

**Supplemental Information**

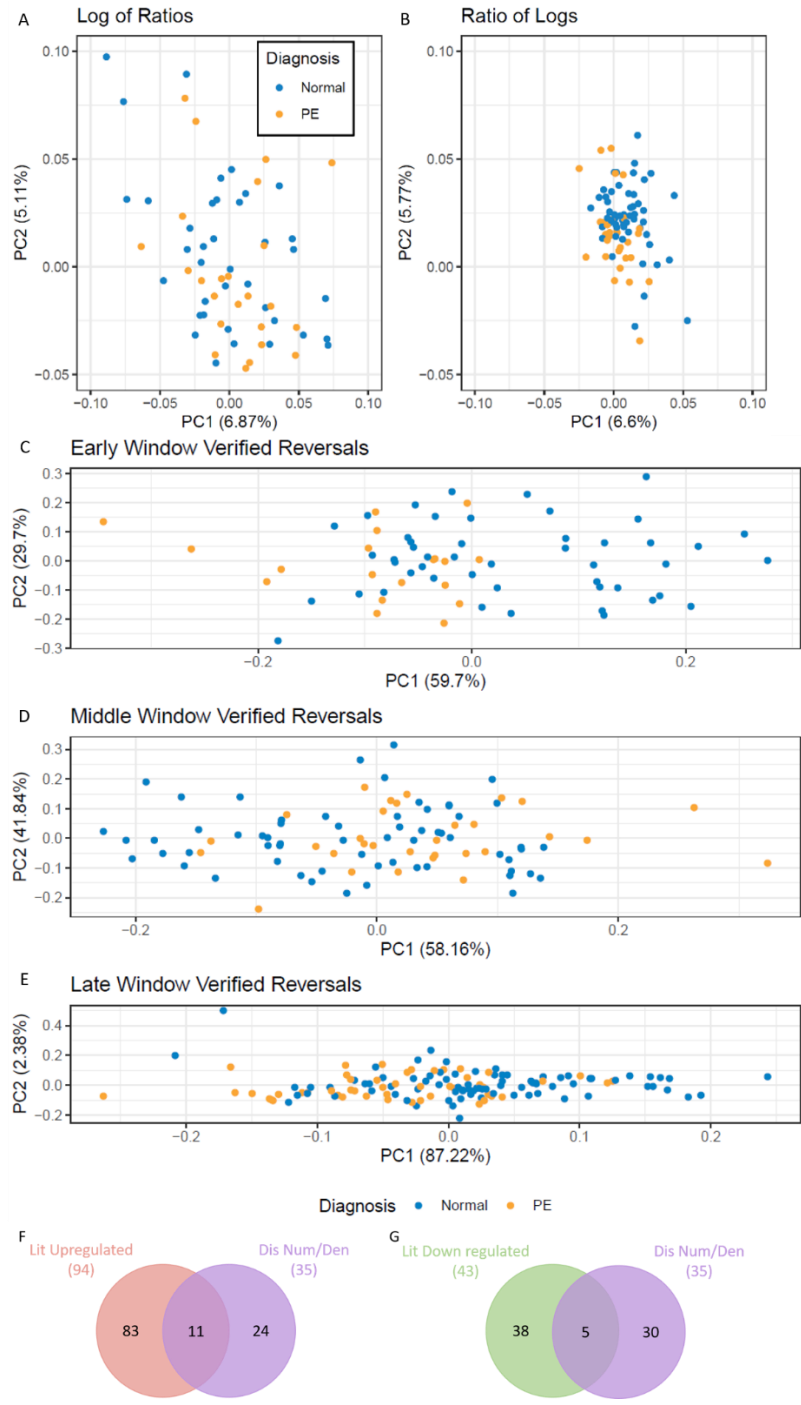
**Discovery and Verification of Extracellular  
miRNA Biomarkers for Non-invasive Prediction  
of Pre-eclampsia in Asymptomatic Women**

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**Supplementary Figures and Supplementary Table Legends**

