

**Elevated procalcitonin is positively associated  
with the severity of COVID-19: A meta-analysis  
based on 10 cohort studies**

**SUPPLEMENTARY FILE.**

**Figures & Tables**

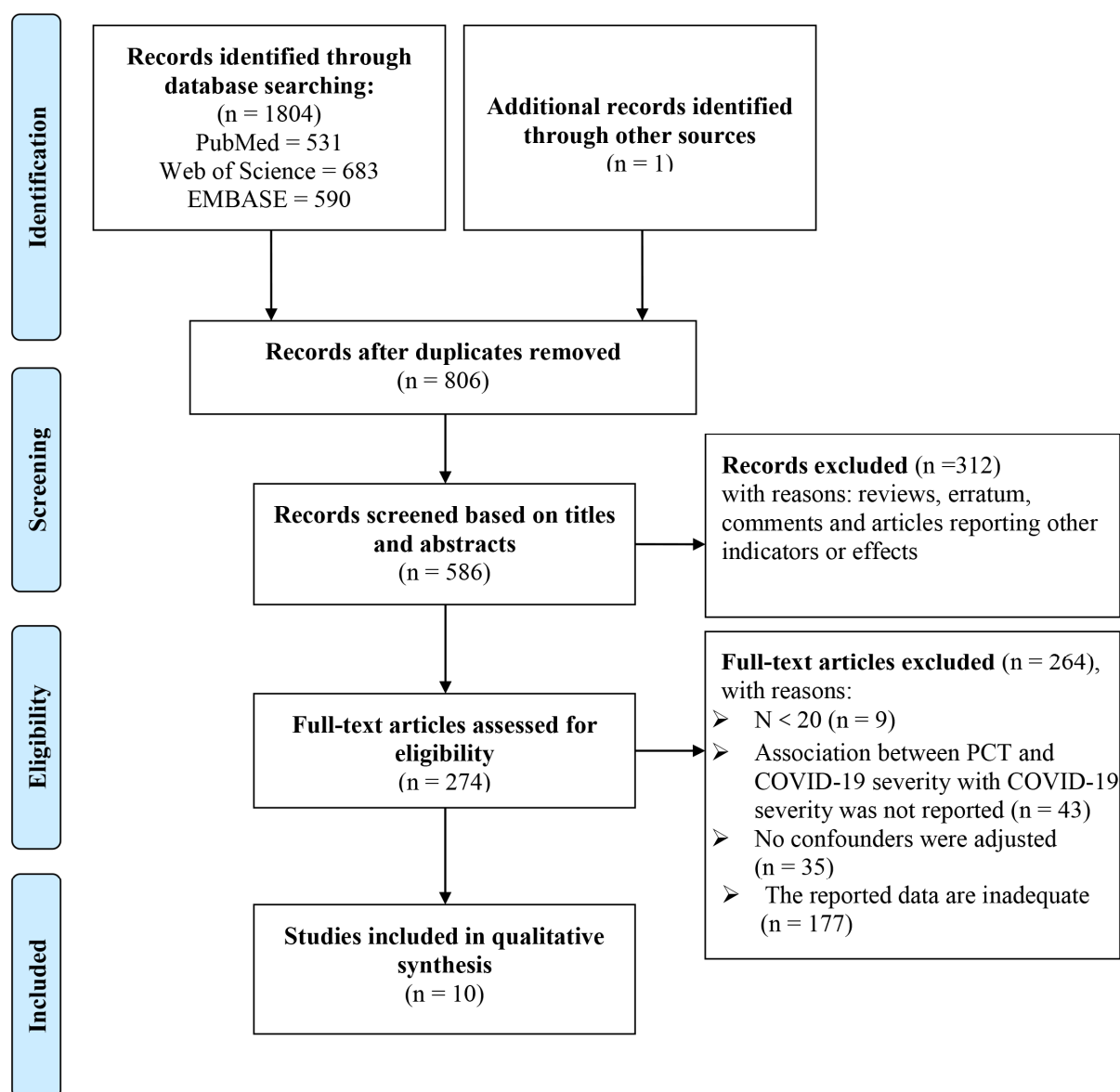
**Table S1** Search terms

<b>PubMed</b>	(Procalcitonin OR PCT) AND (COVID-19 [Supplementary Concept] OR "severe acute respiratory syndrome coronavirus 2" [Supplementary Concept] OR SARS-CoV-2 OR "severe acute respiratory syndrome coronavirus 2" OR "novel coronavirus 2019" OR 2019-nCoV OR "coronavirus disease 2019" OR "novel coronavirus pneumonia")
