## **Title:**

**Genes implicated in thiopurine-induced toxicity: Comparing TPMT enzyme activity with clinical phenotype and exome data in a paediatric IBD cohort** 

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## **Supplementary tables**

# **Table S1: Genes implicated in thiopurine metabolism and toxicity**



Fifteen genes implicated in thiopurine metabolism and toxicity identified through a systematic search shown in the table (tabulated in an alphabetical order). The *HLA-*

*DQA1-HLA-DRB1* locus although implicated in thiopurine toxicity, was not included in our analysis due to inherent difficulties in analysis of this highly polymorphic region

through whole-exome sequencing data.





### **Table S2: Specificity and sensitivity for predicting normality of the biochemical test**

In this table, the sensitivity and specificity values for predicting the normality of the TPMT enzyme activity (with 67 mU/L as the cut-off between low or intermediate and normal) through application of the TPMT variants alone or in combination with the MOCOS variants. Inclusion of the MOCOS variants to the TPMT variation improves the sensitivity for the biochemical activity level of TPMT, but a corresponding loss of specificity is observed when compared with the TPMT variation alone.

		Responder	Non-	Sensitivity	Specificity
		${\bf S}$	Responders		
Deleterious	$+$	14	$\overline{2}$		
IL6ST variants					
Non-deleterious	۰	37	11	27.45%	84.62%
IL6ST variants					
Deleterious	$^{+}$	4	6		
ABCC4 variants				7.84%	53.85%
Non-deleterious	-	47	$\overline{7}$		
ABCC4 variants					

**Table S3: Specificity and sensitivity for Responders and non-responders**

Table S3 demonstrates the sensitivity and specificity of application of IL6ST and ABCC4 variations with clinical response to thiopurines as the gold standard.

## **Table S4: Clinical Information on the 100 patients recruited to the study**





Table S4 shows the clinical details on all 100 patients within the cohort

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