

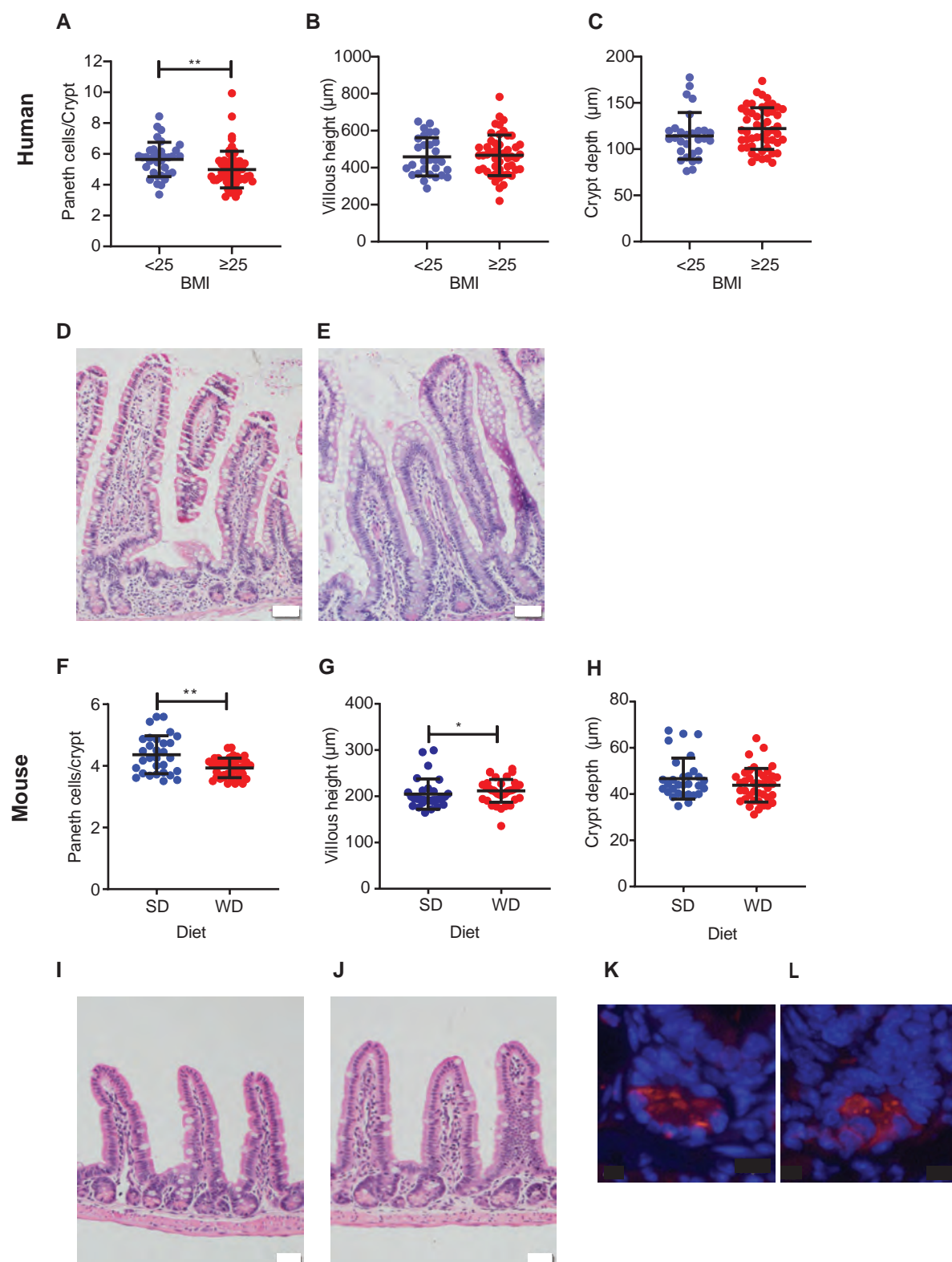
## Supplemental Table title and legend

**Table S1. Demographics of the non-IBD patients, related to Figure 1.**

<b>BMI</b>	<b>&lt;25</b>	<b>≥25</b>	<b><i>P</i> value</b>
<b>Total n</b>	34	57	
<b>Age (years old) (mean, range)</b>	62.3 (19-65)	61.2 (32-60)	0.0962
<b>Sex (M/F)</b>	14/20	21/36	0.8240
<b>Race (Caucasian vs. non-Caucasian)</b>	24/10	48/9	0.1816
<b>Smoking history (never vs. active/ex smoker)</b>	17/17	30/27	0.8315

