**Supplementary Table 2.** Characteristics of mother-child dyads for infants with MIS-N.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Study** | **Country** | **Study type; no. of cases** | **Gestational age at birth; Day of presenting illness [Median (Range)]** | **Gestational age of maternal COVID-19 infection; Trimester [Median (Range)]** | **Sex** | **Birth weight (g)****[Median (Range)]** | **Maternal SARS-CoV-2 diagnosis (qRT-PCR, Serology)** | **Neonatal COVID-19 serology (IgG, IgM)** | **Maternal Age & Ethnicity if stated [Median (Range)]** | **Maternal comorbidities, COVID vaccination status** | **Maternal symptoms during COVID-19 infection** | **Mode of delivery** | **Placental histology** |
| Divekar *et al*, 20217 | USA | Case report; 1 | GA 30; D1 | GA 30; Third | F | 1300 | ID NOW+b, IgG+ IgM- | IgG+, IgM-, ART -ve | 24, Hispanic | Severe preeclampsia, substance abuse, poor prenatal care | Asymptomatic | LSCS | NS |
| Lima *et al,* 20208 | Brazil | Case report; 1 | GA 33+4; D1 | GA 29; Third | F | 2400 | IgG+ IgM+ | IgG+, IgM+, RT-PCR- | 27 | None | Flu-like | LSCS | Mild nonspecific circulatory changes, with varying sizes of chorionic villi, intervening space with foci of calcification and hemorrhage, deciduous with slight deposition of fibrin and fibrinoid necrosis in the wall vessels. |
| Kappanayil *et al*, 20219 | India | Case report; 1 | Term; D22 | GA 31; Third | F | 3750 | RT-PCR+, IgG+ | IgG+, IgM-, RT-PCR- | NS | NS | Flu-like | NVD | NS |
| McCarty *et al,* 202110 | USA | Case report; 1 | GA 34+6; D1 | 34+6; Third | M | NS | RT-PCR+ | RT-PCR-, no serologies | 32 | Severe preeclampsia | Flu-like | NVD | Focal chronic infarcts consistent with vascular damage from inflammation due to maternal viral infection. |
| Schoenmakers *et al,* 202011 | Netherlands | Case report; 1 | Preterm; D1 | NS; Third | F | 75th centile | RT-PCR+ | Serologies -ve, RT-PCR- | NS | Obese, GDM | General malaise, myalgia and fever | LSCS | Presence of SARS-CoV-2 with generalized inflammation characterized by histiocytic intervillositis with diffuse perivillous fibrin depositions; damage to syncytiotrophoblasts. |
| Borkotoky *et al,* 202112 | UK | Case report; 1 | GA 38+3; D1 | GA 35; Third | M | 4840 | RT-PCR-, IgG+, IgM- | IgG+, IgM-, RT-PCR- | 41 | GDM | Fever, cough | LSCS | NS |
| Shaiba *et al,* 202113 | Saudi Arabia | Case report; 1 | GA 36; D1 | 1st time: Second2nd time: Third | F | 3004 | RT PCR+ | IgG + | 33, Filipino | None | 1st time: asymptomatic2nd time: mild URTI | NVD | Hypocoiled umbilical cord. Chorionic villi compatible with given GA with few intervillous hematomas and scattered areas of chorangiosis. |
| Amonkar *et al,* 202114 | India | Case report; 1 | Term; D6 | NS | M | 2400 | RT-PCR-, total IgG & IgM + | Total IgG/IgM+, RT-PCR- | NS | None | Asymptomatic | NVD | NS |
| Diwakar *et al,* 202115 | India | Case report; 1 | GA 39; D18 | GA 38; Third | M | 3250 | RT-PCR+ | IgG+, RT-PCR - | 36 | GDM, PIH | URTI symptoms, fever | LSCS | NS |
| Costa *et al,* 202116 | Italy | Case report; 1 | NS; D1 | NS | NS | NS | NS | IgG+ | NS | NS | NS | NS | NS |
| Amulya *et al,* 202117 | India | Case report; 1 | NS; D10 | NS; Second | M | NS | Serology + | IgG+, IgM+ | NS | NS | NS | NS | NS |
| Agrawal *et al,* 202118 | India | Case report; 1 | GA 39; D2 | GA 35; Third | M | 3300 | RT-PCR-, IgG+ IgM- | IgG+, IgM-, RT-PCR- | 34 | None; Unvaccinated | Asymptomatic | LSCS | NS |
| Bakhle *et al,* 202219 | India | Case report; 1 | GA 37; D8 | GA 29; Third | M | NS | IgG+ IgM- | IgG+, IgM-, RT-PCR- | NS | None | Mild | LSCS | NS |
| Nitya *et al,* 202220 | India | Case report; 1 | Term; D2 | NS; First | F | 2750 | Serology + | IgG+ | NS | None; Unvaccinated | NS | LSCS  | NS |
| Sojisirikul *et al,* 202221 | Thailand | Case report; 1 | GA 33; D15 | GA 19; Second | F; 2nd MCDA twin | 1230 | IgG+, IgM-, RT-PCR - | IgG+, IgM-, RT-PCR - | 34 | NS; Unvaccinated | Asymptomatic | LSCS | NS |
| Voddapelli *et al,* 202222 | India | Case report; 1 | GA 35; D3 | GA 32; Third | F | 2640 | NS | IgG+, IgM-, RT-PCR - | NS | NS; Unvaccinated | NS | LSCS  | NS |
