## Diarrhoea in the critically ill is common, associated with poor outcome, and rarely due to *Clostridium difficile*

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**Supplementary Table S1.** Relationship between type of surgery (gastrointestinal vs non-gastrointestinal) and diarrhoea.

Admissions with	Admissions with No	<i>P</i> -value	
Diarrhoea <sup>a</sup>	Diarrhoea <sup>a</sup>		
(N = 1207)	(N = 8124)		
726 (60.1%)	2358 (29.0%)		
481 (39.9%)	5766 (71.0%)		
212 (17.6%)	2533 (31.2%)	0.96	
269 (22.3%)	3233 (39.8%)		
228 (18.9%)	4735 (58.3%)		
107 (8.9%)	2155 (26.5%)	0.68	
121 (10.0%)	2580 (31.8%)		
	Diarrhoea <sup>a</sup> (N = 1207)  726 (60.1%) 481 (39.9%) 212 (17.6%) 269 (22.3%)  228 (18.9%) 107 (8.9%)	Diarrhoea <sup>a</sup> Diarrhoea <sup>a</sup> (N = 1207)       (N = 8124)         726 (60.1%)       2358 (29.0%)         481 (39.9%)       5766 (71.0%)         212 (17.6%)       2533 (31.2%)         269 (22.3%)       3233 (39.8%)         228 (18.9%)       4735 (58.3%)         107 (8.9%)       2155 (26.5%)	

<sup>&</sup>lt;sup>a</sup>Data shown as N (%) unless stated otherwise.

**Supplementary Table S2.** Reasons for intensive care unit admission in patients admitted following gastrointestinal surgery and suffering diarrhoea.

	GI Surgery Admissions with Diarrhoea <sup>a</sup>
	(N = 212)
Reason for ICU Admission	
Operative intervention	102 (48.1%)
Cardiovascular	13 (6.1%)
Respiratory failure	25 (11.8%)
Haemorrhage	16 (7.5%)
Sepsis	49 (23.1%)
Renal failure	1 (0.5%)
Neurological	1 (0.5%)
Haematological	0 (0.0%)
Liver failure	2 (0.9%)
Other	3 (1.4%)

<sup>&</sup>lt;sup>a</sup>Data shown as N (%) unless stated otherwise.

**Supplementary Table S3.** Reasons for operative intervention in patients suffering diarrhoea following admission to the intensive care unit due to operative intervention after gastrointestinal surgery.

	GI Surgery Admissions with Diarrhoea <sup>a</sup>			
	(N = 102)			
Reason for Operative				
Intervention				
Emergency	55 (53.9%)			
Elective	47 (46.1%)			
Tumour	27 (26.5%)			
Fistula	10 (9.8%)			
Congenital malformation	4 (3.9%)			
Hernia	2 (2.0%)			
Bariatric	2 (2.0%)			
Inflammatory bowel disease	2 (2.0%)			

<sup>&</sup>lt;sup>a</sup>Data shown as N (%) unless stated otherwise.

## **Supplementary Table S4.** Study population results per year from 2006 to 2010.

	2006	2007	2008	2009	2010
	(N=1551)	(N=1620)	(N=1837)	(N=2098)	(N=2225)
Admissions Suffering	214	262	253	238	240
Diarrhoea During ICU					
Stay					
Prevalence of Diarrhoea	13.8%	16.2%	13.8%	11.3%	10.8%
Admissions with <i>C</i> Difficile	23	16	7	19	32
Prevalence of <i>C Difficile</i>	1.5%	1.0%	0.4%	0.9%	1.4%
Mean Age	57.8 [17.9]	58.6 [17.9]	58.5 [17.7]	58.6 [17.8]	59.3 [17.3]
Years [SD]					
Male Sex	917 (59.1%)	935 (57.7%)	994 (54.1%)	1088 (51.9%)	1201 (54.0%)
Referring Specialty					
Medical	614 (39.6%)	625 (38.6%)	653 (35.5%)	626 (29.8%)	566 (25.4%)
Surgical	937 (60.4%)	995 (61.4%)	1184 (64.5%)	1427 (70.2%)	1659 (74.6%)
Median APACHE II	18 [13-23]	17 [12-23]	16 [12-22]	17 [12-22]	14 [7-20]
[IQR]					
Cause for ICU					
Admission (no [%])					
Cardiovascular	106 (6.8%)	121 (7.5%)	117 (6.4%)	131 (6.2%)	121 (5.4%)
Respiratory Failure	219 (14.1%)	223 (13.8%)	294 (16.0%)	263 (12.5%)	230 (10.3%)
Haemorrhage	132 (8.5%)	129 (8.0%)	120 (6.5%)	130 (6.2%)	126 (5.7%)
Sepsis	151 (9.7%)	135 (8.3%)	128 (7.0%)	106 (5.1%)	135 (6.1%)
Renal Failure	41 (2.6%)	37 (2.3%)	52 (2.8%)	44 (2.1%)	31 (1.4%)
Operative intervention	667 (43.0%)	778 (48.0%)	935 (50.9%)	1200 (57.2%)	1383 (62.2%)
GI Surgery	233 (15.0%)	361 (22.3%)	509 (27.7%)	597 (28.5%)	562 (25.3%)
Non-GI Surgery	434 (28.0%)	417 (25.7%)	426 (23.2%)	603 (28.7%)	821 (36.9%)
Neurological	149 (9.6%)	118 (7.3%)	92 (5.0%)	138 (6.6%)	128 (5.8%)
Haematological	23 (1.5%)	21 (1.3%)	35 (1.9%)	29 (1.4%)	31 (1.4%)
Liver Failure	16 (1.0%)	11 (0.7%)	18 (1.0%)	20 (1.0%)	12 (0.5%)
Other	47 (3.0%)	47 (2.9%)	46 (2.5%)	37 (1.8%)	28 (1.3%)
Median ICU LOS	1.8 [0.9-4.9]	2.2 [1.0-5.4]	2.0 [1.0-4.8]	1.8 [0.9-4.0]	1.8 [1.0-3.9]
Days [IQR]					
ICU Mortality	224 (14.4%)	210 (13.0%)	175 (9.5%)	188 (9.0%)	173 (7.8%)
(no [%])					

**Supplementary Figure I.** Prevalence of diarrhoea over study period unadjusted vs adjusted for reason for ICU admission and APACHE-II score.