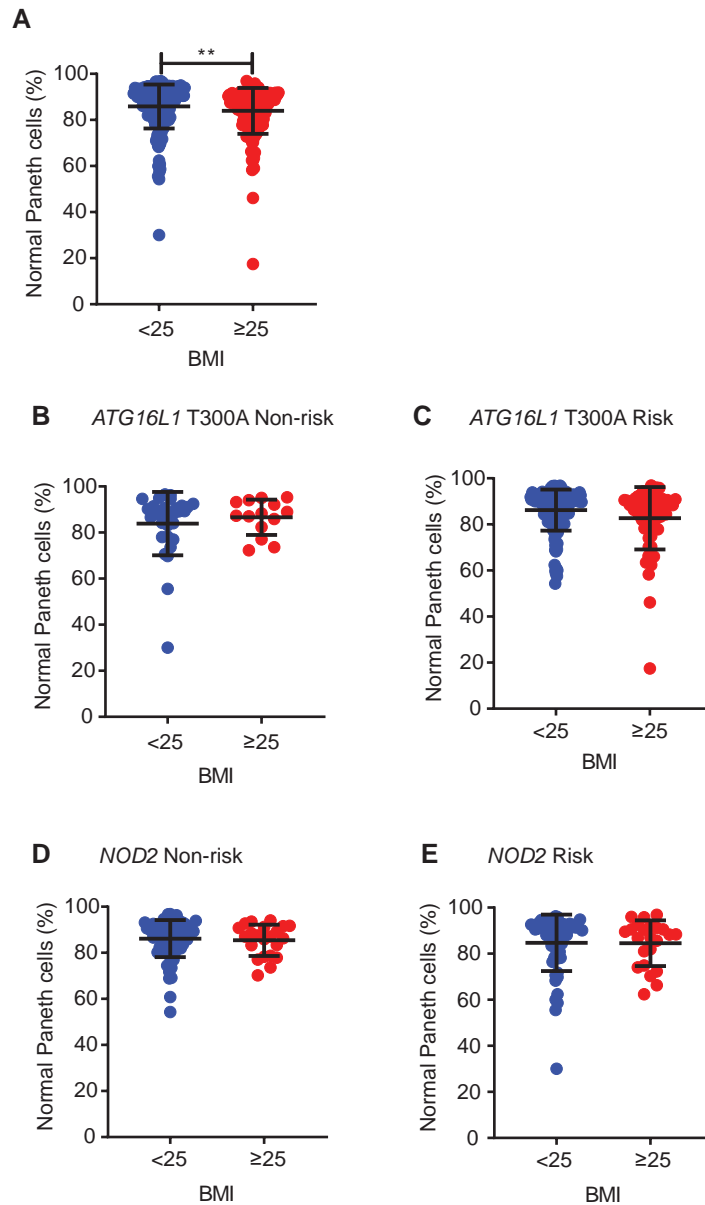
Statistical analysis was performed by Mann-Whitney test for continuous variables, and Fisher's exact test for categorical variables.

