Table S1. Articles on COVID-19 infection with more than 50 CHD patients

<table>
<thead>
<tr>
<th>Authors, Country</th>
<th>Study design</th>
<th>N</th>
<th>N adults age (18 years)</th>
<th>N children</th>
<th>Suspected COVID*</th>
<th>Confirmed COVID*</th>
<th>Age (years)</th>
<th>Sex</th>
<th>Definition of moderate/severe infection</th>
<th>Death</th>
<th>Old disease (Not hospitalized)</th>
<th>Hospitalized</th>
<th>Hospitalized with ventilation, inotropic support</th>
<th>CV complication</th>
<th>Current medications</th>
<th>Comorbidities associated with severe infection (OR, p value)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mohammadzadeh et al. (1)</td>
<td>Single centre telephone survey</td>
<td>309</td>
<td>Unknown</td>
<td>Confirmed COVID+ defined as: PCR+ and CT findings</td>
<td>Confirmed COVID+; 18 (6%)</td>
<td>Unknown status; 291 (94%)</td>
<td>Age: 14-72 Mean: 30.85%</td>
<td>Male: 44%</td>
<td>Death or hospitalization</td>
<td>278 (18%)</td>
<td>178 COVID+</td>
<td>277 symptomatic patients were hospitalized</td>
<td>No further details.</td>
<td>Unknown</td>
<td>Not assessed</td>
<td>Not assessed</td>
</tr>
<tr>
<td>Sabatino et al. (2)</td>
<td>Cross-sectional survey of 4 highvolume centers</td>
<td>76</td>
<td>72 adults (92%)</td>
<td>4 adults (5%)</td>
<td>Defined as symptoms and laboratory findings</td>
<td>Defined as ≥2 PCR+ tests</td>
<td>Age: 21-76 Mean: 38.07%</td>
<td>Male: 53%</td>
<td>Any CV complications</td>
<td>278 (26%)</td>
<td>197 adults (6%)</td>
<td>110 children (75%)</td>
<td>67/72 adults (92%)</td>
<td>5/43 adults (12%)</td>
<td>7/53 (13%)</td>
<td>Deaths and ICU admissions</td>
</tr>
<tr>
<td>Level et al. (3)</td>
<td>Retrospective chart review</td>
<td>93</td>
<td>62 adults (68%)</td>
<td>18 children (20%)</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Age: 21-27 Mean: 16.07%</td>
<td>Male: 58%</td>
<td>COVID (88% of 67)</td>
<td>78 (74%)</td>
<td>44/53 (83%)</td>
<td>76 (10%)</td>
<td>9/105 (9%) ongoing</td>
<td>11/31 (10%)</td>
<td>Deaths and ICU admissions</td>
<td>Not significant</td>
</tr>
<tr>
<td>Sabatino et al. (4)</td>
<td>Prospective singlecentre cohort</td>
<td>195</td>
<td>Unknown</td>
<td>Confirmed COVID+</td>
<td>Defined as symptoms and electrocardiographic findings on CT scan</td>
<td>Defined as positive test by PCR or ELISA</td>
<td>Age: 21-76 Mean: 38.42%</td>
<td>Male: 62%</td>
<td>Death or hospitalization</td>
<td>190 (88%)</td>
<td>178/203 (87%)</td>
<td>19/203 (9%)</td>
<td>10/272 (4%): Inotropic support</td>
<td>Not assessed</td>
<td>Not assessed</td>
<td>Not assessed</td>
</tr>
</tbody>
</table>

Articles with fewer than 50 patients, or only pediatric patients or Down syndrome patients were included.

*CV (cardiovascular) complication: Any of: palpitation/arthrythmia, chest pain, myocardial injury (troponin T above 99th percentile upper reference limit, heart failure, stroke/transient ischaemic attack (TIA), pulmonary hypertension, pericardial effusion, or respiratory failure.

**Complex congenital anatomy: Any of: Unrepaired or palliated cyanotic heart defect; status post Fontan procedure; single ventricle physiology; pulmonary atresia; transposition of the great arteries; truncus arteriosus; or abnormalities of the atrioventricular or ventriculoarterial connection.

***Comorbidities: Arterial hypertension, diabetes, atherosclerotic disease (stroke or coronary artery disease), obstructive lung disease, immunocompromised, cancer, liver disease/cirrhosis or renal failure.

Same patient. *Same patient.

Abbreviations:
IQR interquartile range. OR odds ratio. N number of patients. Suspected COVID-19 infection: Infection diagnosis based on symptoms consistent with COVID-19 infection and other clinical feature(s).
COVID+: Confirmed infection by polymerase chain reaction (PCR) test and/or other test (see table).
ACHD adult congenital heart disease. BAV bicuspid aortic valve. BMI body mass index. CHD congenital heart disease. CPAP continue positive airway pressure. CT chest thoracic computed tomographic imaging. ED Emergency department.
ECMO extracorporeal membrane oxygenation. ICU intensive care unit. ELISA enzyme-linked immunosorobent assay. HF heart failure. MPAP mean pulmonary artery pressure in mmHg. PH pulmonary hypertension. TIAT transient ischaemic attack. TVR tricuspid valve replacement. USA United States of America.

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References