Figure S1A. Enrollment Criteria	Figure S1B. Case/Control Selection Criteria
<p style="text-align: center;"><b>UCSD Placental Dysfunction Clinic</b></p> <p><b>Inclusion Criteria</b></p> <ul style="list-style-type: none"> <li>• At least 18 years old and can provide informed consent</li> <li>• Patient is planning a hospital delivery</li> <li>• Singleton gestation</li> <li>• Gestational age between 17w0d and 28w0d inclusive at time of enrollment</li> <li>• Increased risk of placental dysfunction based on one or more of the following:               <ul style="list-style-type: none"> <li>• Abnormal serum analytes                   <ul style="list-style-type: none"> <li>• PAPP-A &lt;0.3 MoM (first trimester)</li> <li>• AFP &gt;2.5 MoM (second trimester)</li> <li>• hCG &gt;3.0 MoM (second trimester)</li> <li>• Inhibin &gt; 2.0 MoM (second trimester)</li> <li>• Unconjugated estriol &lt; 0.3 MoM (second trimester)</li> </ul> </li> <li>• Previous adverse pregnancy outcome                   <ul style="list-style-type: none"> <li>• Severe preeclampsia, eclampsia, or HELLP</li> <li>• Birthweight &lt;5th percentile</li> <li>• Fetal loss, idiopathic or with known placental dysfunction</li> <li>• Placental abruption</li> </ul> </li> <li>• Maternal comorbidity                   <ul style="list-style-type: none"> <li>• Chronic hypertension requiring medication</li> <li>• Lupus or other autoimmune disease requiring medication</li> <li>• Chronic renal insufficiency</li> </ul> </li> </ul> </li> </ul> <p><b>Exclusion Criteria</b></p> <ul style="list-style-type: none"> <li>• Has active or history of malignancy requiring major surgery or systemic chemotherapy</li> <li>• Multiple gestation (including history of twin demise including reduction, spontaneous or elective)</li> </ul> <p style="text-align: center;"><b>Sera Prognostics Repository</b></p> <p><b>Inclusion Criteria</b></p> <ul style="list-style-type: none"> <li>• At least 18 years old and can provide informed consent</li> <li>• Singleton gestation</li> <li>• Gestational age between 17w0d and 28w0d inclusive at time of enrollment</li> </ul> <p><b>Exclusion Criteria</b></p> <ul style="list-style-type: none"> <li>• Multiple gestation</li> <li>• Known or suspected fetal anomaly</li> </ul>	<p style="text-align: center;"><b>UCSD Placental Dysfunction Clinic</b></p> <p><b>Case Selection Criteria</b></p> <ul style="list-style-type: none"> <li>• New-onset hypertension <b>OR</b></li> <li>• Chronic hypertension and new-onset proteinuria <b>OR</b></li> <li>• Chronic proteinuria and new-onset hypertension <b>OR</b></li> <li>• New-onset or chronic hypertension and new-onset severe feature (elevated liver function tests (&gt; 2x upper limit of the normal range, elevated Creatinine &gt;1.2, low platelet count &lt;100,000/uL, and/or intrauterine growth restriction &lt;10th percentile).</li> <li>• New-onset or chronic proteinuria and new-onset severe feature (elevated liver function tests (&gt; 2x upper limit of the normal range, elevated Creatinine &gt;1.2, low platelet count &lt;100,000/uL, and/or intrauterine growth restriction &lt;10th percentile).</li> </ul> <p><b>Control Selection Criteria</b></p> <ul style="list-style-type: none"> <li>• No hypertensive disease</li> </ul> <p style="text-align: center;"><b>Sera Prognostics Repository</b></p> <p><b>Case Selection Criteria</b></p> <ul style="list-style-type: none"> <li>• New-onset hypertension with or without severe features <b>OR</b></li> <li>• Superimposed preeclampsia with or without severe features</li> </ul> <p><b>Control Selection Criteria</b></p> <ul style="list-style-type: none"> <li>• No hypertensive disease</li> </ul>

**Figure S1: Enrollment and Selection Criteria.** Related to Figure 1. **A.** Enrollment Criteria. **B.** Selection Criteria for Cases and Controls.



**Figure S2. Principal Component Analysis Plots.** Related to Table 3. **A-B.** Principal Component Analysis for the extracellular miRNA data (all possible reversals) using the log values of the ratios (**A**) or the ratios of the log values (**B**) as the features. **C-E. Principal Component Analysis of Verified Reversals.** Principal component analysis was performed on normalized reversal scores for verified reversals calculated for both Discovery and Verification subjects. **C.** Early GABD window. **D.** Middle GABD window. **E.** Late GABD window. All PCA plots show unsupervised clustering of preeclampsia cases (gold) and non-case controls (blue). **F-G. Overlap in Results from Our Study with Prior Literature.** Venn diagrams indicating the overlap between extracellular miRNA predictors identified in our study (Lab's Num/Den) with extracellular miRNA biomarkers identified in previous studies to be expressed higher in preeclampsia than control (Lit-upregulated, **F**) or lower in preeclampsia than control (Lit-downregulated, **G**).

**Table S3. Tally of Candidate Univariate Predictors and Reversals Selected in Discovery and Passing Verification.** Related to Table 3.

GABD window (days)	Univariate Analysis		Bivariate Analysis	
	#Pass-filter Discovery, $\chi^2$ p<0.05	#Pass-filter Verification (Lower 95% CI AUC > 0.5)	#Selected Discovery	#Pass-filter Verification (Lower 95% CI AUC > 0.5)
Full (119-202)	14	0	50	1
Early (119-152)	14	1	50	4
Middle (138-172)	11	1	50	2
Late (156-196)	21	0	50	23