antibody and breakthrough infections in BNT162b2 Vaccinated migrant workers from Bangladesh	Preprint - 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	Preprint - 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

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	Preprint - medRxiv	wrong comparator
Islam et al.	Comparative effectiveness over time of the mRNA-1273 (Moderna) vaccine and the BNT162b2 (Pfizer-BioNTech) vaccine	Nature communications	wrong study duration
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	Preprint - 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	Clinical Infectious	wrong
	incidence of presumptive B.1.427/B.1.429 variant among healthcare personnel at a northern California academic medical center	Diseases	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 Kumar et al.	Clinical outcomes in vaccinated individuals hospitalized with Delta variant of SARS-CoV-2	Preprint - medRxiv	wrong intervention
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	Preprint - medRxiv	wrong study duration
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	Preprint - 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
Jara et al.	Effectiveness of homologous and heterologous booster doses for an inactivated SARS-CoV-2 vaccine: a large-scale prospective cohort study	The Lancet Global Health	wrong study duration
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
Joshi et al.	Vaccine effectiveness to protect against moderate or severe disease in COVID cases: A prospective cohort study	Medical Journal Armed Forces India	wrong study duration
June Choe et al.	Safety and effectiveness of BNT162b2 mRNA Covid-19 vaccine in adolescents	Vaccine	wrong population
Junghans	Technical note: The calculated real world BNT162b2 vaccine efficacy was 88% when accounting for asymptomatic cases	Human vaccines & immunotherapeutics	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	Preprint - 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	Inflammatory Bowel Diseases	Full-text unavailable
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 Journal 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 Journal of infectious diseases	wrong comparator
Kim et al.	Effectiveness of 2 and 3 mRNA COVID-19 Vaccines Doses against Omicron and Delta- Related Outpatient Illness among Adults, October 2021 - February 2022	Preprint - medRxiv	wrong comparison
Kim et al.	Effectiveness of Booster mRNA Vaccines against SARS-CoV-2 Infection in Elderly Population, South Korea, October 2021 - January 2022	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong study duration; Data reported in figures only
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	Preprint - 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.	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	Preprint - medRxiv	wrong comparison
Kislaya et al.	Delta variant and mRNA Covid-19 vaccines effectiveness: higher odds of vaccine infection breakthroughs	Preprint - medRxiv	wrong intervention
Kiss et al.	Nationwide Effectiveness of First and Second SARS-CoV2 Booster Vaccines during the Delta and Omicron Pandemic Waves in Hungary (HUN-VE 2 Study)		wrong intervention
Kiss et al.	Nationwide Effectiveness of First and Second SARS-CoV2 Booster Vaccines during the Delta and Omicron Pandemic Waves in Hungary (HUN-VE 2 Study)	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	Preprint - 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	Preprint - 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
Kodera et al.	Estimation of Real-World Vaccination Effectiveness of mRNA COVID-19 Vaccines against Delta and Omicron Variants in Japan	Vaccines	results in figures
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
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
Korves et al.	Relative effectiveness of booster vs. 2-dose mRNA Covid-19 vaccination in the Veterans Health Administration: Self-controlled risk interval analysis	Preprint - medRxiv	wrong study duration
Koshy	Effectiveness of ChAdOx1 nCOV-19 Vaccine: Experience of a tertiary care institute	Medical Journal Armed Forces India	wrong outcome
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
Krisztina et al.	Real-time monitoring of the effectiveness of six COVID-19 vaccines in Hungary in 2021 using the screening method	Preprint - medRxiv	wrong intervention
Krisztina et al.	Real-time monitoring of the effectiveness of six COVID-19 vaccines in Hungary in 2021 using the screening method	Preprint - medRxiv	wrong comparison
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

Kwon et al.	mRNA Vaccine Effectiveness Against COVID- 19 Hospitalization Among Solid Organ Transplant Recipients	The Journal of infectious diseases	wrong study duration
Lafuente- Lafuente et al.	COVID-19 Outbreaks in Nursing Homes Despite Full Vaccination with BNT162b2 of a Majority of Residents	Gerontology	wrong study duration
Lamacchia et al.	Clinical and immunological features of SARS- CoV-2 breakthrough infections in vaccinated individuals requiring hospitalization	Preprint - 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 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
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	Preprint - medRxiv	wrong comparator
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
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	Preprint - medRxiv	duplicated

	long-term care facilities of eastern France: a retrospective cohort study		
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	Preprint - medRxiv	wrong study duration
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
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
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	wrong comparison
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 journal of medicine	wrong intervention
Lind et al.	Effectiveness of Primary and Booster COVID- 19 mRNA Vaccination against Omicron Variant SARS-CoV-2 Infection in People with a Prior SARS-CoV-2 Infection	Preprint - medRxiv	Already included