Figure S1



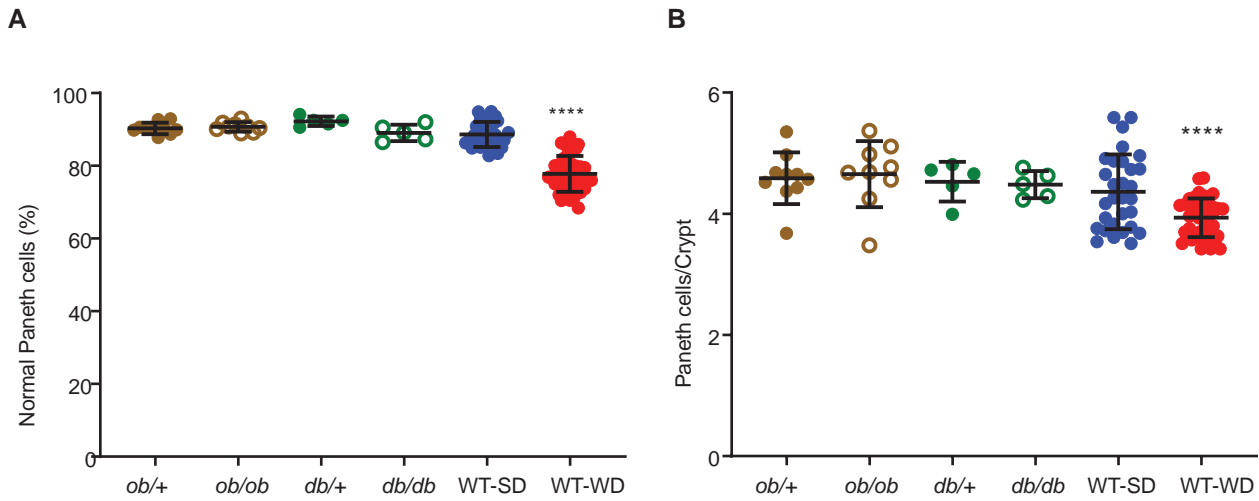
**Figure S1. Additional histology readout in overweight/obese non-IBD patients and mice fed with WD, related to Figure 1.** In non-IBD patients, those with BMI  $\geq 25$  ( $n=57$ ) showed (A) reduced Paneth cells/crypt ( $P=0.002$ ), but no changes in (B) villous height ( $P=0.7197$ ), or (C) crypt depth ( $P=0.1220$ ) compared to those with BMI  $< 25$  ( $n=34$ ). Representative photomicrographs from patients with (D) BMI  $< 25$  and (E) BMI  $\geq 25$  are shown. (D, E) scale bar: 50  $\mu\text{m}$ . WT mice fed with WD ( $n=41$ ) for 8 weeks resulted in (F) reduced Paneth cells/crypt ( $P=0.0032$ ), (G) an increase in villous height ( $P=0.0196$ ), without significant changes in (H) crypt depth ( $P=0.3492$ ) compared with those fed with SD ( $n=30$ ). Representative photomicrographs from mice fed with (I) SD and (J) WD are shown. (I, J): scale bar: 20  $\mu\text{m}$ . Representative photomicrographs of lysozyme immunofluorescence from mice fed with (K) SD and (L) WD are shown. Statistical analysis was performed by Mann-Whitney test. \*:  $P < 0.05$ ; \*\*:  $P < 0.01$ . Error bars represent standard deviations.