<b>Web of science</b>	TS = ('COVID-19' OR severe acute respiratory syndrome coronavirus 2' OR SARS-CoV-2' OR novel coronavirus 2019' OR 2019 nCoV' OR 'coronavirus disease 2019' OR novel coronavirus pneumonia') TS = ('Procalcitonin' OR 'PCT' )
<b>Embase</b>	<b>COVID-19</b> 'COVID-19': ti, ab OR 'severe acute respiratory syndrome coronavirus 2': ti, ab OR 'SARS-CoV-2': ti, ab OR 'novel coronavirus 2019': ti, ab OR '2019 nCoV': ti, ab OR 'coronavirus disease 2019': ti, ab OR 'novel coronavirus pneumonia': ti, ab <b>PCT</b> 'Procalcitonin' : ti, ab OR 'PCT' : ti, ab

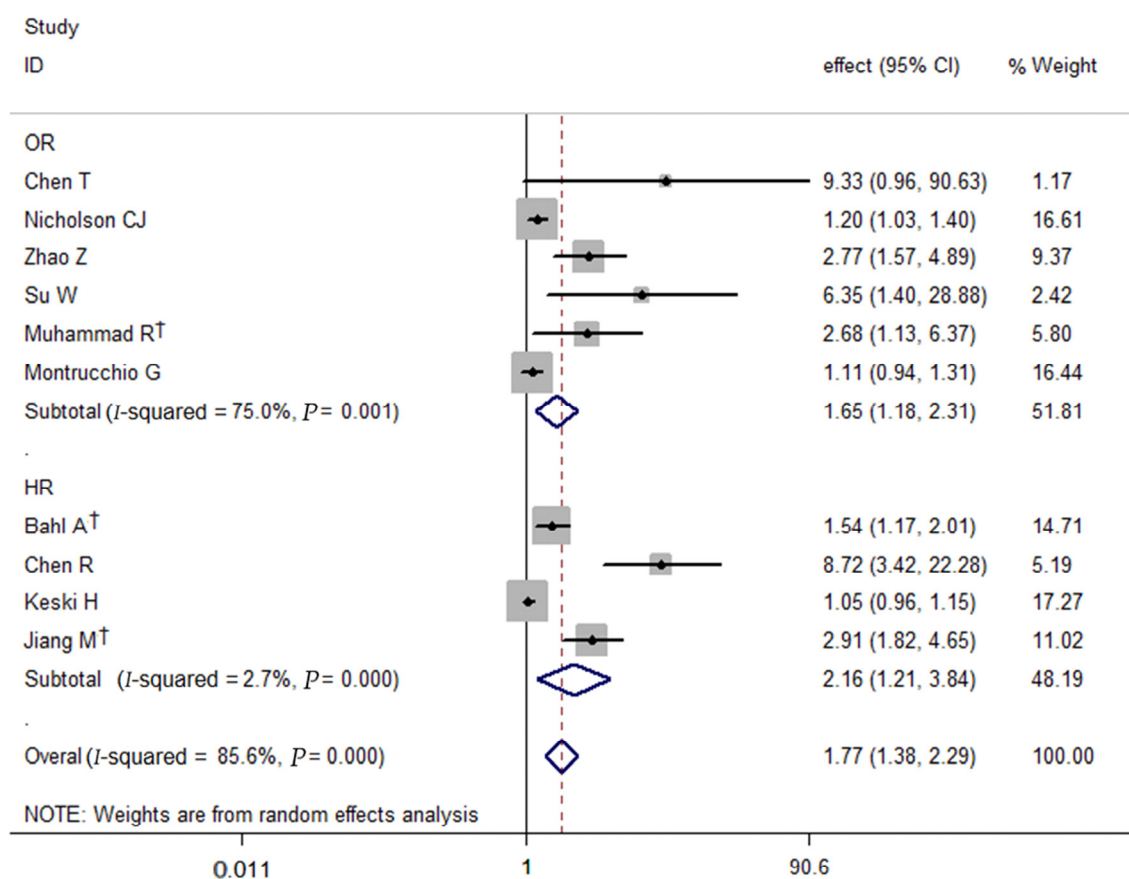
**Table S2** Assessment of the risk of bias in each cohort study with the Newcastle-Ottawa scale in meta-analysis