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	Preprint - 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 al.	Effectiveness of Covid-19 Vaccines against the B.1.617.2 (Delta) Variant	The New England Journal of Medicine	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
Lustig et al.	Superior immunogenicity and effectiveness of the third compared to the second BNT162b2 vaccine dose	Nature Immunology	wrong study duration
Lytras et al.	Comparative effectiveness of COVID-19 vaccination against death and severe disease in an ongoing nationwide mass vaccination campaign	Preprint - medRxiv	duplicated

Ma et al.	Effectiveness of Covid-19 Vaccines against the SARS-COV-2-Delta (B.1.617.2) in China-A Real	Preprint - medRxiv	wrong outcome
	World Study		
Ma et al.	Effectiveness of Covid-19 Vaccines against the SARS-COV-2-Delta (B.1.617.2) in China - A Real World Study	Preprint - medRxiv	wrong study duration
Ma et al.	Effectiveness of adenovirus type 5 vectored and inactivated COVID-19 vaccines against symptomatic COVID-19, COVID-19 pneumonia, and severe COVID-19 caused by the B.1.617.2 (Delta) variant: Evidence from an outbreak in Yunnan, China, 2021	Vaccine	wrong study duration
Madhi et al.	ChAdOx1 nCoV-19 Vaccine Efficacy against the B.1.351 Variant. Reply	The New England Journal of Medicine	wrong publication type
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)	Preprint - medRxiv	wrong comparator
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)	Preprint - medRxiv	wrong comparator
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)	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong comparison
Magen et al.	Fourth Dose of BNT162b2 mRNA Covid-19 Vaccine in a Nationwide Setting	The New England journal of medicine	wrong comparison
Magen et al.	Fourth Dose of BNT162b2 mRNA Covid-19 Vaccine in a Nationwide Setting	New England Journal of Medicine	wrong study duration
Mahase et al.	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	The Lancet	wrong
	mRNA vaccine and early clinical outcomes in patients with haematological malignancies in Lithuania: a national prospective cohort study	Haematology	intervention
Manley et al.	SARS-CoV-2 vaccine effectiveness and breakthrough infections in maintenance dialysis patients	Preprint - medRxiv	wrong outcome
Manley et al.	SARS-CoV-2 vaccine effectiveness and breakthrough infections in maintenance dialysis patients	Preprint - medRxiv	wrong study duration
Marra et al.	Effectiveness of two COVID-19 vaccines (viral vector and inactivated viral vaccine) against SARS-CoV-2 infection in a cohort of healthcare workers	Infection control and hospital epidemiology	wrong outcome
Martellucci et al.	Effectiveness of COVID-19 Vaccines in the General Population of an Italian Region before and during the Omicron Wave	Vaccines	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 vaccination campaign	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
Mazuecos et al.	Breakthrough Infections Following mRNA SARS-CoV-2 Vaccination in Kidney Transplant Recipients	Transplantation	wrong outcome
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	Preprint - medRxiv	wrong study duration
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	Preprint - 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	Preprint - medRxiv	wrong comparator
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
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	Preprint - 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	Preprint - 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
McMenamin et al.	Vaccine effectiveness of two and three doses of BNT162b2 and CoronaVac against COVID-19 in Hong Kong	Preprint - medRxiv	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 intervention
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
Menni et al.	COVID-19 vaccine waning and effectiveness and side-effects of boosters: a prospective community study from the ZOE COVID Study	The Lancet. Infectious diseases	Excluded for ROB
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	Preprint - medRxiv	wrong outcome
Mielke et al.	Boosters reduce in-hospital mortality in patients with COVID-19: An observational cohort analysis	Lancet Regional Health. Americas	wrong study duration
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"	Preprint - 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	Preprint - 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	Preprint - 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	Preprint - medRxiv	wrong study duration
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 intervention