Figure S2



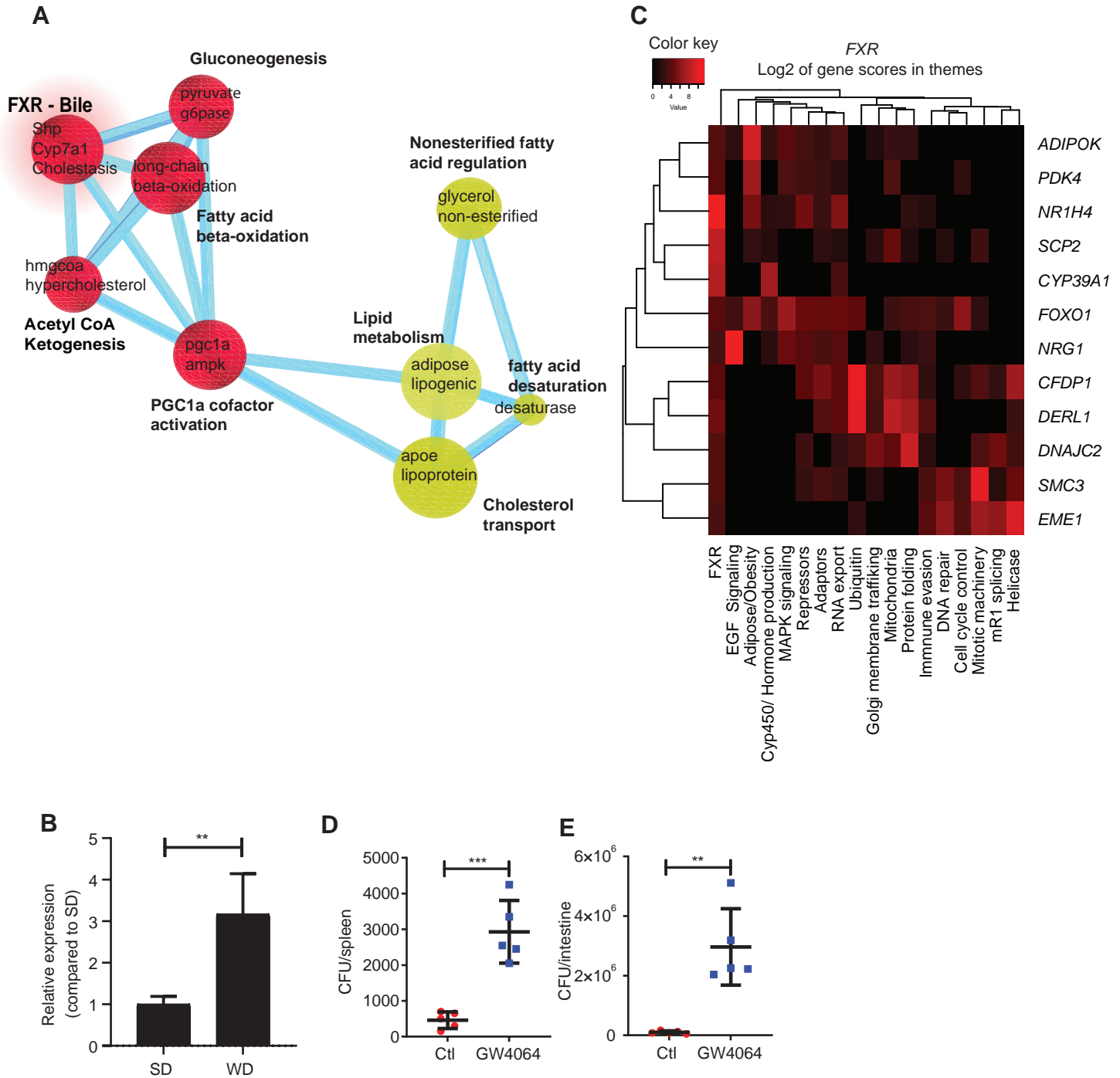
**Figure S2. BMI $\geq$ 25 is associated with Paneth cell defects in CD patients irrespective of *ATG16L1* and *NOD2* genotypes, related to Figure 1.** (A) BMI $\geq$ 25 was associated with reduced percentages of normal Paneth cells in CD patients ( $P=0.0172$ ). Total n: BMI<25: n=190, BMI $\geq$ 25: n=157. A subset of CD patients was also genotyped for the 2 genes commonly associated with Paneth cell defects in North America: (B, C) *ATG16L1* T300A and (D, E) *NOD2* (including R702W, G908R, L1007fs). There was no significant difference in percent normal Paneth cells when stratified by either genotype. (B) *ATG16L1* non-risk patients. Total n: BMI<25: n=30, BMI $\geq$ 25: n=14.  $P=0.8325$ . (C) *ATG16L1* T300A patients. Total n: BMI<25: n=138, BMI $\geq$ 25: n=60.  $P=0.0578$ . (D) *NOD2* non-risk patients. Total n: BMI<25: n=108, BMI $\geq$ 25: n=45.  $P=0.0520$ . (E) *NOD2* patients with R702W, G908R, or L1007fs variants. Total n: BMI<25: n=59, BMI $\geq$ 25: n=23.  $P=0.5745$ . Statistical analysis was performed by Mann-Whitney test. Error bars represent standard deviations.

