

Review of: "COVID-19 Vaccine Effectiveness Against Long-COVID-19 Condition in Pakistan"

Ali Jangjou

Potential competing interests: No potential competing interests to declare.

The study is timely and addresses a crucial public health concern. The large sample size (3,140 patients) provides a robust dataset for analysis. The use of both logistic regression and general linear models adds depth to the analysis. The objective is clearly stated and well-defined, focusing on the impact of demographics and vaccination timing on long-COVID-19. The methods section is comprehensive, outlining the data collection process, inclusion criteria, and statistical analyses used. The findings, particularly the association of demographic factors with long-COVID-19, could inform targeted interventions and healthcare strategies. However, I want the authors to clarify the following questions:

- 1. How representative is the data from the Abbas Institute of Medical Sciences of the Pakistani population? Were there any biases in patient selection or data collection?
- 2. The definition of long-COVID-19 (symptoms 12-20 weeks post-diagnosis) is somewhat narrow. How does this definition compare to other studies? Were there any patients with symptoms lasting longer than 20 weeks?
- 3. The abstract states "no significant association was found between vaccination status and long-COVID-19 outcomes." However, it also mentions varying odds ratios associated with vaccination timing. Could you clarify the relationship between vaccination status and long-COVID-19, considering both timing and vaccine type?
- 4. The abstract mentions comorbidities as a predictor of long-COVID-19. Could you provide more details about the specific comorbidities considered and their impact on the outcomes?
- 5. Were there any ethical considerations regarding data privacy and patient consent in this study?
- 6. What are the next steps for this research? Would it be beneficial to explore additional factors contributing to long-COVID-19, such as viral variants, severity of initial infection, or specific symptom clusters?

Qeios ID: ROYQGG · https://doi.org/10.32388/ROYQGG