| First Author | Publication | Study | Location of Study | Sample | Age of Participants | Study | Vaccine | Quitcome(s) | Control Variables | Main Results | Overall Risk of Bias |
|----------------------|-------------|--|--|--------|---|--------------------|---|---|---|--|----------------------------|
| Abdollahi (68) | 2022 | Cross- sectional study | Iran | 427 | No age exclusions; mean age=29 years | 6/2021- 8/2021 | Sinopharm, AstraZeneca, SputnikV, Covaxin | Menstrual disturbances, metrorrhagia, hirsutism | None | Menstrual disturbances: AstraZeneca 10.7%; SputnikV 5%, Covaxin 17.6%, Sinopharm 8%; Metrorrhagia: AstraZeneca 6.3%, SputnikV 2.5%, Covaxin 11.8%, Sinopharm 3.5% Hirsutism: AstraZeneca 3.6%, SputnikV 1.3%, Covaxin 2.9%, Sinopharm 0.5% | High |
| Aldali (69) | 2022 | Cross- sectional study | Riyadh, Saudi Arabia | 604 | 16-17 years | 12/2021- 2/2022 | Pfizer, Moderna | "Menstrual disorder" | None | Adolescents who took the first dose and had chronic disease had 2.4 times higher odds of having menstrual disorder than non-chronic disease patients. | High |
| Al-Furaydi (31) | 2023 | Cross- sectional study Cross- | Saudi Arabia | 216 | 18-45 years | 2/2022- 3/2022 | Pfizer, Moderna, AstraZeneca Pfizer, Sinooharm, | Self-report of 8 possible menstrual changes: longer interval between menstruations, missed period, shorter interval between menstruations, more heavy bleeding than usual, less bleeding than usual, stronger pain during menstruation, less pain during menstruation, short menstruation Also asked if the changes persisted for 1, 2, or 3+ cycles Changes in the menstrual cycle regularity, duration, volume (flow), new- onset dysmenorrhea, intermenstrual bleeding (IMB), or postcoital bleeding (PCB) in first period | None (pre- | 65% of participants reported at least one menstrual change Most common changes were longer intervals between menstruations (44%) and stronger pain during menstruation (33%). No effect estimates provided. 76% reported no changes in cycle duration and 60% reported no changes in cycle duration and 60% reported no changes of dysmenorrhea post vaccination. "The association between the date of the last vaccine dose with menstrual timing, duration, flow, and dysmenorrhea after vaccine and period timing and period volume was found to be statistically significant." There was no association of vaccine twoe with menstrual complaints. with exceeding of | High |
| Al-Mehaisen (33) | 2022 | sectional study | Global | 1,506 | ≥18 years | 5/2021- 6/2021 | AstraZeneca, USSR | since receiving the vaccine. | post comparison) | AstraZeneca being associated with dysmenorrhea | High |
| Alvergne (35) | 2023 | Retrospe ctive case- control study | UK Saudi | 12,579 | 18-45 years | 3/2021- 62021 | AstraZeneca and Pfizer | Perceived vaccine side effects on menses; FIGO classification system for AUB parameters: frequency, regularity, duration, volume, and inter-menstrual bleeding; cycle length; skipped menstrual periods; regularity; days of flow; intensity of flow; inter-menstrual bleeding. | Menstrual characteristic s before pandemic, age, BMI, hormonal contraceptive use, reproductive disease | 82% did not experience menstrual changes or "abnormal" cycle parameters (as defined by FIGO) after vaccination. | High |
| Amer (70) | 2022 | cross- sectional study | Arabia, Syria, Egypt, Libya, Sudan | 1.254 | 15-50 vears | 5/2021- | Pfizer, Astrazeneca, Senopharm | Self-reported menstrual changes (amount, duration, symptoms) | None | 38.4% reported menstrual changes, 27.8% reported amenorrhea 55.1% of menstrual changes were still present >9 months later | High |
| | | cross- | Judan | 1,207 | 10-00 years | 0/0001 | Pfizer- | Perceived changes | 110116 | 11,017 (78%) reported experiencing menstrual | riigii |
| Baena-Garcia (43) | 2022 | sectional study | Spain | 14,153 | 18-55 years | 6/2021- 9/2021 | BION LECN, Moderna, | in the amount and duration of menstrual | None | cycle changes after vaccination. The most common menstrual changes were more | High |