Figure S3



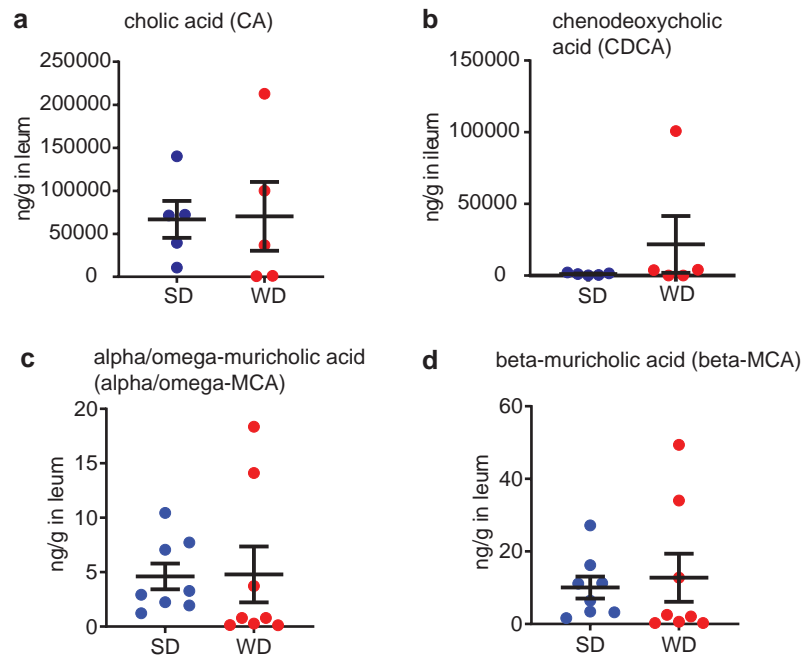
**Figure S3. Genetically obese mice do not develop Paneth cell defects, related to Figure 1.** *ob/+*, *ob/ob*, *db/+*, and *db/db* mice were analyzed for (A) percent normal Paneth cells and (B) Paneth cells/crypt and the results were compared to wild type (WT) mice fed with SD or WD. \*\*\*\*:  $P < 0.0001$ . Statistical analysis was performed by Kruskal-Willis tests. Total n: *ob/+*: n=10, *ob/ob*: n=9, *db/+*: n=5, *db/db*: n=5, WT-SD: 30, WT-WD: 41. Error bars represent standard deviations.