Author	Year	Selection				Comparability		Outcome		Score
		1 Is the definition adequate?	2 Representativeness of the cases	3 Selection of controls	4 Outcome of interest	5 Comparability of cohorts	6 Assessment of outcome	7 Length of follow-up	8 Adequacy of follow-up	
Chen T	2020	1	0	1	1	1	1	1	1	7
Bahl A	2020	1	1	1	1	1	1	1	1	8
Nicholson CJ	2020	1	1	0	1	1	1	1	1	7
Zhao Z	2020	1	1	1	1	1	1	1	1	8
Chen R	2020	1	1	1	1	1	1	1	1	8
Su W	2020	1	1	1	0	1	1	1	1	7
Hou H	2020	1	1	0	1	1	1	0	1	6
Muhammad R	2021	0	1	1	1	1	1	1	1	7
Montrucchio G	2021	1	1	1	0	1	1	1	0	6
Keski H	2021	1	1	1	1	1	1	1	1	8
Jiang M	2021	1	1	1	0	1	1	1	1	7

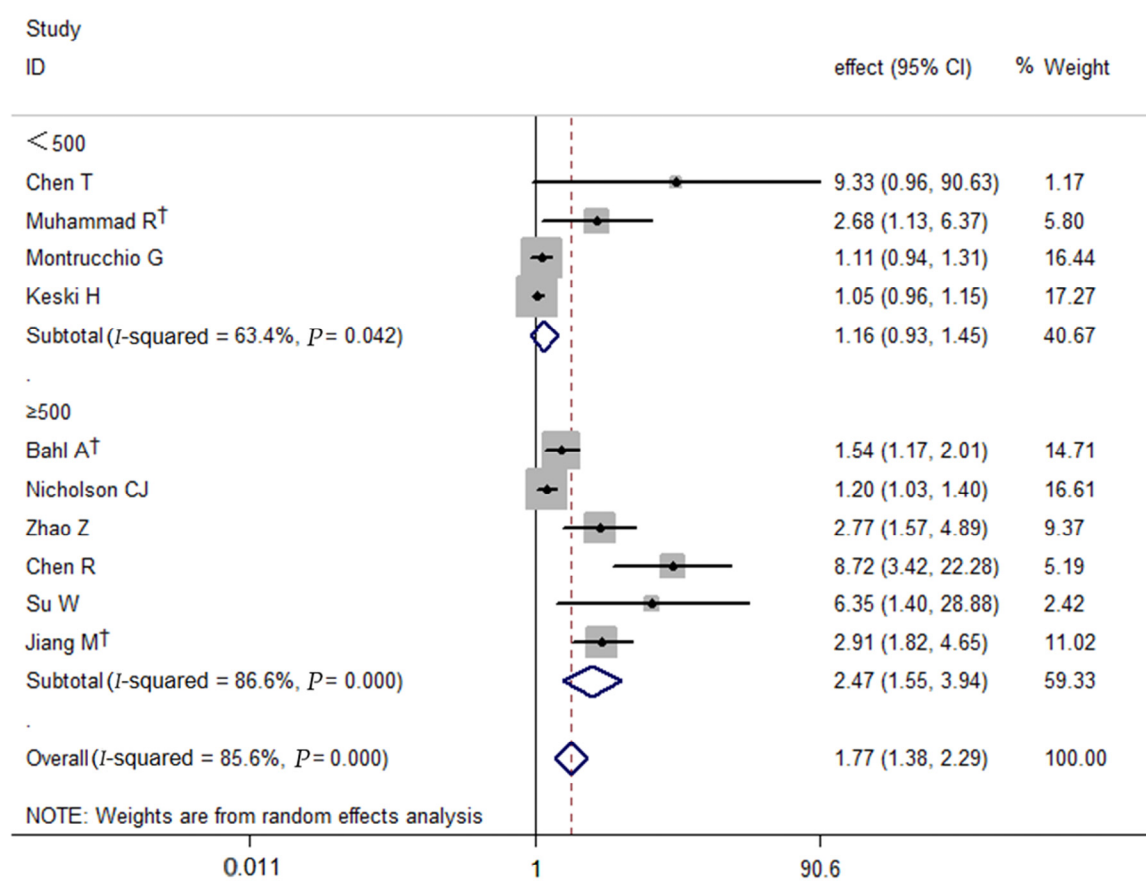
Abbreviations: “1” indicates that the study has adequately defined exposure and “0” indications the opposite



