

Supplementary. Table S1. Interaction studies between clinical characteristics and; (left) AST dependent variable; (center) LDH dependent variable; (right) AST/ALT ratio as dependent variable.

| AST (Dependant variable) | p-Value |
|-------------------------------------|----------------|
| Gender vs. AST | 0.509 |
| Outcome vs. AST | 0.0001 |
| Age vs. AST | 0.0001 |
| Gender*Survival | 0.425 |
| Gender*Age | 0.109 |
| Survival*Age | 0.0001 |
| Gender*Survival*Age | 0.002 |

| LDH (Dependant variable) | p-Value |
|-------------------------------------|----------------|
| Gender vs. LDH | 0.317 |
| Outcome vs. LDH | 0.0001 |
| Age vs. LDH | 0.0001 |
| Gender*Survival | 0.015 |
| Gender*Age | 0.036 |
| Survival*Age | 0.0001 |
| Gender*Survival*Age | 0.0001 |

| AST/ALT (Dependant variable) | p-Value |
|---|----------------|
| Gender vs. AST/ALT | 0.068 |
| Outcome vs. AST/ALT | 0.088 |
| Age vs. AST/ALT | 0.407 |
| Gender*Survival | 0.049 |
| Gender*Age | 0.990 |
| Survival*Age | 0.642 |
| Gender*Survival*Age | 0.845 |

Note: Two-way ANOVA was performed. P-value<0.05 indicates interaction between factors.
Significant correlations are labelled in grey

Supplementary Table S2. Comparison of LFTs abnormalities detected at admission time in patients with SARS-CoV-2 in recently published studies.

| Country | Study design | Time frame | Number of patients | LFTs abnormalities at admission (patients %) | LFTs abnormalities correlate with | Reference |
|---------|--|---------------------|--------------------|---|---------------------------------------|---------------|
| Spain | single-center study (Hospital Universitario 12 de Octubre in Madrid) | 25.02.20 - 23.04.20 | 799 | ALT 25.73%, AST 49.17%, GGT 34.62%, ALP 24.21%, LDH 55.84%, AST/ALT 75% | | Current study |
| France | multicenter study (CHU Montpellier, CH Narbonne). | 10.03.20 - 18.04.20 | 234 | Total 66.6% | -Risk of the ICU -Mortality | [14] |
| Italy | multicenter study (five internal medicine COVID-Units in two regions of Northern Italy) | 22.02.20 - 8.04.20 | 565 | Total 58% (AST 44%, ALT 32%, GGT 34%, ALP 5%) | -Risk of ICU -Mortality | [12] |
| Italy | single-center study (Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome) | 6.03.20 - 16.04.20 | 515 | Total 31.3% (AST 20.4%, ALT 19%, GGT 13.6%) | -Risk of ICU | [13] |
| Austria | single-center study (University Hospital of Innsbruck, Austria) | 26.02.20- 21.04.20 | 655 | AST 42% | -Acute phase proteins and IL-6 | [15] |
| USA | multicenter study (12 hospitals in New York City, Long Island, and Westchester County, New York) | 1.03.20- 4.04.20 | 5700 | AST 58.4%, ALT 39.0 | - | [10] |
| China | single-centre Wuhan Jinyintan Hospital | 1.01.20- 20.01.20 | 99 | AST 35% ALT 28% LDH 76% | - | [3] |
| China | multicenter study (Wuhan Jinyintan hospital and Union Hospital of Tongji Medical College) | 20.12.19- 23.01.20 | 81 | AST 53% | - | [21] |
| China | multicenter study (seven designated tertiary hospitals in Zhejiang province) | 10.01.20- 26.01.20 | 62 | AST 16.1% LDH 27% | - | [22] |
| China | single-centre (Yin-tan Hospital in Wuhan) | 16.12.19- 2.01.20 | 41 | ALT 37% LDH 73% | - | [4] |
| China | single-centre (Third People's Hospital of Shenzhen) | 11.01.20- 21.02.20 | 417 | Total 76.3% ALT 12.9% AST 18.23% GGT 16.3% ALP 4.82% | -progress to severe pneumonia (26.7%) | [8] |