SUPPLEMENTARY MATERIAL

Association Between Vitamin D Deficiency and Tuberculosis among HIV-Negative Individuals: A Systematic Review & Meta-Analysis

Ahmed Oubaasri^{1,*}, Fatima Zahra El Mskini¹, Asmae Labyad¹, Aicha Madkour¹, Slimane Mehdad¹ and Souad Benaich¹

¹Physiology and Physiopathology Team, Faculty of Sciences, Mohammed V University in Rabat, Morocco

© 2025 The Author(s). Published by Bentham Open.

This is an open access article distributed under the terms of the Creative Commons Attribution 4.0 International Public License (CC-BY 4.0), a copy of which is available at: https://creativecommons.org/licenses/by/4.0/legalcode. This license permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

*Address correspondence to this author at the Physiology and Physiopathology Team, Faculty of Sciences, Mohammed V University in Rabat, Morocco; E-mail: ahmedoubaasri2013@gmail.com

Cite as: Oubaasri A, Zahra El Mskini F, Labyad A, Madkour A, Mehdad S, Benaich S. Association Between Vitamin D Deficiency and Tuberculosis among HIV-Negative Individuals: A Systematic Review & Meta-Analysis. Open Public Health J, 2025; 18: e18749445386757-SP. http://dx.doi.org/10.2174/0118749445386757250328080921

Supplement 1:

The study was registered in the international prospective register of systematic reviews (PROSPERO) under the registration number CRD42024518012(Link: https://www.crd.york.ac.uk/prospero/display_record.p hp?RecordID=518012).

Supplement 2: Search strategy

PubMed/Medline = 972 results

(((((((((((Vitamin D [Title/Abstract]))) OR ("vitamin D deficiency" [MeSH Terms])) OR ("vitamin D deficiency" [Title/Abstract]))) OR (25-hydroxyvitamin D)) OR (1,25dihydroxyvitamin D)) OR (25(OH)D)) AND (tuberculosis [MeSH Terms]))) OR (tuberculosis [Title/Abstract]) AND ((medline [Filter]) AND (fha [Filter]) AND (observationalstudy [Filter]) AND (humans [Filter]) AND (english [Filter] OR french[Filter])) AND ((medline [Filter]) AND (observationalstudy [Filter]) AND (humans [Filter]) AND (english [Filter] OR french [Filter]))

Scopus = 660

(KEY (vitamin AND d) OR KEY (vitamin AND d AND deficiency) OR KEY (25-hydroxyvitamin AND d) OR KEY (1,25-dihydroxyvitamin AND d) OR KEY (25 (oh) d) AND KEY (tuberculosis) OR KEY (tuberculosis AND patient))

AND (LIMIT-TO (SUBJAREA, "MEDI")) AND (LIMIT-TO (DOCTYPE, "ar")) AND (LIMIT-TO (EXACTKEYWORD, "Human")) AND (LIMIT-TO (LANGUAGE, "English") OR LIMIT-TO (LANGUAGE, "French"))

Web of science = 163

"vitamin D serum level" (Abstract) or "vitamin D deficiency " (Title) and "tuberculosis " (Keyword Plus ®) or " tuberculosis patient» (Abstract) and "human" (Keyword Plus ®) and English or French (Languages)

Sciences direct = 369

"vitamin D deficiency" AND tuberculosis AND human

Supplement 3: Funnel plot

Figure S1 Funnel plot of mean differences in vitamin D levels between tuberculosis (TB) patients and control groups:

Figure S2 Funnel plot of mean differences in vitamin D levels between TB patients and control groups:

Figure S3 Funnel plot of pooled odds ratios for the association between vitamin D deficiency and tuberculosis (TB), using a random-effects model:

Supplement 4: Newcastle-Ottawa quality assessment Scale

NBLUC HEAL





Send Orders for Reprints to reprints@benthamscience.net

CrossMark



OPEN ACCESS



Table 1.	Bias assessment	of cross-sectional	studies using	the newcastle-ottawa scale
----------	------------------------	--------------------	---------------	----------------------------

Chudu		Sele	ction		Comparability	Outcome		Coore	
Study	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6	Item 7	Score	
Wang <i>et al.</i> (2019)	1	1	1	1	1	2	1	8	
Workineh et al. (2017)	1	1	1	1	1	2	1	8	
Balcells et al. (2017)	1	1	1	1	1	2	1	8	
Belyaeva et al. (2017)	1	1	1	1	1	2	1	8	

Item 1: Representativeness of the sample; Item 2: Sample size; Item 3: Non-respondents; Item 4: Ascertainment of the exposure (risk factor); Item 5: Comparability of subjects in different outcome groups on the basis of design or analysis; Item 6: Assessment of outcome; Item 7: Statistical test.

Table 2. Bias assessment of case-control studies using the newcastle-ottawa scale.

Churche		Sele	ction		Compa- Rability	Exposure			6
Study	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6	Item 7	Item 8	Score
Jaimni <i>et al.</i> (2021)	1	1	1	1	2	1	1	1	9
Jongwon et al. (2016)	1	1	1	1	2	1	1	1	9
Junaid <i>et al.</i> (2016)	1	1	1	1	1	1	1	1	8
Hong et al. (2014)	1	1	1	1	2	1	1	1	9

Item 1: Case definition is adequate.; Item 2: Representativeness of the cases; Item3: Selection of Controls; Item 4: Definition of Controls; Item 5: Comparability of cases and controls on the basis of the design or analysis; Item 6: Ascertainment of exposure; Item 7: Same method of ascertainment for cases and controls; Item 8: Non-Response rate.

Table 3. Bias assessment of cohort studies using the newcastle-ottawa scale.

	Selection				Comparability	Outcome			
Study	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6	Item 7	Item 8	Score
Arnedo-Pena et al. (2014)	1	1	1	1	1	1	1	1	8

Item 1: Representativeness of the exposed cohort; Item 2: Selection of the non-exposed cohort; Item 3: Ascertainment of exposure; Item 4: Demonstration that outcome of interest was not present at start of study; Item 5: Comparability of cohorts on the basis of the design or analysis; Item 6: Assessment of outcome; Item 7: Was follow-up long enough for outcomes to occur; Item 8: Adequacy of follow up of cohorts.