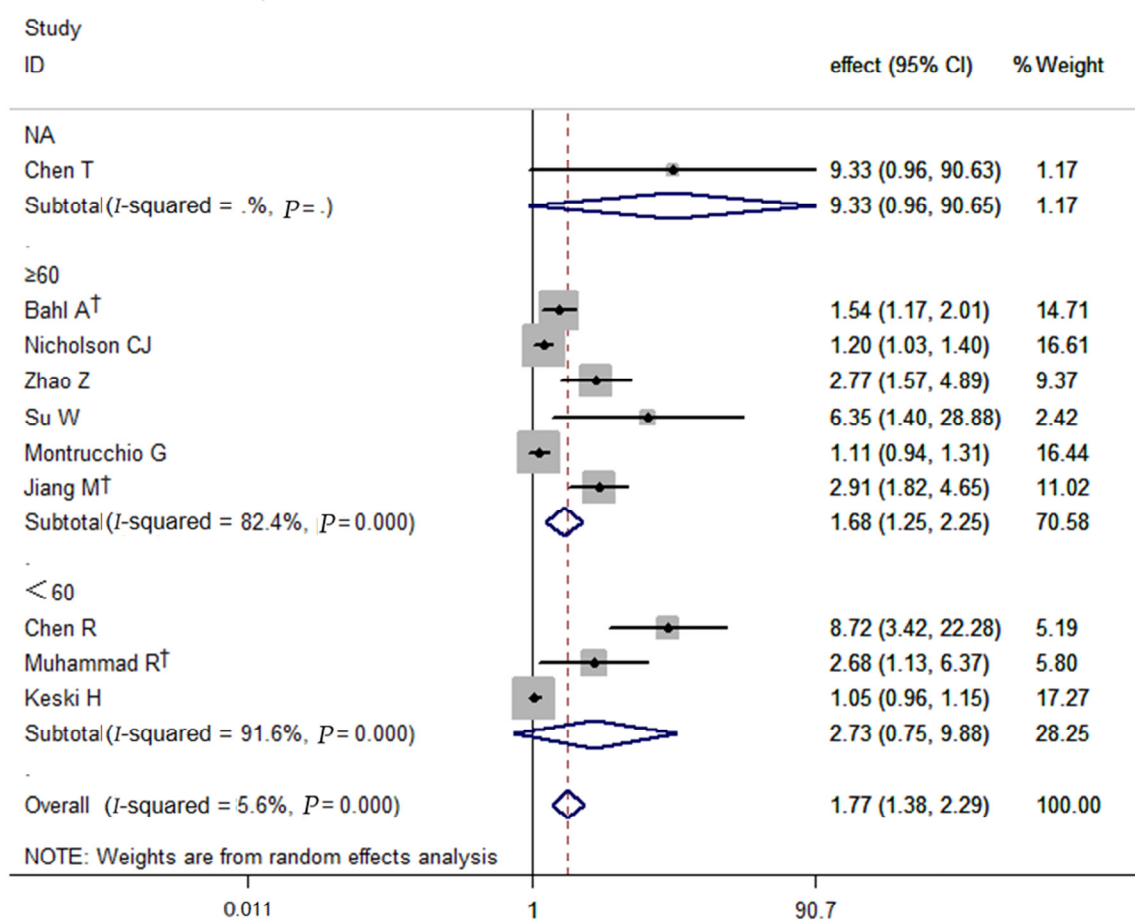
**Figure S1** Flow diagram of study selection