Monge et al.	Direct and Indirect Effectiveness of mRNA	Emerging infectious	wrong study
0	Vaccination against Severe Acute Respiratory	diseases	duration
	Syndrome Coronavirus 2 in Long-Term Care		
	Facilities, Spain		
Mor et al.	BNT162b2 Vaccination efficacy is marginally	Preprint - medRxiv	wrong population
	affected by the SARS-CoV-2 B.1.351 variant in	-	011
	fully vaccinated individuals		
Mor et al.	BNT162b2 vaccine effectiveness was marginally	Journal of clinical	duplicated
	affected by the \$\Frac{+}{SARS-CoV-2}\$ the variant in	epidemiology	-
	fully vaccinated individuals		
Moreira et al.	Safety and Efficacy of a Third Dose of	The New England	wrong outcome
	BNT162b2 Covid-19 Vaccine	journal of medicine	
Moustsen	Vaccine effectiveness after 1st and 2nd dose of	Preprint - medRxiv	wrong
Helms et al.	the BNT162b2 mRNA Covid-19 Vaccine in	Ť	intervention
	long-term care facility residents and healthcare		
	workers—a Danish cohort study		
Muhsen et al.	Effectiveness of BNT162b2 mRNA COVID-19	Clinical infectious	wrong study
	vaccine against acquisitions of SARS-CoV-2	diseases : an official	duration
	among health care workers in long-term care	publication of the	
	facilities: a prospective cohort study	Infectious Diseases	
		Society of America	
Muhsen et al.	Effectiveness of BNT162b2 mRNA COVID-19	Clinical infectious	wrong study
	vaccine against acquisitions of SARS-CoV-2	diseases : an official	duration
	among health care workers in long-term care	publication of the	
	facilities: a prospective cohort study	Infectious Diseases	
		Society of America	
Mukim et al.	Covid-19 Vaccines available in India	Combinatorial	Full-text
		chemistry & high	unavailable
		throughput	
		screening	
Munitz et al.	BNT162b2 vaccination effectively prevents the	Cell Reports	wrong
	rapid rise of SARS-CoV-2 variant B.1.1.7 in	Medicine	intervention
	high-risk populations in Israel		
Murari et al.	Retrospective cohort study of COVID-19 in		wrong study
	patients of the Brazilian public health system		duration
	with SARS-COV-2 Omicron variant infection		
Murillo-Zamora	Effectiveness of BNT162b2 COVID-19	Medicina (Kaunas,	wrong
et al.	Vaccine in Preventing Severe Symptomatic	Lithuania)	intervention
	Infection among Healthcare Workers		
Murt et al.	Antibody responses to the SARS-CoV-2	Therapeutic	wrong comparator
	vaccines in hemodialysis patients: Is inactivated	apheresis and	
	vaccine effective?	dialysis : official	
		peer-reviewed	
		journal of the	
		International Society	
		for Apheresis, the	
		Japanese Society for	
		Apheresis, the	

Musser et al.	Delta variants of SARS-CoV-2 cause	Japanese Society for Dialysis Therapy Preprint - medRxiv	wrong study
	significantly increased vaccine breakthrough COVID-19 cases in Houston, Texas	1	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	Preprint - 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 hospitalization and death in Canada: A multi provincial test-negative design study		wrong outcome
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	Preprint - medRxiv	wrong study duration

Natarajan et al.	Effectiveness of Homologous and Heterologous COVID-19 Booster Doses Following 1 Ad.26.COV2.S (Janssen [Johnson & amp; Johnson]) Vaccine Dose Against COVID-19- Associated Emergency Department and Urgent Care Encounters and Hospitalizations Among Adults - VISION Network, 10 States, December 2021-March 2022	MMWR. Morbidity and mortality weekly report	wrong study duration
Naylor et al.	Effectiveness of first, second, and third COVID-19 vaccine doses in solid organ transplant recipients: A population-based cohort study from Canada	American journal of transplantation: official journal of the American Society of Transplantation and the American Society of Transplant Surgeons	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	Preprint - medRxiv	wrong comparator
Nguyen et al.	Comparative effectiveness of different primary vaccination courses on mRNA based booster vaccines against SARs-COV-2 infections: A time-varying cohort analysis using trial emulation in the Virus Watch community cohort	Preprint - 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
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
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	Preprint - 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	Preprint - 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
Pardo-Seco et al.	Evaluation of BNT162b2 Vaccine Effectiveness in Galicia, Northwest Spain	International journal of environmental research and public health	wrong study duration
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 Fondazione Policlinico Universitario Agostino Gemelli IRCCS	International journal of environmental research and public health	wrong study duration
Passalacqua et al.	Efficacy of SARS-CoV-2 vaccination in cancer patients during treatment: A prospective observational study (ANTICOV trial)	Tumori	wrong study duration
Patalon et al.	Waning Effectiveness of the Third Dose of the BNT162b2 mRNA COVID-19 Vaccine		wrong comparator
Pattni et al.	Effectiveness of the BNT162b2 (Pfizer- BioNTech) and the ChAdOx1 nCoV-19 (Oxford-AstraZeneca) vaccines for reducing	Preprint - medRxiv	wrong outcome

