PAPER SECTION And topic	Item	Descriptor	Reported on Paper Sections
TITLE & ABSTRACT	1	How participants were allocated to interventions (e.g., "random allocation", "randomized", or "randomly assigned").	ABSTRACT
INTRODUCTION Background	2	Scientific background and explanation of rationale.	INTRODUCTION Background
METHODS Participants	3	Eligibility criteria for participants and the settings and locations where the data were collected.	METHODS Participants
Interventions	4	Precise details of the interventions intended for each	METHODS Interventions:
		group and how and when they were actually administered.	Vaccine preparation Phase 1 study design Assessment of safety and tolerability
Objectives	5	Specific objectives and hypotheses.	METHODS Objectives
Outcomes	6	Clearly defined primary and secondary outcome measures and, when applicable, any methods used to enhance the quality of measurements (e.g., multiple observations, training of assessors).	METHODS Peptides Antibody responses T cell prolif and cytokines CD8+T cell detection Intracellular. Cytokine staining
Sample size	7	How sample size was determined and, when applicable, explanation of any interim analyses and stopping rules.	METHODS Sample size
Randomization Sequence generation	8	Method used to generate the random allocation sequence, including details of any restrictions (e.g., blocking, stratification)	METHODS Randomization
Randomization Allocation concealment	9	Method used to implement the random allocation sequence (e.g., numbered containers or central telephone), clarifying whether the sequence was concealed until interventions were assigned.	METHODS Randomization
Randomization Implementation	10	Who generated the allocation sequence, who enrolled participants, and who assigned participants to their groups.	METHODS Randomization
Blinding (masking)	11	Whether or not participants, those administering the interventions, and those assessing the outcomes were blinded to group assignment. If done, how the success of blinding was evaluated.	METHODS Blinding
Statistical methods	12	Statistical methods used to compare groups for primary outcome(s); Methods for additional analyses, such as subgroup analyses and adjusted analyses.	METHODS Statistical evaluation
RESULTS Participant flow	13	Flow of participants through each stage (a diagram is strongly recommended). Specifically, for each group report the numbers of participants randomly assigned, receiving intended treatment, completing the study protocol, and analyzed for the primary outcome. Describe protocol deviations from study as planned, together with reasons.	RESULTS Participant flow
Recruitment	14	Dates defining the periods of recruitment and follow- up.	RESULTS Participant flow
Baseline data	15	Baseline demographic and clinical characteristics of each group.	RESULTS Baseline data
Numbers analyzed	16	Number of participants (denominator) in each group included in each analysis and whether the analysis was by "intention-to-treat". State the results in absolute numbers when feasible (e.g., 10/20, not 50%).	RESULTS Participant flow
Outcomes and estimation	17	For each primary and secondary outcome, a summary of results for each group, and the estimated	RESULTS Anti-PfCS102 antibody

		effect size and its precision (e.g., 95% confidence interval).	responses Anti-spz responses T cell proliferation Interferonγ IL-10 CD4+ and CD8+ responses
Ancillary analyses	18	Address multiplicity by reporting any other analyses performed, including subgroup analyses and adjusted analyses, indicating those pre-specified and those exploratory.	None
Adverse events	19	All important adverse events or side effects in each intervention group.	RESULTS Assessment of safety and tolerability
DISCUSSION Interpretation	20	Interpretation of the results, taking into account study hypotheses, sources of potential bias or imprecision and the dangers associated with multiplicity of analyses and outcomes.	DISCUSSION interpretation
Generalizability	21	Generalizability (external validity) of the trial findings.	DISCUSSION Generalizability
Overall evidence	22	General interpretation of the results in the context of current evidence.	DISCUSSION Overall evidence

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