| Supplement Table 1. | Cross-sectional s | studies or retrospective | case-control studies of | pre-menopausal individuals |
|---------------------|-------------------|--------------------------|-------------------------|----------------------------|
|---------------------|-------------------|--------------------------|-------------------------|----------------------------|

| | | | | | | | Oxford/AstraZ eneca, and Johnson & Johnson/Jans sen | bleeding, presence of clots, cycle length, and premenstrual symptoms after vaccine administration compared to the six previous menstruations (13 questions) | | menstrual bleeding (43%), more menstrual pain (41%), delayed menstruation (38%), fewer days of menstrual bleeding (34.5%), and shorter cycle length (32%). | |
|---------------|------|------------------------------|---|-------|-------------|-----------------------|---|--|--|---|------|
| Dabbousi (71) | 2022 | cross- sectional study | Lebanon | 505 | ≥18 years | 9/2021- 10/2021 | Pfizer, Astrazeneca, Sputnik, Sinopharm, Moderna | Heavy bleeding, light bleeding, pain, duration, regularity | None (pre- post comparison) | Heavy bleeding: 39.4% pre, 33.3% post Light bleeding: 26.7% pre, 33.5% post Pain: 75.4% pre, 75.2% post Duration: 7.9% pre, 9.9% post Irregular cycles: 12.5% pre, 20.4% post | High |
| Farland (30) | 2023 | cross- sectional study | US | 545 | 18-45 years | 5/2021- 12/2021 | Moderna, Pfizer, Janssen | Changes in menses since vaccination, when changes occurred (by dose), and when they resolved: missed periods, infrequent menstruation (>35 days), irregular menstruation, abnormal bleeding or spotting between the menstrual periods, abnormally light bleeding, abnormally heavy or prolonged bleeding, increased menstrual pain. | None | About 25% of vaccinated reported a change in their cycle after vaccination; most reported changes after their 2nd dose (56%) as compared with 1st (18%) and 3rd (14%) doses. Most common changes: irregular menses (43%), increased pain (30%), and abnormally heavy or prolonged bleeding (31%). Participants with a history of SARS-CoV-2 infection were less likely to report menstrual changes after vaccination vs. those without such history (OR=0.58; 95% CI: 0.32-1.04). | High |
| Filfilan (72) | 2023 | Cross- sectional study | Northern Africa, Middle East, Asia, Eastern Europe, Australia | 2,381 | 15-49 | 1/2022- 6/2022 | Pfizer, Moderna, Astrazeneca, Janssen | Changes in cycle length, days of menstrual flow, dysmenorrhea, flow intermenstrual bleeding | None | Changes in menstrual cycles were found for all types of vaccines. In 36% of vaccinated (2 doses), cycles became irregular, and in 29% of vaccinated (2 doses), cycles became prolonged (>35 days). Abnormalities were also experienced in the quantity of menstrual flow, with heavy flow reported in 31% of vaccinated. Severe dysmenorrhea was also a common post-vaccine menstrual change reported in 47% of vaccinated. | High |
| Gilan (46) | 2023 | Cross- sectional study | Israel | 174 | 18-45 years | 7/2021- 11/2021 | Pfizer-Blotech | Changes in amount or length of bleeding, intermenstrual bleeding and worsening in dysmenorrhea | BMI, age, background disease, hormonal treatment and parity. | Endometriosis patients were more likely to experience changes in bleeding patterns following vaccination (endometriosis: 39.5%, controls: 31.0%) and worsening in endometriosis symptoms with a 4.3-fold worsening in dysmenorrhea [95% CI 1.9-9.9]. | High |
