

Table 6. GRADE Evidence Profile: Should RSV vaccination vs. no vaccination be used in immunocompromised patients (adults and children)?

Certainty assessment							Nº of patients		Effect		Certainty	Importance
Nº of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	RSV vaccination	no vaccination	Relative (95% CI)	Absolute (95% CI)		
RSV-associated hospitalization in immunocompromised adults												
5 ^{6, 7, 12, 13, 14}	non-randomised studies (case-control studies)	serious ^a	not serious ^b	not serious	not serious	none ^c	9063 cases 139315 controls		VE: 68% (64-72)	-	⊕⊕⊕○ Moderate ^{a,b,c}	CRITICAL
							-	1.0%	Note: OR 0.32 (0.28 to 0.36)	678 fewer per 100,000 (from 718 fewer to 638 fewer)		
Critical illness in immunocompetent adults ≥60 yrs (ICU admission or in-hospital death or both)												
1 ⁶	non-randomised studies (case-control studies)	serious ^a	not serious	serious ^d	not serious	none	262 cases 26669 controls		VE: 81% (52-92)	-	⊕⊕○○ Low ^{a,d}	CRITICAL
							-	0.2%	Note: OR 0.19 (0.08 to 0.48)	162 fewer per 100,000 (from 184 fewer to 104 fewer)		
Serious adverse events (SAEs) in overall adults ≥60 yrs												
3 ^{9,10,11}	randomised trials	not serious ^e	not serious	not serious	not serious	none	1795/37187 (4.8%)	1732/36845 (4.7%)	RR 1.03 (0.97 to 1.09)	1 more per 1,000 (from 1 fewer to 4 more)	⊕⊕⊕⊕ High ^e	CRITICAL
Gullian-Barre Syndrome (GBS) in overall adults ≥60 yrs												
1 ⁷	non-randomised studies (before-after studies)	serious ^a	not serious	not serious	serious ^f	none	102/4746518 (0.0%)	0.0%	RR 2.1 (1.5 to 2.9)	0 more per 100,000 (from 0 fewer to 0 fewer)	⊕⊕○○ Low ^{a,f}	CRITICAL
Exacerbation of immunocompromising or autoimmune condition												
0							No comparative evidence informing this outcome was identified.			-	IMPORTANT	

CI: confidence interval; OR: odds ratio; RR: risk ratio

Explanations

a. Unknown confounding cannot be ruled out

b. Although statistically significant heterogeneity was observed (I-squared 70%), 4 out of 5 studies revealed clinically meaningful vaccine effectiveness rates - not rated down.

c. Large effect. However, not rated up for concerns of possible residual confounding

d. Based on indirect evidence in immunocompetent adults

e. Loss to follow-up was similar in both groups - not rated down

f. I-squared 74%