	susceptibility to infection with the Delta variant (B.1.617.2) of SARS-CoV-2		
Paulsen et al.	Immune Thrombocytopenic Purpura after vaccination with COVID-19 Vaccine (ChAdOx1 nCov-19)	Blood	wrong study design
Pawlowski et al.	FDA-authorized mRNA COVID-19 vaccines are effective per real-world evidence synthesized across a multi-state health system	Med (New York, N.Y.)	wrong intervention
Payne et al.	Sustained T cell immunity, protection and boosting using extended dosing intervals of BNT162b2	Hand search; Preprint - SSRN	wrong outcome
Peet et al.	COVID-19 infection and vaccination in patients with autoinflammatory diseases on biologics	Pediatric Rheumatology	wrong outcome
Pefaur Penna et al.	POS-912 EFFECTIVENESS OF SARS-COV 2 VACCINATION IN KIDNEY TRANSPLANT PATIENTS IN CHILE	Kidney International Reports	Full-text not found
Pegu et al.	Durability of mRNA-1273 vaccine-induced antibodies against SARS-CoV-2 variants	Science (New York, N.Y.)	wrong outcome
Peled et al.	BNT162b2 vaccination in heart transplant recipients: Clinical experience and antibody response	Journal of Heart and Lung Transplantation	wrong intervention
Perkmann et al.	Serum antibody response to BNT162b2 after natural SARS-CoV-2 infection	European Journal of Clinical Investigation	wrong outcome
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
Petrovic et al.	Early Effectiveness of Four SARS-CoV-2 Vaccines in Preventing COVID-19 among Adults Aged ≥60 Years in Vojvodina, Serbia	Vaccines	wrong study duration
Pilishvili et al.	Interim Estimates of Vaccine Effectiveness of Pfizer-BioNTech and Moderna COVID-19 Vaccines Among Health Care Personnel - 33 U.S. Sites, January-March 2021	Morbidity and Mortality Weekly Report	wrong intervention
Plumb et al.	Effectiveness of COVID-19 mRNA Vaccination in Preventing COVID-19- Associated Hospitalization Among Adults with Previous SARS-CoV-2 Infection - United States, June 2021-February 2022	MMWR. Morbidity and mortality weekly report	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
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 study duration

Polinski et al.	Effectiveness of the Single-Dose Ad26.COV2.S COVID Vaccine	Preprint - medRxiv	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
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
Pouwels et al.	Impact of Delta on viral burden and vaccine effectiveness against new SARS-CoV-2 infections in the UK	Preprint - medRxiv	wrong intervention
Pouwels et al.	Effect of Delta variant on viral burden and vaccine effectiveness against new SARS-CoV-2 infections in the UK	Nature medicine	duplicated
Pozdnyakova et al.	Decreased Antibody Responses to Ad26.COV2.S Relative to SARS-CoV-2 mRNA Vaccines in Patients with Inflammatory Bowel Disease	Gastroenterology	wrong outcome
Pozzetto et al.	Immunogenicity and efficacy of heterologous ChadOx1/BNT162b2 vaccination	Preprint - Research Square	wrong intervention
Prabhu et al.	Antibody Response to Coronavirus Disease 2019 (COVID-19) Messenger RNA Vaccination in Pregnant Women and Transplacental Passage Into Cord Blood	Obstetrics and Gynecology	wrong intervention
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
Prasad et al.	Effectiveness of a COVID-19 Additional Primary or Booster Vaccine Dose in Preventing SARS-CoV-2 Infection Among Nursing Home Residents During Widespread Circulation of the Omicron Variant - United States, February 14- March 27, 2022	MMWR. Morbidity and mortality weekly report	wrong study duration
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

Premikha et al.	Comparative Effectiveness of mRNA and Inactivated Whole Virus Vaccines against COVID-19 Infection and Severe Disease in Singapore	Clinical infectious diseases : an official publication of the Infectious Diseases Society of America	wrong comparator
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	Preprint - 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	Preprint - 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.	Effectiveness of an Inactivated Covid-19 Vaccine with Homologous and Heterologous Boosters against the Omicron (B.1.1.529) Variant		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

Ranzani et al.	Vaccine effectiveness of ChAdOx1 nCoV-19 against COVID-19 in a socially vulnerable	Clinical microbiology and	wrong study duration
	community in Rio de Janeiro, Brazil: a test- negative design study	infection: the official publication of the European Society of Clinical Microbiology and Infectious Diseases	
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
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	Preprint - medRxiv	wrong comparator
Regev-Yochay et al.	4th Dose COVID mRNA Vaccines' Immunogenicity & Efficacy Against Omicron VOC	Preprint - medRxiv	wrong comparator
Rennert et al.	Covid-19 vaccine effectiveness against general SARS-CoV-2 infection from the omicron variant: A retrospective cohort study	Preprint - medRxiv	wrong study duration
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
Reynolds et al.	COVID-19 vaccination breakthrough infections in a real-world setting: Using community reporters to evaluate vaccine effectiveness	Preprint - medRxiv	wrong study design
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	Preprint - medRxiv	wrong study duration

