

1 Supplementary tables

2 Supplementary Table 1: List of conditions used for the safety analysis. ICD-10 codes used to identify the outcomes of interest are available 3 at <https://www.qresearch.org/data/qcode-group-library/>

Cardiovascular	Blood conditions
Venous thromboembolism	Aplastic anaemia
Immune thrombocytopenic purpura	Pernicious anaemia
Arterial thromboembolism	Haemolytic anaemia
Cerebral venous thrombosis	Disseminated intravascular coagulation
Other arterial thrombosis	
Myocardial infarction	Other conditions
Ischaemic stroke	Coeliac
Myocarditis	Anaphylaxis
Pericarditis	Cholangitis
Atrial fibrillation	Acute pancreatitis
Heart block	Autoimmune hepatitis
Ventricular tachycardia	Acute renal failure
Ventricular fibrillation	Rhabdomyolysis
Arrhythmia	Acute liver failure
	Jaundice
Neurological	Angioedema
Demyelinating disorders	Transplant reject
Myasthenia	Bullous pemphigoid
Guillain Barre syndrome	Inflame arthropathy
Encephalitis	Rheumatoid arthritis
Haemorrhagic stroke	Systemic lupus erythematosus
Subarachnoid haemorrhage	Addison's disease
Bell's Palsy	Crohn's disease
Multiple sclerosis	Colitis
Optic neuritis	Thyroiditis
	Vasculitis
	GI bleeding

Supplementary Table 2: Additional characteristics of patients who received Sotrovimab treatment in the community in England.

	Sotrovimab (SARS-CoV-2 positive)	Sotrovimab (SARS-CoV-2 symptomatic)
	<i>Counts (col %)</i>	<i>Counts (col %)</i>
Lag between positive test and treatment		
0 day	811 (3.8)	156 (1.9)
1 day	4079 (19.0)	1363 (16.9)
2-3 days	6887 (32.1)	2847 (35.2)
3-4 days	5101 (23.7)	2126 (26.3)
5-7 days	3816 (17.8)	1345 (16.6)
8-28 days	98 (0.5)	27 (0.3)
29+ days	321 (1.5)	123 (1.5)
Treatment before positive test	374 (1.7)	102 (1.3)
SARS-CoV-2 variant		
Delta	183 (0.9)	74 (0.9)
Delta plus	17 (0.1)	9 (0.1)
Omicron BA.1	6882 (32.0)	3543 (43.8)
Omicron BA.2	3613 (16.8)	1606 (19.9)
Unknown	10748 (50.0)	2835 (35.0)

Supplementary Note 1: Self-Controlled Case Series method – resources and further reading

- Introduction to the SCCS method [1-5]
- Assessing vaccine safety with the SCCS [6, 7]
- Measuring infection risk using SCCS [8]
- Modified SCCS methods [9]
- Drug effectiveness and hospitalisation risk [10]
- SCCS analyses in R [5]
- SCCS analyses in STATA [3]

References

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