

Symptoms reported by SARS-CoV-2 seropositive and seronegative healthcare and administrative employees in Denmark from May to August 2020

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Questionnaire Items

The following items from the questionnaire were used in the study.

Rygning/smoking

- Dansk: “Ryger du?”
Svarmuligheder: “Nej”, “Nej, men jeg har tidligere røget”, “Ja – sommetider”, “Ja – dagligt, mindre end 10 om dagen”, “Ja – dagligt, 10 eller flere om dagen”, “Ønsker ikke at svare.”
- English: “Are you smoking”?
“Answer options: “No”, “No, but I have smoked before”, “Yes – sometimes”, “Yes - daily, less than 10 a day”, “Yes - daily, 10 or more a day”, “Do not want to answer.”

Højde/height

- Dansk: “Hvor høj er du i centimenter (cm)?”
- English: “How tall are you in centimetres (cm)?”

Vægt/weight

- Dansk: “Hvor meget vejer du i kilogram (kg)?”
- English: “How much do you weigh in kilograms (kg)?”

Symptomer/symptoms

- Dansk: “Har du haft nogle af følgende symptomer siden 1. marts? Sæt gerne flere kryds”.
Svarmuligheder: “Feber”, “Ondt i halsen”, “Hoste”, “Åndenød”, “Hovedpine”, “Muskel- eller ledsmærter”, “Træt eller udmattet”, “Manglende smags/lugtesans”.

- *English:* “Have you had any of the following symptoms since March 1? More than one symptom is allowed”.

Answer options: “Fever”, “Sore throat”, “Cough”, “Dyspnoea”, “Headache”, “Muscle or joint ache”, “Fatigue”, “Loss of sense of taste and smell”.

Symptomvarighed/symptom duration

- Dansk: “Hvornår begyndte symptomerne?”
- *English:* “When did the symptoms begin?”

- Dansk: “Har du stadig symptomer?”

Svarmuligheder: “Ja”, “Nej”.

- *English:* “Do you still have symptoms?”

Answer options: “Yes”, “No”.

- Dansk: “Hvornår holdt symptomerne op?”

- *English:* “When did the symptoms stop?”

Komorbiditet/comorbidity

- Dansk: “Lider du af (eller får medicin i behandlingen af) følgende kroniske sygdomme? (Vælg gerne flere udsagn)”.

Svarmuligheder: “Nej”, “Astma”, “Sukkersyge”, “Kroniske lungesygdomme udover astma (fx KOL, emfysem og andre tilstande der påvirker din vejrtrækning)”, “Hjertesygdomme”, “Nyresygdomme”, “Svækket immunforsvar som følge af medicinsk behandling eller

kroniske tilstænde, såsom hel eller delvis fjernelse af milten, organtransplantation, hiv/aids, kræft, svær gigt, etc.”, “Højt blodtryk (hypertension)”.

- English: “Do you suffer from (or receive medication in the treatment of) the following chronic diseases? More than one condition is allowed”.

Answer options: “No”, “Asthma”, “Diabetes”, “Chronic lung diseases in addition to asthma (e.g., COPD, emphysema and other respiratory tract conditions)”, “Heart disease”, “Kidney disease”, “Weakened immune system due to medical treatment or chronic conditions such as complete or partial removal of the spleen, organ transplantation, HIV/AIDS, cancer, severe arthritis, etc.”, “High blood pressure (hypertension) ”.

