**Table 5**. Comparison of the present study to other multicenter studies including more than 50 patients who reported data focusing on children who underwent HSCT at any time before the diagnosis of COVID-19

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Present study | Averbuch | Bhatt | Zama | Mukkada |
| Region | Multicenter Turkish Study | Multinational EBMTa Study | North&South America CIBMTRb study | Multicenter  Italian Study | Multinational Global Registry Study |
| Study period | March 2020-  August 2022 | March 2020-  December 2021 | March 2020-  May 2021 | March 2020-  August 2021 | April 2020-  February 2021 |
| Patient population | Children postHSCTc | Children postHSCT | Children postHSCT | Children with cancer and postHSCT | Children with cancer and postHSCT |
| Malign disease | 133/220 (60.5%) | 56/89 (62.9%) | 85/135 alloHSCT(63.0%) | 15/23 (65.2%) | 69/81(85.2%) |
| Number of patients | 196 | 89 | 167 | 153 | 81 |
| Median age  (min-max) years | 8.5 (0.6-21) | 9 (1-18) | Allo 15 (<1-21)  Auto 7 (1-21) | 7 (0-17) in total populationd | 8 (IQRe, 4-13), in total population |
| Males | 138 (62.7%) | 52 (58%) | 106 (64%) | 86 (56.2%) in total population | 891 (59.4%) in total population |
| HSCT type | 208 (94.5%) allo  12 (5.5%) auto | 85 allo (96%)  4 auto (4%) | 135 allo (80.8%)  32 auto (19.2%) | 19 allo (83%)  4 auto (17%) | allo/auto,  numbers N/Af |
| Time since HSCT  to COVID, median, min-max | 200 (IQR, 110-333) days | 7 (0-181) months | Allo: 15 (IQR, 7-45)  Auto 16 (IQR, 6-59) months | 219 (50-3910) days | 6/81 (<30 days)  13/81 (31-99 days)  20/81 (100-300 days)  31/81 (>300 days)  11/81 (unknown) |
| Asymptomatic | 51 (23.6%) | 35 (41%) | 146 (87%) mild/asymptomatic | 9 (47%) allo  3 (75%) auto | 642 (43%) in total population |
| Fever | 124 (56.4%) | 36 (43%) | N/A | 40 (75%) in total population | 619 (41%) in total population |
| Respiratory symptom | 74 (33.6%) Cough  30 (13.6%) URTDg  26 (11.8%) LRTDh | 26 (31%) cough | N/A | 10 (19%) in total population | 356 (24%) cough  310 (21%) URTD  231 (15%) LRTD in total population |
| GI symptom | 14 (6.2%) Diarrhea | 9 (11%) | N/A | 11 (21%) in total population | 152 (10%) in total population |
| Hospitalization | 87 (39.5%) | 49 (55%) | N/A | 62 (40.5%) in total population | 889 (67.4%) in total population |
| Severe disease | 34 (15.5%) ICUi  24 (10ç9%) MVj | 9 (10%) ICU | 6 (4%) MV | 2 (9%) ICU | 122 (9%) ICU in total population |
| Death | 13 (5.9%) | 7 (8%) | 10 (6%) | 0% | 83 (6%) in total population |
| Risk for ICU and mortality | ICU: HSCT from a mismatched donor, LRTD, thrombocytopenia  Mortality: HSCT rom a partially matched or mismatched donor, LRTD | ICU/mortality in alloHSCT: GVHDk, nonmalignant disease, ISTl (specifically MMFm), ISIn Fever, cough, coinfection, pulmonary radiologic findings, low Lansky score, high CRPo levels | COVID-19 diagnosis: HSCT-CIp score 1-2  Mortality: HSCT outside the US those transplanted in 2014-2020 | Moderate, severe and critical disease: Infections occurring earlier than 60 days after underlying disease or HSCT | Severe disease: low-income, lower-middle income or upper-middle income country, age 15-18 years, lymphopenia, neutropenia, intensive IST |

a*EBMT*, European Blood and Marrow Transplantation Society; b*CIBMTR*, Center for International Blood and Marrow Transplant Research; c*HSCT*, hematopoietic stem cell transplantation; dPercentages are presented in HSCT recipients if available and if not in the total population; e*IQR*, interquartile range; f*N/A*, not available; g*URTD*, upper respiratory tract disease; hLRTD, lower respiratory tract disease; IICU, intensive care unit; jMV, mechanical ventilation; kGVHD, graft versus host disease; lIST, immunosuppressive treatment; mMMF, mycophenolate mofetil; nISI, immunodeficiency scoring index; oCRP, C-reactive protein; pHSCT-CI, hematopoietic stem cell transplantation comorbidity index