| Hariton (73) | 2023 | Cross- sectional study | US | 5,314 | 18–55 years | 3/3/2022- 7/4/2022 | Three exposure groups: not infected & not vaccinated (control), vaccinated but not infected, but not vaccinated. Vaccine types: Pfizer, Moderna, Janssen | Users "Glow" app with a minimum of 6 months of continuous logging of menstrual cycles before and after April 2021. Primary outcome: changes in average cycle length and difference in cycle length in the 6 months before vs. each month after each event. Restricted to participants with cycles of 21–40 days. | Age, race, trying to conceive status, or symptoms associated with each event (results not shown) | No differences in average cycle length in the 6 months preceding or 6 months after vaccination. Participants with SARS-CoV-2 infection were more likely to report a longer first cycle after infection (0.35 days; 95% CI –0.15 to 0.56) than those without infection or vaccination, but difference was not clinically meaningful, and no difference observed in the month of infection or 2–6 months after infection. | Low |

| Kajiwara (74) | 2023 | cross- sectional study | Japan | 55 | 18–22 years | 10/2021- 3/2022 | Moderna, Pfizer | Regularity of menstruation; length of menstrual cycle; and day one date of menstruation around vaccination | None | Difference between predicted and actual menstrual cycle length was 1.9 ± 3.0 , 1.6 ± 2.8 , and 2.5 ± 3.8 days before vaccination and after 1st and 2nd dose of vaccine, respectively. In participants who received vaccinations twice within single menstrual cycle, this difference was 1.3 ± 3.5 and 3.9 ± 3.3 days before and after vaccination, respectively. Menstrual cycle length was slightly longer after 2nd dose. | Moderate |
|---------------|------|------------------------------|-----------------|--------|---|--------------------------|--|---|---|--|----------|
| Khan (75) | 2023 | Cross- sectional study | Saudi Arabia | 383 | 18-55 years | 6/25/22- 8/11/22 | AstraZeneca, Pfizer, Moderna | Menstrual regularity, intermenstrual bleeding, menstrual flow, and menstrual pain | Age, PCOS, contraceptive use, identified vaccine skeptics | Reports of menstrual irregularity increased from 30% pre-vaccine to 70% post-vaccine, intermenstrual bleeding from 40% pre-vaccine to 60% post-vaccine, and extreme menstrual pain from 39% pre-vaccine to 61% post-vaccine. Women with PCOS reported greater menstrual pain post-vaccine. Vaccine skepticism was associated with greater reported menstrual changes post-vaccine. | High |
| Kumar (76) | 2023 | Cross- sectional study | India | 5709 | 18-45 years | Not provided | COVISHIELD, COVAXIN | Frequent cycles, prolonged cycles, inter-menstrual bleeding, excessive bleeding, scanry bleeding, amenorrhea, cycle length, cycle regularity | None | 333 (6%) reported post-vaccination menstrual disturbances, with 33% having frequent cycles, 64% prolonged cycles, and 4% inter-menstrual bleeding. 301 (5%) noticed changes in the amount of bleeding, with 50% excessive, 49% scanty, and 1% amenorrhea followed by heavy bleeding. Irregularities of menstrual cycle and length were higher in the COVAXIN group (7%) vs. COVISHIELD (5%) group. | High |
| Laganà (77) | 2022 | Cross- sectional study | Italy | 164 | mean age: 35.8 ± 7.2 years | 9/10/2021- 10/10/2021 | AstraZeneca, Pfizer, Moderna, Janssen | frequency, length, and quantity of the menstrual cycle after vaccine administration | None | About 50-60% of participants who received the first dose of the COVID-19 vaccine reported menstrual cycle irregularities, regardless of the type of administered vaccine. Occurrence of menstrual irregularities seems to be slightly higher (60-70%) after the second dose. Menstrual irregularities after both 1st and 2nd doses resolved in ~50% of cases within two months. | High |
| Lee (15) | 2022 | Cross- sectional study | Not | 39,129 | 18-45 years (pre- menopausal) 55-80 years (post- menopausal) | 4/2021 - 6/2021 | Pfizer, Moderna, AstraZeneca, Janssen, NovaVax, Other | Heavier menstrual flow Breakthrough bleeding | Age, race/ethnicity , postvaccine adverse effects of fever or fatigue, reproductive conditions, contraceptive hormone use, history of bleeding in pregnancy, history of postpartum hemorrhage | 42% with regular menstrual cycles bled more heavily than usual, while 44% reported no change after being vaccinated. Among respondents who typically do not menstruate, 71% on long-acting reversible contraceptives, 39% of people on gender-affirming hormones, and 66% of postmenopausal participants reported breakthrough bleeding. | High |