Roberts et al.	Estimating COVID-19 Vaccination Effectiveness Using Electronic Health Records	Preprint - medRxiv	wrong comparator
Robilotti et al.	of an Academic Medical Center in Michigan 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,	Hand search; Morbidity and Mortality Weekly Report	wrong intervention
Rosenberg et al.	COVID-19 Vaccine Effectiveness by Product and Timing in New York State	Preprint - 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	Preprint - medRxiv	wrong study duration
Rosero-Bixby et al.	The Effectiveness of Pfizer-BioNTech and Oxford-AstraZeneca Vaccines to Prevent Severe COVID-19 in Costa Rica: Nationwide, Ecological Study of Hospitalization Prevalence	JMIR public health and surveillance	wrong study duration
Rovida, et al.	SARS-CoV-2 vaccine breakthrough infections are asymptomatic or mildly symptomatic and are infrequently transmitted	Preprint - medRxiv	delayed exclusion - not enough time of follow up (4 months criterion)
Russo et al.	Boosters and time from the last anti-COVID-19 vaccine dose: lead public health choices by real- time epidemiological assessment	Epidemiologia e prevenzione	wrong comparator
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	Preventive medicine	wrong intervention

	ten months into the vaccination program: The Israeli case		
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.	Final Analysis of Efficacy and Safety of Single- Dose Ad26.COV2.S	New England Journal of Medicine	wrong outcome
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
Salo et al.	The indirect effect of mRNA-based COVID-19 vaccination on healthcare workers' unvaccinated household members	Nature Communications	wrong outcome
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 & 2000) 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	Preprint - medRxiv	wrong outcome
Sharma et al.	Effectiveness of mRNA-based vaccines during the emergence of SARS-CoV-2 Omicron variant	Clinical infectious diseases: an official publication of the Infectious Diseases Society of America	wrong study duration; Data reported in figures only
Sharma et al.	COVID-19 Vaccine Breakthrough Infections in Veterans Health Administration	Preprint - 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.	Severity of omicron variant of concern and effectiveness of vaccine boosters against symptomatic disease in Scotland (EAVE II): a national cohort study with nested test-negative design	The Lancet. Infectious diseases	wrong outcome
Sheikh et al.	SARS-CoV-2 Delta VOC in Scotland: demographics, risk of hospital admission, and vaccine effectiveness	The Lancet	wrong intervention
Shen et al.	Efficacy of COVID-19 vaccines in patients taking immunosuppressants	Annals of the rheumatic diseases	wrong outcome

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
Shrotri et al.	Duration of vaccine effectiveness against SARS- CoV2 infection, hospitalisation, and death in residents and staff of Long-Term Care Facilities (VIVALDI): a prospective cohort study, England, Dec 2020-Dec 2021	Preprint - medRxiv	no usable data; wrong study duration
Shostak et al.	Early humoral response among lung transplant recipients vaccinated with BNT162b2 vaccine	The Lancet Respiratory Medicine	wrong intervention
Shrestha et al.	Coronavirus Disease 2019 (COVID-19) Vaccine Boosting in Persons Already Protected by Natural or Vaccine-Induced Immunity	Preprint - medRxiv	wrong comparator
Shrestha, et al.	Necessity of COVID-19 vaccination in previously infected individuals	Preprint - 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)
Shrotri et al.	Duration of vaccine effectiveness against SARS- CoV2 infection, hospitalisation, and death in residents and staff of Long-Term Care Facilities (VIVALDI): a prospective cohort study, England, Dec 2020-Dec 2021		wrong outcome
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) among persons identified through contact tracing in Israel: A prospective cohort study	EClinicalMedicine	wrong study duration
Singer et al.	Effectiveness of BNT162b2 mRNA COVID-19 Vaccine Against SARS-CoV-2 Variant Beta (B.1.351) Among Persons Identified Through Contact Tracing in Israel	Preprint - SSRN	wrong intervention
Singh et al.	Antibody Response after First-dose of ChAdOx1-nCOV (Covishield) and BBV-152 (Covaxin) amongst Health Care Workers in India: Preliminary Results of Cross-sectional Coronavirus Vaccine-induced Antibody Titre (COVAT) study	Preprint - medRxiv	wrong intervention
Skowronski & de Serres	Safety and efficacy of the BNT162B2 mRNA covid-19 vaccine	New England Journal of Medicine	wrong intervention
Skowronski et al.	Comparative single-dose mRNA and ChAdOx1 vaccine effectiveness against SARS-CoV-2, including variants of concern: test-negative design, British Columbia, Canada	The Journal of infectious diseases	wrong intervention
Skowronski et al.	Two-dose SARS-CoV-2 vaccine effectiveness with mixed schedules and extended dosing intervals: test-negative design studies from British Columbia and Quebec, Canada	Clinical infectious diseases: an official publication of the Infectious Diseases Society of America	Already included

