## Fecal microbiota imbalance in Mexican children with type 1 diabetes

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	T1D cases	Controls	p value
Age in years (SE)			0.3
	12.3 (0.64)	11 (1.04)	
Delivery mode			0.092
Cesarean	6	5	
Vaginal	15	3	
Breastfeeding time			0.185
<6 months	11	2	
$\geq 6$ months	10	6	
Milk formula start			0.154
<4months	14	3	
$\geq 4$ months	7	5	
Infections per year			0.092
$\geq 5$	15	3	
<5	6	5	
Antibiotic treatments per year			0.043
$\geq 5$	14	2	
<5	7	6	
HLA types « subjects (%) »			
Presence of any risk allele	21 (100)	4 (50)	
DR3-DQ2	4 (19)	1 (12.5)	
DR4-DQ8	3 (14.3)	0 (0)	
DQ2-DQ8	2 (9.52)	0 (0)	
3 isolated risk alleles	7 (33.3)	0 (0)	
2 isolated risk alleles	3 (14.3)	0 (0)	
1 isolated risk alleles	2 (9.52)	3 (37.5)	
Negative	0 (0)	4 (50)	

Table S1 | Sample characteristics



**Figure S1** Rarefaction curves of observed species in fecal samples from T1D children between 7-18 years old and healthy controls.



**Figure S2** Rarefaction curves of Chao1 in fecal samples from T1D children between 7-18 years old and healthy controls. There were no significant differences between control and T1D groups.



**Figure S3** Principal Coordinate Analysis of fecal communities Unifrac distances in T1D and healthy children (components 2 and 3; weighted analysis). Principal coordinate 1 separates controls from T1D onset with the T1D>2y distributed between the two groups.



**Figure S4** Heat map of the relative abundance Prevotella and Bacteroides in each children group. Controls have high dominance of Prevotella, and T1D onset has high dominance of Bacteroides, with the T1D>2y distributed between the two types.



**Figure S5** Clustering of fecal communities in T1D groups and controls based on phylogenetic distances. M (T1D onset) clusters in upper cluster and controls cluster in the bottom cluster with A (T1D >2y), distributed in the two clusters.