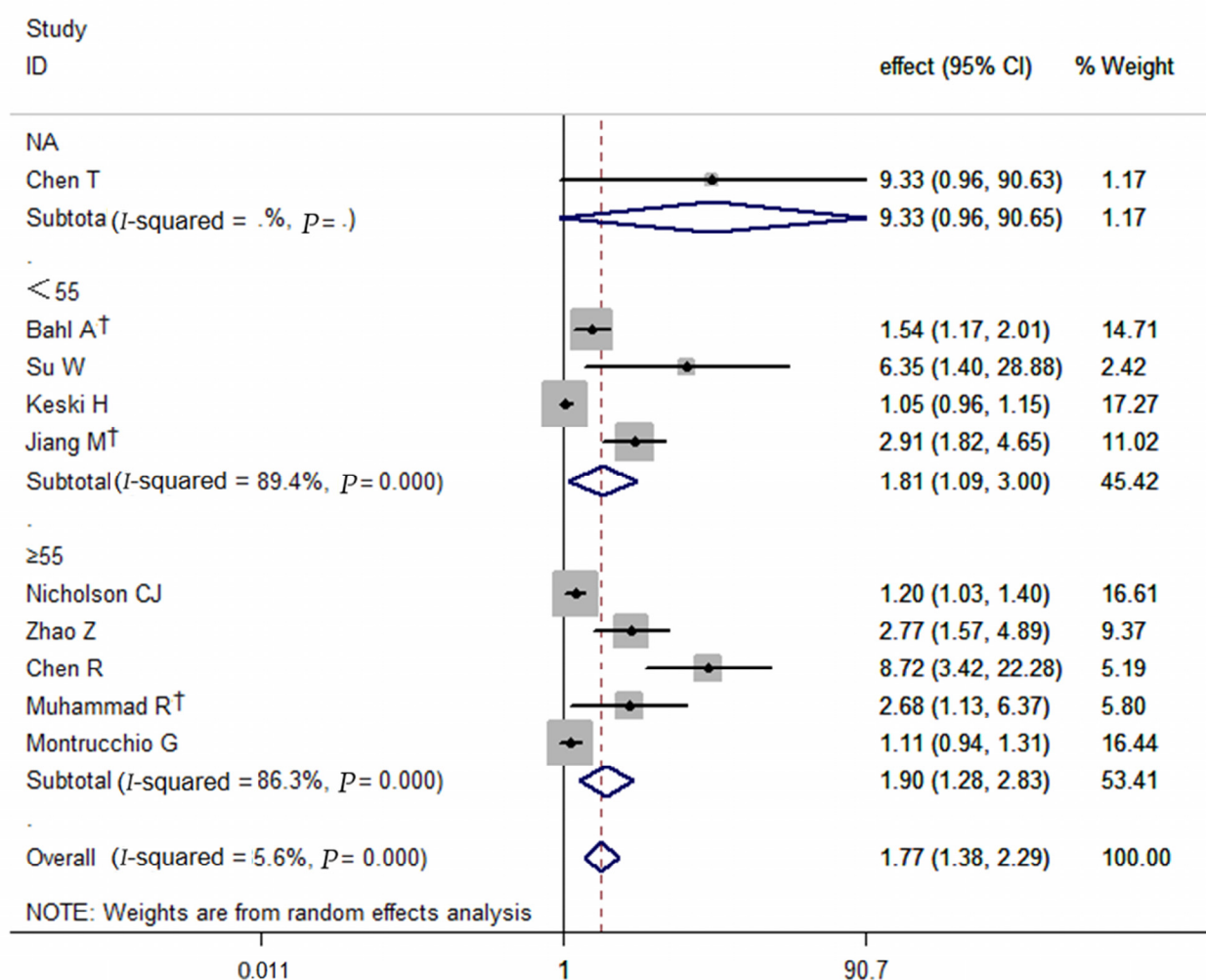
**Figure S2** Subgroup analysis based on effect estimates for the association between PCT and the severity of COVID-19. † indicates combined effects based on subgroups



**Figure S3** Subgroup analysis based on sample size for the association between PCT and the severity of COVID-19. <sup>†</sup> indicates combined effects based on subgroups