Smid et al.	Protection by vaccines and previous infection against the Omicron variant of SARS-CoV-2	The Journal of infectious diseases	no usable data
Smith et al.	Genomic and Virological Characterization of SARS-CoV-2 Variants in a Subset of Unvaccinated and Vaccinated U.S. Military Personnel	Preprint - medRxiv	wrong population
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
Sookaromdee et al.	Effectiveness of mRNA Covid-19 vaccine in healthcare workers	Enfermedades infecciosas y microbiologia clinica (English ed.)	foreign language
Spensley et al.	Comparison of vaccine effectiveness against the Omicron (B.1.1.529) variant in patients receiving haemodialysis	Preprint - medRxiv	wrong outcome
Spensley et al.	Comparison of vaccine effectiveness against the Omicron (B.1.1.529) variant in patients receiving haemodialysis	Preprint - medRxiv	wrong study duration
Spitzer et al.	Association of a Third Dose of BNT162b2 Vaccine With Incidence of SARS-CoV-2 Infection Among Health Care Workers in Israel	JAMA	wrong comparator
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
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 & infections	wrong study duration
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 & infections	wrong study duration
Starrfelt et al.	Age and product dependent vaccine effectiveness against SARS-CoV-2 infection and hospitalisation among adults in Norway: A national cohort study, January - September 2021	Preprint - medRxiv	wrong comparator
Starrfelt et al.	Age and product dependent vaccine effectiveness against SARS-CoV-2 infection and hospitalisation among adults in Norway: a national cohort study, January ,Äì September 2021	Preprint - medRxiv	wrong outcome

Starrfelt. et al.	Age and product dependent vaccine effectiveness against SARS-CoV-2 infection and hospitalisation among adults in Norway: a national cohort study, July - November 2021	Preprint - medRxiv	Already included
Starrfelt, et al.	High vaccine effectiveness against COVID-19 infection and severe disease among residents and staff of long-term care facilities in Norway, November – June 2021	Preprint - medRxiv	delayed exclusion - a cohort study, estimating vaccine effectiveness among residents and health care workers in long- 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	Preprint - medRxiv	wrong outcome
Suah et al.	Waning COVID-19 Vaccine Effectiveness for BNT162b2 and CoronaVac in Malaysia: An Observational Study	Preprint - medRxiv	wrong outcome
Suah et al.	Waning COVID-19 Vaccine Effectiveness for BNT162b2 and CoronaVac in Malaysia: An Observational Study	International Journal of Infectious Diseases	wrong outcome
Suah et al.	PICK-ing Malaysia's Epidemic Apart: Effectiveness of a Diverse COVID-19 Vaccine Portfolio	Vaccines	wrong outcome
Suah et al.	Real-world effectiveness of homologous and heterologous BNT162b2, CoronaVac, and	Emerging microbes & infections	wrong intervention

	AZD1222 booster vaccination against Delta and Omicron SARS-CoV-2 infection		
Sultan et al.	Distinct Vaccine Efficacy Rates Among Health Care Workers During a COVID-19 Outbreak in Jordan	Preprint - medRxiv	wrong outcome
Sultan et al.	Distinct Vaccine Efficacy Rates Among Health Care Workers During a COVID-19 Outbreak in Jordan	Preprint - 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
Syed et al.	Effectiveness of COVID-19 vaccines	Journal of Infection	Already included
Tahor et al.	Evidence for increased breakthrough rates of SARS-CoV-2 variants of concern in BNT162b2- mRNA-vaccinated individuals	Nature Medicine	duplicated
Tai et al.	Booster protection against Omicron infection in a highly vaccinated cohort		wrong study duration
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	Preprint - medRxiv	wrong outcome
Tartof et al.	Effectiveness of a third dose of BNT162b2 mRNA COVID-19 vaccine in a large US health system: A retrospective cohort study	SSRN	delayed exclusion - duplicate of Study ID 21-3