Figure 1: Flowchart

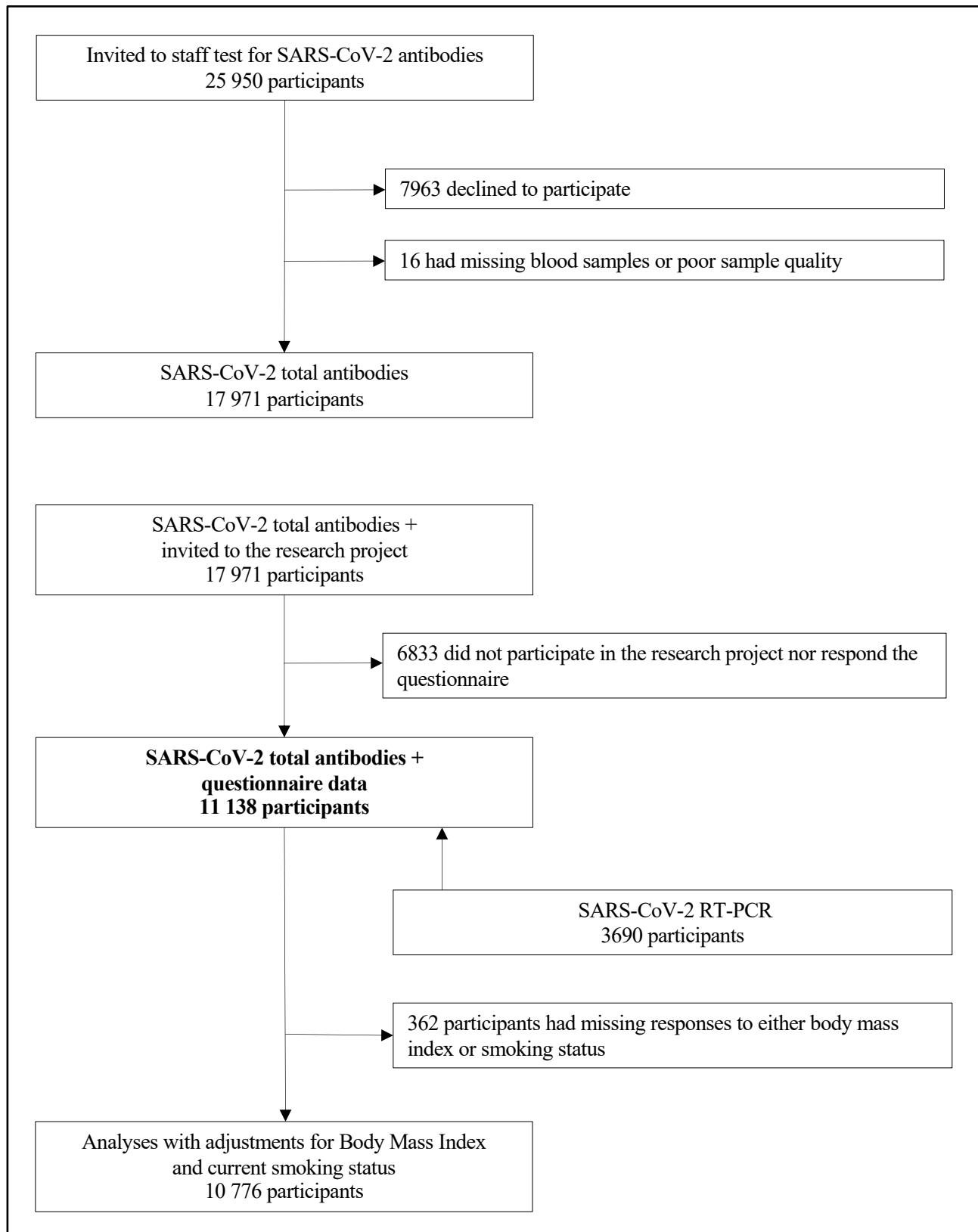


Table 1: Characteristics of the cohort by sex (n = 11 138)

	Women	Men	P-value
Participants	9795 (88%)	1343 (12%)	
Seropositive	406 (4%)	41 (3%)	0.056
Seronegative	9389 (96%)	1302 (97%)	
Age, years	46 (37; 55)	45 (36; 57)	0.1033
18–39	3219 (33%)	475 (35%)	< 0.001
40–59	5400 (55%)	621 (46%)	
≥60	1176 (12%)	247 (18%)	
Smoking status			
Non-current smoker	8743 (89%)	1192 (89%)	0.673
Current smoker	850 (9%)	121 (9%)	
Missing	202 (2%)	30 (2%)	
BMI, kg/m²	24 (22; 28)	25 (23; 28)	0.7846
BMI < 30	8138 (83%)	1143 (85%)	0.024
BMI ≥ 30 (obese)	1443 (15%)	165 (12%)	
Missing	224 (2%)	35 (3%)	
RT-PCR			
SARS-CoV-2 RNA - positive	216 (2%)	23 (2%)	0.549
SARS-CoV-2 RNA - negative	3076 (32%)	375 (28%)	
Comorbidity			
No	8139 (83%)	1048 (78%)	< 0.001
Yes	1656 (17%)	295 (22%)	

Data are presented as numbers with percentages.

