## Supplements to

# Associations between postprandial symptoms, hydrogen and methane production and transit

# time in irritable bowel syndrome

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#### SUPPLEMENTARY METHODS

#### **Dynamical correlations**

Stepwise approach of dynamical correlations

- Values of every participant were min/max-normalized. Arrays with only one unique value were converted to missing.
- Within-person correlations were computed between all pairs of variables, i.e. based on 17 time points. The median within-person correlations of n subjects were noted.
- 3. To generate a null-distribution, values of each time point were shuffled randomly across participants, and the median within-person correlations were recomputed. This was done 100,000 times. This null-distribution reflects the null hypothesis that within-person correlations are as large as regular between-person (Pearson) correlations.
- 4. The within-person correlation minus the mean of the null distribution was divided by the standard deviation of the null distribution. This was taken as T value.
- One-tailed P values were computed from the T values in conjunction with the degrees of freedom (n -1).
- 6. The process was also performed with subgroups of oroanal transit time.

See **Supplementary figure 2** for more details on within-person and between-person correlations, as well as interpretation of trajectories over time.

#### SUPPLEMENTARY FIGURE

**Supplementary figure 1. Study planning.** LNCT, lactulose nutrient challenge test; OATT, oroanal transit time; V, visit. *Created with BioRender.com.* 



# Supplementary figure 2. Illustrations of relationships within-person and between person correlations

- (A) Although exhaled gas concentration and the postprandial symptom follow a common trajectory, these may both be caused by the intervention as such. Causality inference between exhaled gas and the postprandial symptom would be unfounded.
- (B) Exhaled gas concentration and the postprandial symptom follow a common trajectory within the individual. There may be a common process at play.
- (C) No correlation found between exhaled gas concentration and postprandial symptom.
- (D) No correlation found between exhaled gas concentration and postprandial symptom.

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## SUPPLEMENTARY TABLES

# Supplementary table 1. Assessment of collinearity between the variables

	Spearman correlation coefficients					Eta squared correlations
	Anxiety	Depression	Somatization	Oroanal	Rectal	Functional
				transit	pain	dyspepsia
				time	threshold	
					(cohort 1)	
Anxiety		.56 ‡	.48 ‡	.08	19 †	.19
Depression			.46 ‡	.07	<.01	.17
Somatization				.15 †	23 +	.21 †
Oroanal					09	.03
transit time						
Rectal pain						.15
threshold						
(cohort 1)						
Functional						
dyspepsia						

+ weak correlation; ‡ moderate correlation. No collinearity was observed.

	Gas	Bloating	Distension	Nausea	Discomfort	Rumbling	Urgency	Pain ‡
	F	F	F	F	F	F	F	F
	β (95% CI)	β (95% CI)	β (95% CI)	β (95% CI)	β (95% CI)	β (95% CI)	β (95% CI)	β (95% CI)
Time	2.64 ***	3.32 ***	2.01 **	1.65 *	.94	1.89 *	1.41	.90
Anxiety	.01 (.0001, .02)*	.02 (.01, .03) **	.01 (.004, .02) **	.02 (.01, .03) ***	.02 (.01, .02) ***	.01 (.001, .02) *	.01 (001, .02)	.02 (.01, .04) ***
Time-by- anxiety	.93	1.13	.82	.41	.44	.65	.63	1.29
Time	2.53 ***	4.55 ***	2.94 ***	2.73 ***	2.08 **	2.26 **	2.53 ***	1.93 *
Depression	.01 (001, .02)	.02 (.01, .03) ***	.02 (.01, .03) **	.02 (.01, .03) ***	.02 (.01, .03) ***	.01 (004, .02)	.02 (.004, .03) *	.03 (.01, .05) ***
Time-by- depression	.88	.99	.47	.56	.55	1.01	1.10	2.18 **
Time	2.27 **	3.37 ***	2.71 ***	2.35 **	2.01 **	1.70 *	1.74 *	1.36
Somatization	.01 (01, .02)	.02 (.01, .03) **	.02 (.01, .03) ***	.02 (.01, .03) ***	.02 (.01, .03)	.01 (0001 <i>,</i> .02)	.01 (002, .02)	.04 (.03, .06)
Time-by- somatization	1.13	1.32	1.36	.98	.83	.45	1.28	1.35
Time	4.85 ***	7.39 ***	6.12 ***	7.26 ***	4.33 ***	3.92 ***	5.60 ***	3.70 ***
FD	10 (19 <i>,</i> - .01)*	13 (23,04) **	13 (23,04)	14 (24,05) **	12 (19,04) **	06 (15, .03)	10 (20, .01)	30 (42 <i>,</i> - .17) ***
Time-by-FD	1.04	.80	.84	1.11	.73	.82	.50	.70

Supplementary table 2. Associations between postprandial symptoms and anxiety, depression, somatization, and functional dyspepsia in IBS<sup>†</sup>

CI, confidence interval; FD, functional dyspepsia; HADS, Hospital Anxiety and Depression Scale; IBS, irritable bowel syndrome; PHQ, Patient Health Questionnaire.

Data are log-transformed. Significant positive  $\beta$  coefficients demonstrated that increasing values of the independent variables (or absence of FD) were associated with worse postprandial symptom severity. Significant negative  $\beta$  coefficients demonstrated that decreasing values of the independent variables (or presence of functional dyspepsia) were associated with worse postprandial symptom severity. A significant interaction effect indicated that the postprandial symptom changed differently over time, depending on the independent variable, e.g., postprandial abdominal pain changed differently over time depending on level of depression.

<sup>+</sup> Linear mixed models presented as β coefficient, i.e., linear slope, and 95% CI for the main effect of the continuous and dichotomous variables, and F test statistic for time (categorical variable) and the interaction effect with time.

‡ Missing data (n=81) due to methodological error

\* p<.05; \*\* p<.01; \*\*\* p<.001.