Tartof et al.	Effectiveness of mRNA BNT162b2 COVID-19 vaccine up to 6 months in a large integrated health system in the USA: a retrospective cohort study	Lancet (London, England)	duplicated
Tartof et al.	Durability of BNT162b2 vaccine against hospital and emergency department admissions due to the omicron and delta variants in a large health system in the USA: a test-negative case- control study	The Lancet. Respiratory medicine	wrong study duration
Taubel et al.	Can a second booster dose be delayed in patients who have had COVID-19?	Preprint - medRxiv	wrong outcome
Tene et al.	Assessment of effectiveness of 1 dose of BNT162B2 vaccine for SARS-CoV-2 infection 13 to 24 days after immunization	JAMA network open	wrong intervention
Tene et al.	The effectiveness of the TWO-DOSE BNT162b2 vaccine: analysis of real-world data	Clinical Infectious Diseases	wrong intervention
Tenforde et al	Effectiveness of SARS-CoV-2 mRNA Vaccines for Preventing Covid-19 Hospitalizations in the United States	Clinical Infectious Diseases	wrong study design
Tenforde et al.	Effectiveness of a Third Dose of Pfizer- BioNTech and Moderna Vaccines in Preventing COVID-19 Hospitalization Among Immunocompetent and Immunocompromised Adults - United States, August-December 2021	MMWR. Morbidity and mortality weekly report	wrong study duration
Tenforde et al.	Effectiveness of Pfizer-BioNTech and Moderna Vaccines Against COVID-19 Among Hospitalized Adults Aged >=65 Years - United States, January-March 2021	Morbidity and Mortality Weekly Report	wrong intervention
Tenforde et al.	Effectiveness of mRNA Vaccination in Preventing COVID-19-Associated Invasive Mechanical Ventilation and Death - United States, March 2021-January 2022	MMWR. Morbidity and mortality weekly report	wrong outcome
Tenforde, et al.	Sustained Effectiveness of Pfizer-BioNTech and Moderna Vaccines Against COVID-19 Associated Hospitalizations Among Adults - United States, March-July 2021	Morbidity and Mortality Weekly Report (MMWR) - CDC	delayed exclusion - case-control study, assessing vaccine effectiveness against hospitalization in a multistate network over 24 weeks. Vaccine effectiveness across diverse time points presented in Supplementary

			material (as figures, with no extractable information)
Tenforde et al.	Effectiveness of Severe Acute Respiratory Syndrome Coronavirus 2 Messenger RNA Vaccines for Preventing Coronavirus Disease 2019 Hospitalizations in the United States	Clinical Infectious Diseases	wrong study duration
Tenforde et al.	Protection of mRNA vaccines against hospitalized COVID-19 in adults over the first year following authorization in the United States	Clinical infectious diseases: an official publication of the Infectious Diseases Society of America	wrong study duration
Thangaraj et al.	Predominance of delta variant among the COVID-19 vaccinated and unvaccinated individuals, India, May 2021	The Journal of Infection	wrong outcome
Thiruvengadam et al.	Effectiveness of ChAdOx1 nCoV-19 vaccine against SARS-CoV-2 infection during the delta (B.1.617.2) variant surge in India: a test-negative, case-control study and a mechanistic study of post-vaccination immune responses	The Lancet. Infectious diseases	wrong study duration
Thiruvengadam et al.	Cellular Immune Responses are Preserved and May Contribute to Chadox1 ChAdOx1 nCoV- 19 Vaccine Effectiveness Against Infection Due to SARS-CoV-2 B.1.617.2 Delta Variant Despite Reduced Virus Neutralisation	Preprint - SSRN	wrong intervention
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)