Age and BMI are further presented as medians with interquartile ranges (IQR).

To compare groups, t-tests were used for normally distributed data and Mann-Whitney U tests were used for non-normally distributed data. Chi-squared tests were used to compare categorical values.

Table 2: Association between SARS-CoV-2 serological status and reporting symptoms adjusted for sex, age, BMI and current smoking status (n = 10 776)

Symptoms	Number ^a	OR (95% CI) ^b
Loss of sense of taste and smell		
Seronegative (reference)	285	1
Seropositive	221	37.2 (29.7–46.5)
Fever		
Seronegative (reference)	1153	1
Seropositive	234	9.4 (7.7–11.4)
Dyspnoea		
Seronegative (reference)	587	1
Seropositive	132	7.2 (5.7–9.0)
Muscle or joint ache		
Seronegative (reference)	1676	1
Seropositive	239	6.4 (5.3–7.8)
Fatigue		
Seronegative (reference)	2538	1
Seropositive	282	5.7 (4.7–7.0)
Cough		
Seronegative (reference)	2297	1
Seropositive	223	3.7 (3.0–4.5)
Headache		
Seronegative (reference)	3973	1
Seropositive	294	3.3 (2.7–4.1)
Sore throat		
Seronegative (reference)	3078	1
Seropositive	208	2.1 (1.7–2.6)

Multivariable logistic regression exploring the association between SARS-CoV-2 serological status and reporting symptoms adjusted for sex, age (categorical: 18–39, 40–59, ≥60), BMI (categorical: non-obese defined as a BMI below 30 kg/m², obesity defined as a BMI exceeding or equal to 30 kg/m²) and current smoking status (categorical: non-current smoker, current smoker) (Confounder model 2).

This analysis included 10 776 participants as 362 participants had missing responses to either BMI or smoking status.

^a Number of participants reporting the specific symptom.

^b Odds ratios with 95% CIs.

Table 3: Association between SARS-CoV-2 serological status and reporting symptoms by sex adjusted for age (n = 11 138)

Symptoms	Women		Men	
	Number ^a	OR (95% CI) ^b	Number ^a	OR (95% CI) ^b
Loss of sense of taste and smell				
Seronegative (reference)	262	1	31	1
Seropositive	208	36.5 (29.0–45.9)	17	27.1 (13.1–56.0)
Fever				
Seronegative (reference)	1057	1	122	1
Seropositive	217	9.0 (7.3–11.1)	22	10.8 (5.7–20.6)
Dyspnoea				
Seronegative (reference)	539	1	66	1
Seropositive	120	6.9 (5.5–8.6)	13	8.8 (4.3–18.0)
Muscle or joint ache				
Seronegative (reference)	1530	1	187	1
Seropositive	218	5.9 (4.9–7.3)	25	9.5 (5.0–18.2)
Fatigue				
Seronegative (reference)	2330	1	268	1
Seropositive	262	5.5 (4.5–6.8)	25	5.4 (2.8–10.4)
Cough				
Seronegative (reference)	2073	1	278	1
Seropositive	210	3.8 (3.1–4.6)	18	2.8 (1.5–5.3)
Headache				
Seronegative (reference)	3730	1	330	1
Seropositive	276	3.2 (2.6–4.0)	24	3.9 (2.1–7.4)
Sore throat				
Seronegative (reference)	2864	1	289	1
Seropositive	194	2.1 (1.7–2.5)	18	2.5 (1.3–4.7)

Multivariable logistic regression exploring the association between SARS-CoV-2 serological status and reporting symptoms by sex adjusted for age (categorical: 18–39, 40–59, ≥60) (Confounder model 1).

^a Number of participants reporting the specific symptom.

