**Table S1.** Exclusion criteria

|  |
| --- |
| * Current symptoms were better explained by symptoms of major depressive disorder or bipolar disorder; * Symptoms were fully explained by pre-existing conditions that may cause cognitive impairment or symptoms similar to those seen in PCC [e.g., attention deficit/hyperactivity disorder (ADHD), major neurocognitive disorder, schizophrenia, chronic fatigue syndrome (CFS)/encephalitis meningitis (EM), as assessed by Mini International Neuropsychiatric Interview (M.I.N.I.) 7.0.2]; * Known intolerance to vortioxetine and/or prior trial of vortioxetine with demonstrated inefficacy; * Current alcohol and/or substance use disorder, as confirmed by the M.I.N.I. 7.0.2; * Presence of comorbid psychiatric disorder that is a primary focus of clinical concern, as confirmed by the M.I.N.I. 7.0.2; * Previous history of mania/hypomania; * Taking medications approved and/or employed off-label for cognitive dysfunction (e.g., psychostimulants); * Any medication for a general medical disorder that may affect cognitive function (as per clinical judgment); * Use of benzodiazepines within 12 hours of cognitive assessments; * Consumption of alcohol within eight hours of cognitive assessments; * Any physical, cognitive, or language impairments sufficient to adversely affect data derived from cognitive assessments; * Diagnosed reading disability or dyslexia; * Clinically significant learning disorder by history; * Treatment with electroconvulsive therapy (ECT) in the last 6 months; * History of moderate or severe head trauma (e.g., loss of consciousness for > 1 hour), other neurological disorders, or unstable systemic medical diseases that are likely to affect the central nervous system (as per clinical judgment); * Pregnant and/or breastfeeding; received investigational agents as part of a separate study within 30 days of the screening visit; * Actively suicidal/presence of suicidal ideation or evaluated as being at suicide risk (as per clinical judgment); * Currently receiving treatment with monoamine oxidase inhibitor (MAOI) antidepressants, antibiotics such as linezolid or intravenous methylene blue; * Previous hypersensitivity reaction to vortioxetine or any components of the formulation; * Previously reported angioedema in persons treated with vortioxetine; * Serotonin syndrome; * Abnormal bleeding; * Angle closure glaucoma; * Hyponatremia; * Moderate hepatic impairment; * Active seizure disorder/epilepsy that is not controlled by medication (as per clinical judgment); * Presence of any unstable medical conditions; * Inability to follow study procedures; * And inability to give informed consent. |