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Thompson et al.	Effectiveness of a Third Dose of mRNA	MMWR. Morbidity	wrong comparator
	Vaccines Against COVID-19-Associated	and mortality weekly	
	Emergency Department and Urgent Care	report	
	Encounters and Hospitalizations Among Adults		
	During Periods of Delta and Omicron Variant		
	Predominance - VISION Network, 10 States,		
	August 2021-January 2022		
Thompson et al.	Interim Estimates of Vaccine Effectiveness of	Morbidity and	wrong
	BNT162b2 and mRNA-1273 COVID-19	Mortality Weekly	intervention
	Vaccines in Preventing SARS-CoV-2 Infection	Report	
	Among Health Care Personnel, First		
	Responders, and Other Essential and Frontline		
	Workers - Eight U.S. Locations, December		
	2020-March 2021		
Thompson et al.	Prevention and Attenuation of Covid-19 with	New England	wrong
1	the BNT162b2 and mRNA-1273 Vaccines	Journal of Medicine	intervention
Thompson et al.	Effectiveness of covid-19 vaccines in	New England	duplicated
rnompson et al.	ambulatory and inpatient care settings	Journal of Medicine	uupneuteu
Toback et al.		5	
TODACK et al.	Safety, Immunogenicity, and Efficacy of a	Preprint - medRxiv	wrong intervention
	COVID-19 Vaccine (NVX-CoV2373) Co-		intervention
	administered With Seasonal Influenza Vaccines	/T <sup>1</sup> 1 A ·	
Toker et al.	Vaccination status among patients with the need	The American	wrong comparator
	for emergency hospitalizations related to	journal of	
	COVID-19	emergency medicine	
Toniasso et al.	Reduction in COVID-19 prevalence in	International Journal	wrong
	healthcare workers in a university hospital in	of Infectious	intervention
	southern Brazil after the start of vaccination	Diseases: IJID	
Tran et al.	Efficacy of COVID-19 vaccination on the	SSRN	wrong outcome
	symptoms of patients with long COVID: a		
	target trial emulation using data from the		
	ComPaRe e-cohort in France		
Trapani et al.	COVID-19 vaccines in patients with cancer	The Lancet	wrong publication
		Oncology	type
Tré-Hardy et al.	Waning antibodies in SARS-CoV-2 naïve	The Journal of	wrong
	vaccines: Results of a three-month interim	Infection	intervention
	analysis of ongoing immunogenicity and efficacy		
	surveillance of the mRNA-1273 vaccine in		
	healthcare workers		
Tré-Hardy, et al.	Six-month interim analysis of ongoing	Journal of Infection	delayed exclusion
	immunogenicity surveillance of the mRNA-1273	5	- data mainly
	vaccine in healthcare workers: A third dose is		focusing on
	expected		immunogenicity
			findings.
Tsapepas et al.	Clinically Significant COVID-19 Following	American Journal of	wrong outcome
1 sapepas et ai.	SARS-CoV-2 Vaccination in Kidney Transplant	Kidney Diseases	wrong outcome
1	01110-00 v -2 v accination in Mulley Hallsplant	istuncy Discases	
	Recipients		
Tseng et al	Recipients Effectiveness of mRNA 1273 against SARS	Dreprint modPring	wrong comparator
Tseng et al.	Recipients Effectiveness of mRNA-1273 against SARS- CoV-2 omicron and delta variants	Preprint - medRxiv	wrong comparator

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
Tseng et al.	Effectiveness of mRNA-1273 against SARS- CoV-2 Omicron and Delta variants	Nature Medicine	wrong comparator
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	Preprint - 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 a Retrospective Cohort	Open Forum Infectious Diseases	conference abstract
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
Veerapu et al.	COVID-19 vaccines effectiveness against SARS-CO-V-2 infection among persons attending RT-PCR centre at a Medical College Hospital in Telangana: A case control study	Preprint - medRxiv	Wrong comparator
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	Preprint - 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.	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
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)	Preprint - 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
Wang et al.	Impact of Vaccination, Prior Infection, and Therapy on Delta and Omicron Variants	Preprint - medRxiv	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
Waxman et al.	Comparing COVID-19-related hospitalization rates among individuals with infection-induced and vaccine-induced immunity in Israel	Nature communications	wrong outcome; wrong duration
Westholter & Taube	SARS-CoV-2 outbreak in a long-term care facility after vaccination with BNT162b2	Clinical Infectious Diseases	wrong 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

Widdifield et al.	Vaccine effectiveness against SARS-CoV-2 infection and severe outcomes among individuals with immune-mediated inflammatory diseases tested between March 1 and Nov 22, 2021, in Ontario, Canada: a population-based analysis	The Lancet. Rheumatology	wrong study duration
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
Winkelman et al.	Trends in COVID-19 Vaccine Administration and Effectiveness Through October 2021	JAMA network open	wrong outcome
Wise et al.	Covid-19: New data on Oxford AstraZeneca vaccine backs 12 week dosing interval	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.)	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 type
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
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	Preprint - medRxiv	wrong comparator
Xie et al.	Comparative effectiveness of the BNT162b2 and ChAdOx1 vaccines against Covid-19 in people over 50	Nature Communications	wrong outcome
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
Yi et al.	Impact of national Covid-19 vaccination Campaign, South Korea	Vaccine	wrong outcome; wrong study duration
Young Xu	Effectiveness of mRNA COVID-19 Vaccines against Omicron among Veterans	Preprint - medRxiv	wrong study duration
Young Xu et al.	Effectiveness of mRNA COVID-19 Booster Vaccines against Omicron and Delta Variants among US Veterans		wrong study duration
Young-Xu et al.	Effectiveness of mRNA COVID-19 Booster Vaccines against Omicron and Delta Variants among US Veterans	Preprint - 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	Preprint - medRxiv	wrong comparator

Zheutlin et al.	Durability of Protection against COVID-19	Preprint - medRxiv	wrong comparator
	Breakthrough Infections and Severe Disease by		
	Vaccines in the United States		