| Gupta *et al,* 202223 | India | Case report; 1 | Term; D1 | NS; First and possibly third | M | NS | NS | IgG+, IgM- | NS | NS | Asymptomatic | NS | NS |
| Case report; 2 | Term; D6 | Just prior to delivery | F | NS | NS | IgG+, IgM- | NS | NS | NS | NS | NS |
| Malek *et al*, 202224 | Bangladesh | Case report; 1 | GA 35; D1 | GA 27; Third | F | 1950 | RT-PCR+ | RT-PCR-, no serologies | 33 | DM, PIH, hyperthyroidism | Fever, cough, SOB | LSCS | NS |
| Shinde *et al*, 202125 | India | Case report; 1 | GA 32; D1 | NA | M | 1474 | IgG +, RT-PCR - | IgG+  | 26 | NS; Unvaccinated | Asymptomatic | NVD | NS |
| Aguilar-Caballero *et al*, 202326 | Brazil | Case report; 1 | GA 28+5; D1 | GA 26+6; Second | M; DCDA twin | 1200 | RT-PCR+ | IgG+, IgM+ | 23 | None | Asymptomatic | NS | Placental pathology of co-twin showed acute chorioamnionitis with areas of fibrin deposition characteristic of intra-amniotic infection of an unidentified source |
| Arun *et al*, 202227 | India | Case report; 1 | GA 39; D2 | GA 32; Third | M | 2800 | RT-PCR+ | IgG+ | NS | None | NS | NVD | NS |
| Ragireddy *et al,* 202328 | India | Case report; 1 | GA 38; D25 | NS | M | 2850 | RT-PCR+, IgG+ | IgG+ | 32 | NS | Cough | NVD | NS |
| Rackauskaite *et al,* 202329 | Lithuania | Case report; 1 | Term; D21 | NS; Third  | M | NS | RT-PCR+, IgG+ | IgG+ | NS | NS | NS | NS | NS |
| Abdulaziz-Opiela *et al,* 202330 | Poland | Case report; 1 | GA 40; D1 | NS | M | 2580 | RT-PCR+, IgG+ | IgG+ | NS | NS, Unvaccinated | fever, headache, fatigue, cough | LSCS | NS |
| Shanker *et al*, 202131 | India | Case series; 4 | GA 37; D25GA 38; D15GA 36; D22GA 36; D19 | GA 36; ThirdGA 37; ThirdGA 32-36; ThirdGA 34: Third | NSNSMNS | NSNS2720NS | RT-PCR+RT-PCR+IgG+, RT-PCR+RT-PCR+ | NSNSRT-PCR-NS | NS | NS | NSNSAsymptomaticNS | NSNSLSCSNS | NS |
| More *et al,* 202232 | India | Case series; 14 | Term ≥37w (10)Late preterm 34–36w (3) Preterm<33w (1);D5 (D1-30) | Third (1), NS (13) | M (10), F (4) | 2560 (1500 - 3400) | IgG+ (7), RT-PCR+ (6) | IgG+ | NS | 1 unvaccinated, rest NS | NS | NS | NS |
| Pawar *et al*, 202133 | India | Case series; 20 | GA 34 (27–38); Term ≥37w (3)Late preterm 34–36w (13) Preterm<33w (4);D2 (D1-5); | GA 28 (12 – 35); First (1), Second (2), Third (15) | Male (10), Female (10); Singleton (15) Twins (5) | 2150 (1000– 4000) | IgG+ (4), RT-PCR+ (3) | IgG+ (18), IgG < cut off (2) | 26.5 (20–34) | NS, Unvaccinated | Asymptomatic (12), Fever (6) | 7 LSCS; 13 NVD | NS |
| Tambekar *et al*, 202234 | India | Case series; 3 | GA 36; D1GA 34: D1Term; D4 | NSNSThird | F (3) | 160027002500 | IgG+IgG+, IgM+, RT-PCR-IgG+ | IgG+, IgM +IgG+, IgM +IgG+ | 3025NS | NoneGDMNS | AsymptomaticAsymptomaticFever, cough, cold | LSCSLSCSNS | NS |
| Saeedi *et al*, 202335 | Iran | Case series; 2 | GA 39; D17GA 38; D20 | GA 35; ThirdGA 30; Third | MF | NS | IgG + IgM +NS | IgG +, RT-PCR-IgG +; IgM + | 23NS | NS | Asymptomatic | LSCS | NS |
| Balleda *et al*, 202236 | India | Case series; 18 | GA 35 (1), 36 (11), 38 (6) | NS | M (11), F (7) | NS | IgG+ (18) | IgG+ (18)  | NS | None | NA | NA | NS |
| Chaudhuri *et al*, 202237 | India | Case series; 12 | GA 27.5 (27 - 40); D2 (1 - 4) | NS | NA | 2450(650-3190) | IgG+ (9) RT-PCR+ (1) | IgG+ (10), RT-PCR+ (1) | NS | NS | Asymptomatic (9), Symptomatic (3) | NVD (3), LSCS (9) | NS |
| Hashiq *et al*, 202138 | India | Case series; 4 | GA 36.2GA 35GA 35GA 35.4 | NS | MMFM | 1700150016001800 | Nil (4) | IgG+ (4) | NS | NS | Nil | LSCS (4) | NS |
| Gamez-Gonzalez *et al,* 202239 | Mexico | Case series; 3 | NS; D1GA 32; D1GA 35; D1 | NSNSGA 18, Second | FMF | 370013001900 | RT-PCR+, IgG+ | IgG+ (3) | 32NS25 | DMPre-eclampsiaNS | AsymptomaticRespiratory distressNS | LSCS (3) | NS |
| Charki *et al,* 202240 | India | Cohort study; 98 | Preterm <37w (49)Term ≥37w (49); D1 (n=46), D2 (n=12), D3-7 (n=12),D8-14 (n=4),D15-21 (n=8),D22-28 (n=16) | NS | NS | NS | RT-PCR+(n=34), IgG (n=56) | IgG+ (n=98) | NS | NS | NS | NS | NS |