| Lessans (78) | 2023 | Cross- sectional study | Israel | 219 | 18-50 years | 7/2021- 10/2021 | Pfizer, Moderna | Primary: irregular bleeding following vaccination. Secondary: presence of any menstrual change, including irregular bleeding, mood changes, or dysmenorrhea following the vaccine. | None (self- matched study) | Overall, 23.3% (n=51) experienced irregular bleeding and 40% (n = 83) reported any menstrual change after vaccination. Parity and presence of medical comorbidities were higher among patients who experienced irregular bleeding. | High |

| Marcelino (79) | 2023 | Cross- sectional study | Brazil | 1012 | 20-39 years | 12/31/21- 2/8/22 | Not reported. | Menstrual changes, menstrual cyclicity, days of menstrual flow, bleeding quantity | Age, ethnicity, cohabitation status, education, family income, contraception method, BMI, number of pregnancies, deliveries, and abortions, COVID infection | 29.9% of women reported menstrual changes after vaccination. 9.4% reported irregular cycles, 19.2% reported changes to menstrual flow, and 18.8% reported changes to bleeding quantity. Contraceptive use was associated with fewer menstrual changes. | High |
|--------------------------|------|------------------------------|------------------------------------|-------|-----------------------------------|-------------------------------|--|--|--|--|----------|
| Martínez- Zamora (44) | 2023 | Cross- sectional study | Spain | 848 | >18 years (pre- menopausal) | 9/2021- 3/2022 | Moderna, Pfizer- BioNTech | Worsened or new menstrual- associated symptoms in the first and second menstrual cycle after completed COVID- 19 vaccination. | Age, hormonal treatment, smoking, parity | Similar % in both endometriosis and non- endometriosis groups reported menstrual changes the first (52.6% vs. 48.8%, respectively) and second cycle after vaccination (29.0% vs. 28.1%, respectively). Bleeding frequency/regularity disorders were found to be more frequent in the non-endometriosis group in the first cycle after vaccination. | High |
| Matar (39) | 2023 | Cross- sectional study | North Africa, Middle East | 4,942 | ≥18 years | 11/2021- 12/2021 | AstraZeneca, Janssen, Pfizer, Sinopharm, Sputnik | Heaviness of flow, cycle length, pelvic pain, days of bleeding | None | Heavy periods: 24.6% vs. 22.0% Cycle length >36 days: 1.6% in both groups; Pelvic pain: 83.8% vs. 81.6% Period-related pelvic pain in past three months: 85.3% vs. 81.6% | Moderate |
| Minguez- Esteban (80) | 2022 | Cross- sectional study | Spain | 746 | 18-45 years | 2/2022- 6/2022 | Pfizer, Moderna | Menstrual pain intensity, menstrual bleeding, menstrual cycle duration | None | Sixty-five percent perceived changes in their menstrual cycle after vaccination, irrespective of type of vaccine or number of doses. An increase—rather than a reduction—in duration, bleeding, and pain during their menstrual cycles was reported after vaccination. The percentage that reported alterations after their last dose remained strongly constant across time, ranging from 64 to 65%. | High |
| Muhaidat (29) | 2022 | Cross- sectional study | MENA | 2.269 | > menarche | 7/2021- 8/2021 | Pfizer, Sinopharm, AstraZenecA | irregular menstruation, cramps, increased period frequency, menorrhagia, increased duration of menses, skipped periods, intermenstrual bleeding | None | 35.3% of participants reported menstrual abnormalities pre-vaccination; 66.8% reported menstrual abnormalities after vaccination | Hiah |
| Namiki (27) | 2022 | Cross- sectional study | Japan | 309 | ≥18 years (premenopaus al) | 12/27/2021 -3/5/2022 | Pfizer, Moderna | Abnormal bleeding and menstrual irregularity. | None | The prevalence of abnormal bleeding was 0.6%, 1.0%, and 3.0% for the first, second, and third doses, respectively. Irregular menses were more common than abnormal bleeding: 1.9%, 4.9%, and 6.6% for the first, second, and third doses, respectively. COVID vaccination was not markedly associated with abnormal bleeding or irregular menstrual cycles. | High |
