

Supplementary Table 1. Odds of requiring transition to prednisone therapy after budesonide MMX initiation, among patients with ulcerative colitis, unadjusted and adjusted analyses, including prior therapy exposures

	Unadjusted OR (95% CI)	Adjusted OR^a (95% CI)
Male Sex	2.64 (1.06 – 6.63)	2.73 (1.03 – 7.20)
Age at diagnosis		
≤29 years	2.47 (1.05 – 5.82)	2.92 (1.12 – 7.59)
>29 years	Reference	Reference
Disease extent		
Proctitis	0.75 (0.15 – 3.75)	0.55 (0.10 – 3.10)
Left-sided colitis	Reference	Reference
Extensive/pancolitis	0.73 (0.32 – 1.69)	0.55 (0.22 – 1.41)
Concomitant therapy at budesonide MMX initiation		
No therapy	0.85 (0.24 – 3.08)	0.70 (0.15 – 3.37)
Aminosalicylate	Reference	Reference
Biologic and/or immunomodulator	1.07 (0.45 – 2.54)	0.63 (0.12 – 3.26)
Prior therapy for ulcerative colitis		
No therapy	0.67 (0.15 – 3.10)	1.14 (0.17 – 7.48)
Aminosalicylate	Reference	Reference
Immunomodulator	0.78 (0.26 – 2.37)	1.15 (0.20 – 6.72)
Biologic	1.44 (0.47 – 4.44)	1.89 (0.27 – 13.0)

odds ratio (OR), confidence interval (CI)

^aAll variables listed above were included in the final multivariable analysis

Supplementary Table 2. Comparison of new therapies initiated during the study period among patients who required transition to prednisone and those who remained on budesonide multimatrix system

	No transition to Prednisone (n=52)		Transition to Prednisone (n=44)		p-value
	n	%	n	%	
New immunomodulator	6	12	6	14	0.230
New anti-TNF	5	10	3	7	0.721
New vedolizumab	4	8	1	2	0.371

Tumor necrosis factor (TNF)