Figure S4

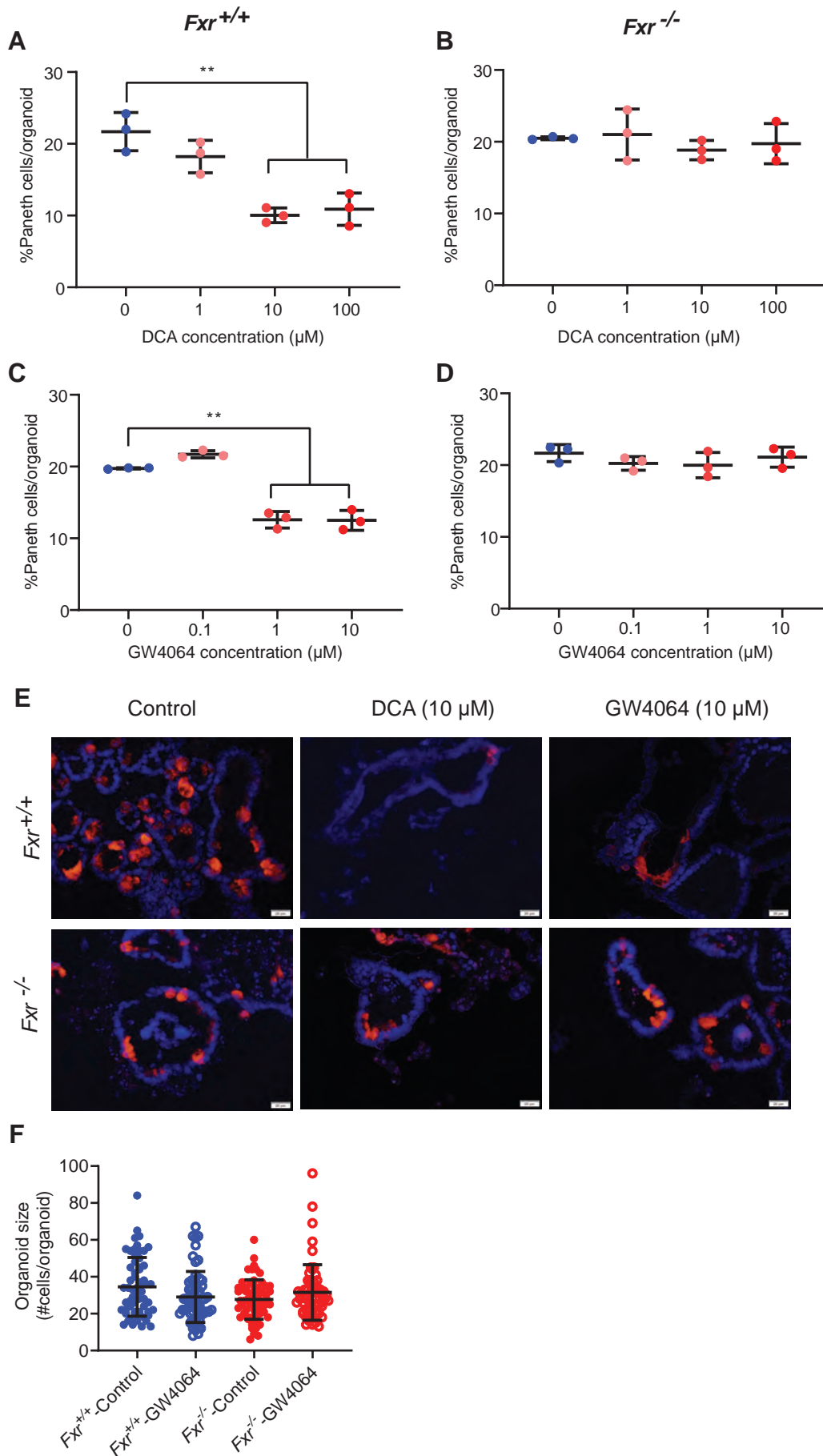


**Figure S4. FXR activation is seen in ileum in WD-fed mice and overweight and obese non-IBD patients, related to Figures 2 and 3.** (A) Transcriptomic analysis by Compbio highlighted upregulated *Fxr* as a major theme involved in the ileum of WD-fed mice. Each sphere represents a transcriptomic theme (bolded) composed of several transcriptomic concepts (key concepts within each theme are highlighted). (B) Enhanced expression of *Fgf15* was seen in the crypt base compartment (enriched with Paneth cells) of WD-fed mice. N=4/group. Statistical analysis was performed by Mann-Whitney test. Error bars represent standard deviations. (C) Full-thickness transcriptomics from ileum samples from non-IBD patients also showed upregulation of *FXR*-associated genes in overweight/obese subjects that contributed specifically to the *FXR* theme. WT mice pretreated with GW4064 followed by *Salmonella* infection were analyzed for bacteria recovery on day 4 in (D) spleen ( $P=0.0003$ ) and (E) intestine ( $P=0.0011$ ). CFU: colony-forming units. n=5/group. Statistical analysis was performed by Mann-Whitney test.