| Qazi (40) | 2023 | Cross- sectional study | India | 300 | 15-49 years | 11/20/2021 - 11/27/2021 | Covaxin, Covishield | Cycle regularity, cycle length, heaviness of bleed, and menstrual pain | None | After vaccination, 10% experienced change in menstrual regularity (20% had a prolonged cycle, 30% had a missed cycle, 50% had delayed cycle) and 11% experienced change in cycle duration (55% had decreased duration, and 27% had increased duration). 33% reported cramps along with pain after vaccination. Duration of pain increased in 6% after vaccination. 25% reported change in menstrual flow after vaccination: increased flow (16%), decreased flow (59%). | High |

| Qashqari (37) | 2022 | Cross- sectional study | Saudi Arabia | 2338 | ≥12 years (premenopaus al) | 8/2021- 2/2022 | Pfizer, AstraZeneca, and Moderna | Changes in heaviness of flow, cycle length, menstrual cramps. | None | >50% had not noticed any menstrual abnormalities after COVID vaccination. After receiving the first dose, small percentages reported that their next period was heavier than usual (14.5%), later than usual (27.7%), and cramps were worse than usual (26.5%). After receiving a second dose, small percentages reported that their period was heavier than usual (17.1%), later than usual (24.7%), and cramps were worse than usual (26.8%). | High |
|---------------------------|------|------------------------------|---|------|----------------------------------|-------------------------|--|--|--|--|------|
| Rodríguez Quejada (28) | 2022 | Cross- sectional study | Online survey, 89% lived in South America | 184 | 18-40 years | 7/2021- 9/2021 | Pfizer, SinoVac, Janssen, Moderna, AstraZeneca, Other | Cycle regularity, menses length, bleed volume | None | - 51% regular, 43% irregular, 6% amenorrhea after vaccination - 65% normal duration of menses, 26% long menses, 9% amenorrhea/absent - 42% heavy bleeds, 21% light bleeds, 7% absent | High |
| Saleh Alzahrani (36) | 2023 | Cross- sectional study | Saudi Arabia | 1066 | 12-50 years | 12/2021- 6/2022 | Pfizer, AstraZeneca, and Moderna | Abnormal menstruation before vs. after COVID-19 vaccines, defined as shorter or longer cycle length, cycle irregularity, fewer or more days of flow, lighter or heavier intensity of flow, amenorrhea. | Occupation, gynecological conditions | Neither type of vaccine nor number of vaccine doses was associated with menstrual abnormality after vaccination. | High |
| Sarfraz (81) | 2022 | Cross- sectional study | Global | 510 | Not provided | 6/2021- 7/2021 | Details not provided | Changes in cycle length | None | OR for change in cycle length of vaccinated vs. unvaccinated=3.17 (95% CI: 0.47, 21.43); only 3% of cohort unvaccinated | High |
| Sualeh (38) | 2022 | Cross- sectional study | Pakistan | 384 | ≥18 years | 11/2021- 2/2022 | Details not provided | Variations in flow, intensity, duration, or regularity of menses | None | After taking the COVID-19 vaccine, 33 participants (21.4%) reported a decrease in their menstrual cycle length. The menstrual flow of 40 participants (15.1%) became heavier. | High |
| Taşkaldıran (32) | 2022 | Cross- sectional study | Turkey | 542 | 18-50 years | 5/31/2022- 7/31/2022 | Pfizer, Sinovac, Other | Cycle shortened, cycle delayed, period shorter, period longer, bleeding lighter, bleeding heavier, intermenstrual bleeding | None | Shorter cycle=3.7%, delayed cycle=5.7%, intermenstrual bleeding=2.4%, heavier bleeding=3.7%, lighter bleeding=2.6%, shorter period=2.4%, longer period=2.9% | High |

Abbreviations: AUB = abnormal uterine bleeding, β = mean difference, CI = confidence interval, OR = odds ratio, RR = relative risk, UK = United Kingdom, US = United States.