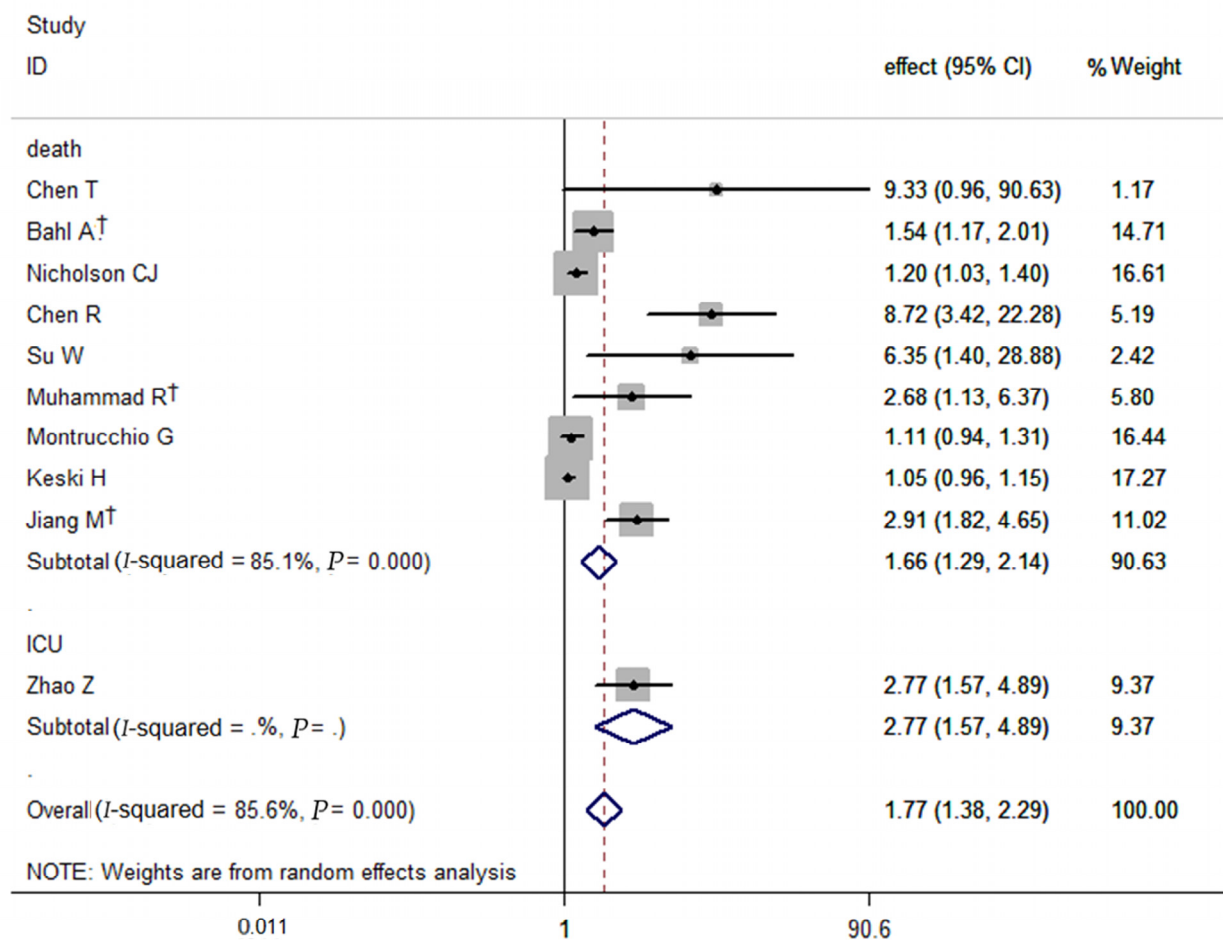


**Figure S4** Subgroup analysis based on age for the association between PCT and the severity of COVID-19. NR, not reported. <sup>†</sup> indicates combined effects based on subgroups

