## Supplemental material

Table 1 Effect of zinc supplementation on the incidence of ARI, Diarrhoea and Growth in the study participants (Per protocol analysis)

Outcome	Intervention group (Zinc group) n=146	Control group n=149	Mean difference (95% CI)	p-value	Effect size (Cohen'd value)
Estimated mean			-71 (-0.95 to -		
annual incidence					
of ARI	0.22 (0.62)	0.93 (1.26)	0.48)	< 0.001	-0.72
(episodes/child-			0.10)		
year); mean (SD)					
Estimated mean					
annual incidence					
of acute	0.09 (1.26)	21/216)	-1.12 (-1.54 to	<0.001	-62
Diarrhoea	0.98 (1.36)	2.1(2.16)	-0.70)	<0.001	-02
(episodes/child-					
year); mean (SD)					

Gain in weight over 6 months (gram)	3166.10 (99.29)	2806.71(62.78)	359.38(340.39 to 378.38)	<0.001	4.34
Gain in length over 6 months (cm)	14.1 (0.57)	12.6(0.39)	1.51(1.40 to 1.62)	<0.001	3.09
Estimated mean annual incidence of <b>mild ARI</b>	0.10 (0.28)	0.54 (0.73)	RR=0.18, RRR=88%	P=0.037	0.69
Estimated mean annual incidence of moderate to severe ARI	0.12 (0.35)	0.39 (0.52)	RR=0.31, RRR=69%	P=0.64	0.35
Estimated mean annual incidence of mild  Diarrhoea	0.58 (0.81)	0.98 (1.01)	RR=0.59, RRR=41%	P=0.006	0.61
Estimated mean annual incidence	0.40 (0.56)	1.12 (1.15)	RR=0.36, RRR=64%	P=0.002	1.07

## of moderate to severe Diarrhoea

RR: Relative risk/ Risk ratio; RRR: Relative risk reduction

Diarrhoea severity was assessed using the Modified Vesikari Score

For the purpose of this study, ARI severity was classified based on the level of medical intervention required: mild (outpatient treatment), moderate (oxygen supplementation or ward admission), and severe (paediatric intensive care unit [PICU] admission or ventilator support)