^b Odds ratios with 95% CIs.

Table 4: Association between SARS-CoV-2 serological status and reporting**symptoms by sex adjusted for age, BMI and current smoking status (n = 10 776)**

Symptoms	Women		Men	
	Number ^a	OR (95% CI) ^b	Number ^a	OR (95% CI) ^b
Loss of sense of taste and smell				
Seronegative (reference)	254	1	31	1
Seropositive	204	38.3 (30.2–48.4)	17	27.5 (13.1–57.7)
Fever				
Seronegative (reference)	1033	1	120	1
Seropositive	212	9.2 (7.4–11.3)	22	11.4 (5.9–22.1)
Dyspnoea				
Seronegative (reference)	521	1	66	1
Seropositive	119	7.0 (5.6–8.9)	13	10.0 (4.8–20.9)
Muscle or joint ache				
Seronegative (reference)	1493	1	183	1
Seropositive	214	6.1 (5.0–7.5)	25	10.7 (5.5–20.8)
Fatigue				
Seronegative (reference)	134	1	15	1
Seropositive	257	5.7 (4.6–7.1)	25	5.8 (3.0–11.3)
Cough				
Seronegative (reference)	2022	1	275	1
Seropositive	205	3.8 (3.1–4.6)	18	3.0 (1.6–5.7)
Headache				
Seronegative (reference)	3646	1	327	1
Seropositive	270	3.3 (2.6–4.1)	24	4.1 (2.1–7.8)
Sore throat				
Seronegative (reference)	2794	1	284	1
Seropositive	190	2.1 (1.7–2.6)	18	2.5 (1.3–4.8)

Multivariable logistic regression exploring the association between SARS-CoV-2 serological status and reporting symptoms by sex adjusted for age (categorical: 18–39, 40–59, ≥60), BMI (categorical: non-obese defined as a BMI below 30 kg/m², obesity defined as a BMI exceeding or equal to 30 kg/m²) and current smoking status (categorical: non-current smoker, current smoker) (Confounder model 2). This analysis included 10 776 participants as 362 participants had missing responses to either BMI or smoking status.

^a Number of participants reporting the specific symptom.

^b Odds ratios with 95% CIs.

Table 5: Association between SARS-CoV-2 serological status and reporting symptoms by chronic disease status adjusted for sex and age (n = 11 138)

Symptoms	Comorbidity			
	No chronic disease		Chronic disease	
	Number ^a	OR (95% CI) ^b	Number ^a	OR (95% CI) ^b
Loss of sense of taste and smell				
Seronegative (reference)	239	1	54	1
Seropositive	193	35.4 (27.9–44.9)	32	37.4 (21.1–66.1)
Fever				
Seronegative (reference)	944	1	235	1
Seropositive	208	9.6 (7.8–11.9)	31	7.3 (4.3–12.3)
Dyspnoea				
Seronegative (reference)	420	1	185	1
Seropositive	113	8.2 (6.5–10.4)	20	4.5 (2.6–7.8)
Muscle or joint ache				
Seronegative (reference)	1348	1	369	1
Seropositive	204	6.2 (5.0–7.6)	39	7.3 (4.3–12.4)
Fatigue				
Seronegative (reference)	2098	1	500	1
Seropositive	250	5.8 (4.7–7.2)	37	4.3 (2.5–7.4)
Cough				
Seronegative (reference)	1838	1	513	1
Seropositive	196	3.9 (3.1–4.8)	32	2.9 (1.8–4.9)
Headache				
Seronegative (reference)	3345	1	715	1
Seropositive	257	3.2 (2.6–3.9)	43	4.0 (2.3–7.0)
Sore throat				
Seronegative (reference)	2582	1	571	1
Seropositive	184	2.1 (1.7–2.6)	28	1.9 (1.2–3.3)

Multivariable logistic regression exploring the association between SARS-CoV-2 serological status and reporting symptoms by chronic disease status adjusted for sex and age (categorical: 18–39, 40–59, ≥60) (Confounder model 1).

^a Number of participants reporting the specific symptom.

^b Odds ratios with 95% CIs.