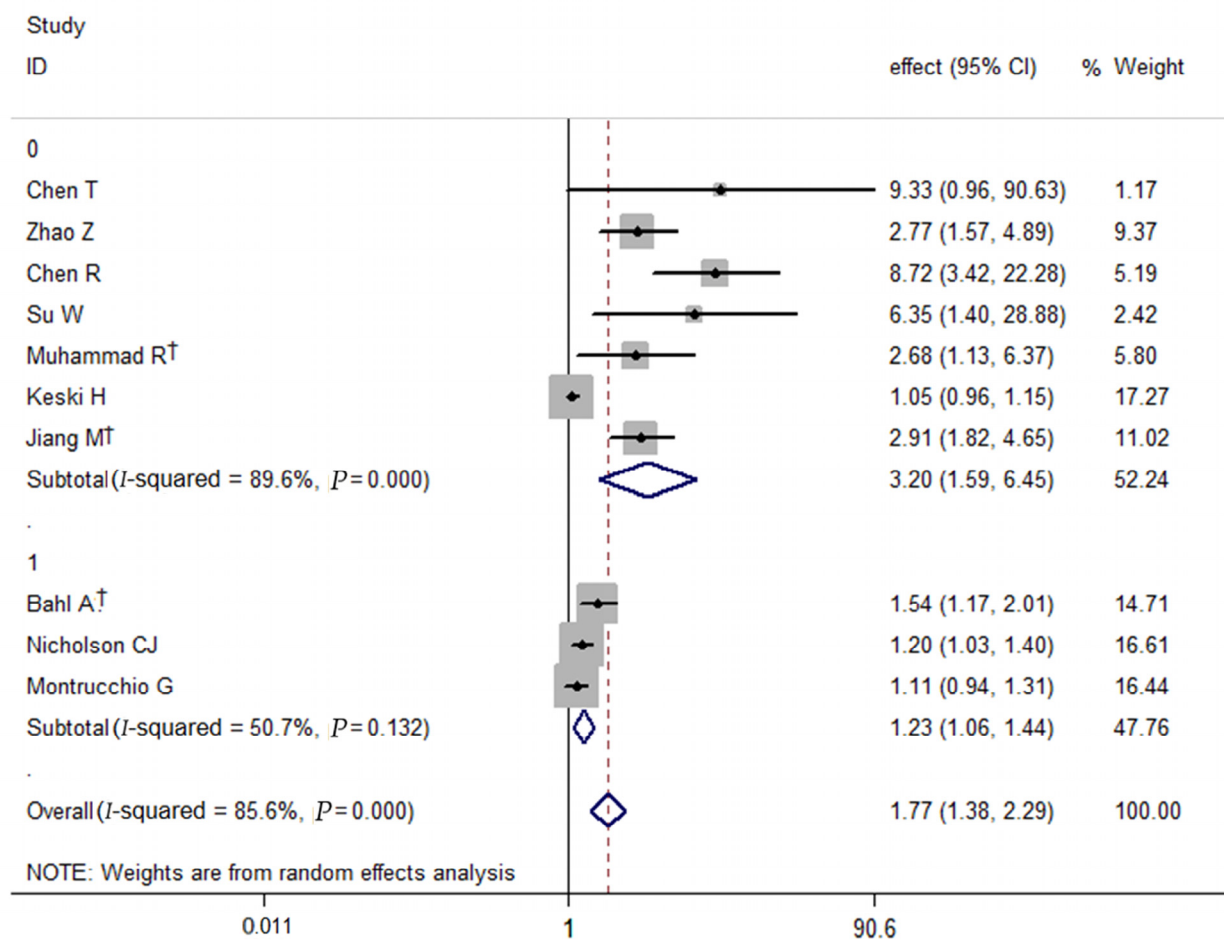


**Figure S5** Subgroup analysis based on sex (male, %) for the association between PCT and the severity of COVID-19. NR, not reported. <sup>†</sup> indicates combined effects based on subgroups

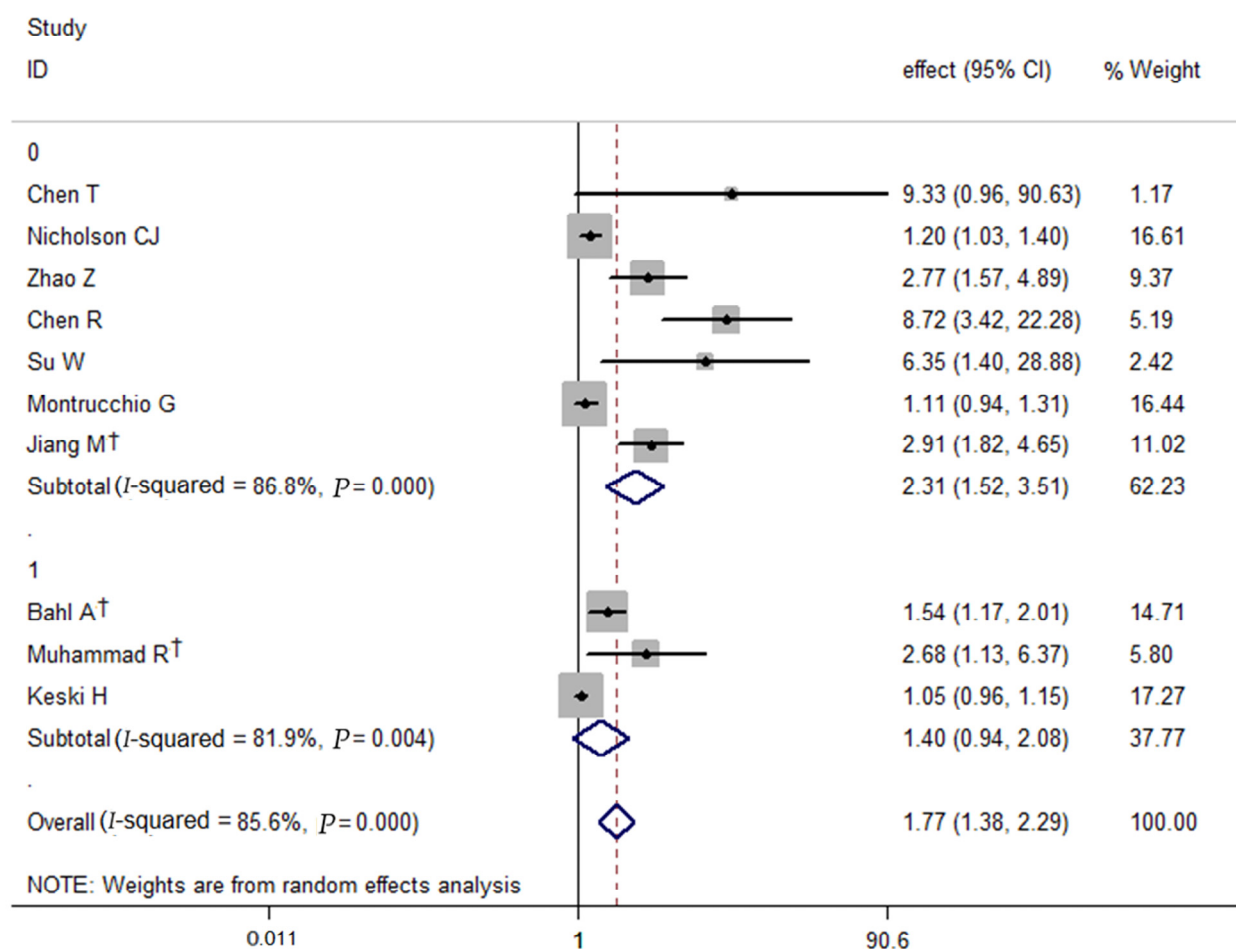




**Figure S6** Subgroup analysis based on outcome for the association between PCT and the severity of COVID-19. Others include severe, critical, mechanically ventilated, and ICU patients. <sup>†</sup> indicates combined effects based on subgroups



**Figure S7** Subgroup analysis based on diabetes for the association between PCT and the severity of COVID-19. “1” indicates the study adjusted for diabetes. “0” indicates the study unadjusted for diabetes. <sup>†</sup> indicates combined effects based on subgroups



**Figure S8** Subgroup analysis based on hypertension for the association between PCT and the severity of COVID-19. “1” indicates the study adjusted for hypertension. “0” indicates the study unadjusted for hypertension. † indicates combined effects based on subgroups