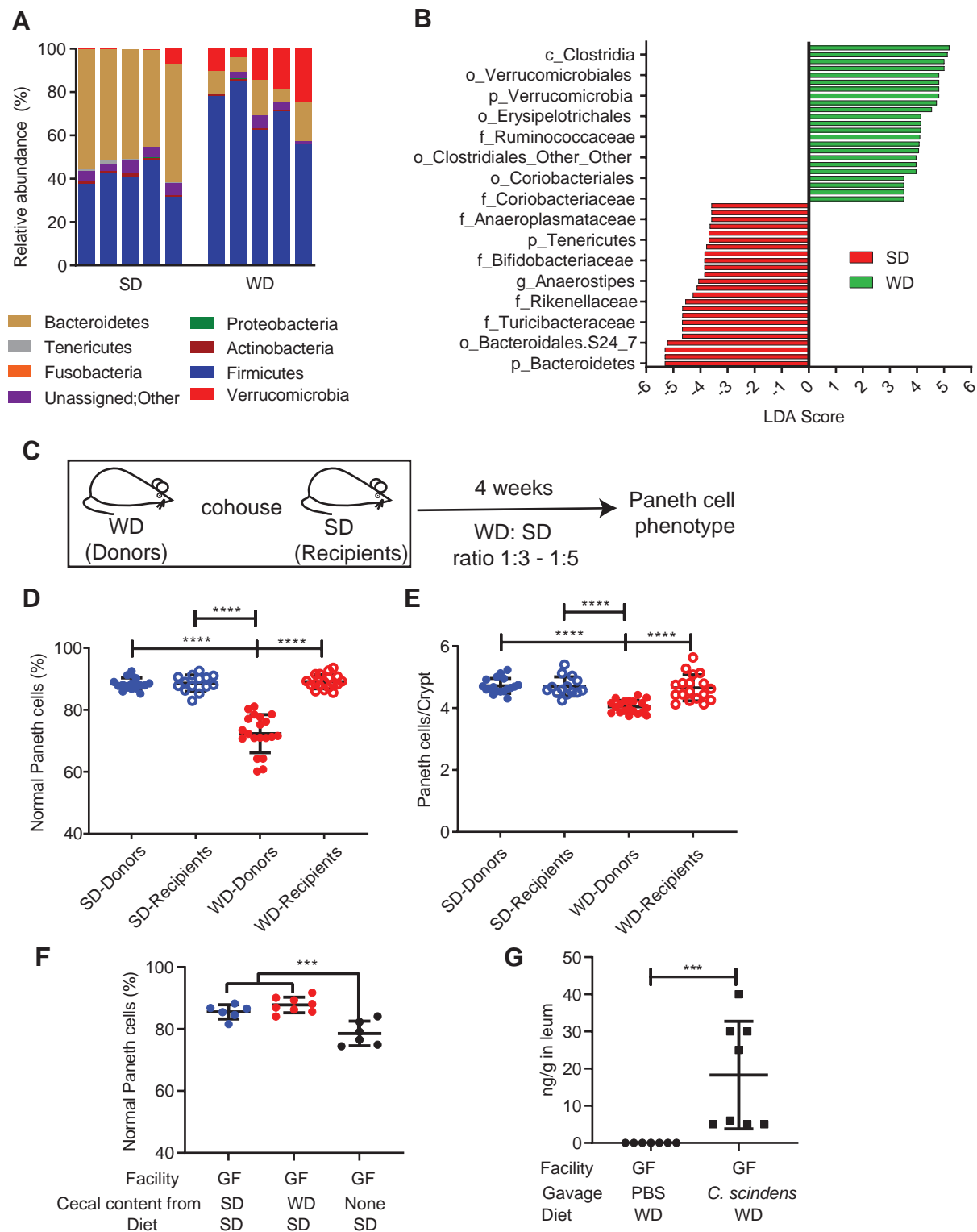
Figure S5



**Figure S5. WD consumption did not induce increase in primary bile acids in ileum, related to Figure 3.** WD did not induce significant increase in (a) cholic acid (CA;  $P=0.6905$ ), (b) chenodeoxycholic acid (CDCA;  $P=0.6905$ ), (c)  $\alpha/\Omega$ -muricholic acid ( $\alpha/\Omega$ -MCA;  $P=0.2786$ ), and (d)  $\beta$ -MCA ( $P=0.4418$ ) in the distal ileum.  $n=5-10$ /group. Statistical analysis was performed by Mann-Whitney test. Error bars represent standard deviations.



**Figure S6. Dose-responses for organoids derived from *Fxr*<sup>-/-</sup> and *Fxr*<sup>+/+</sup> mice, related to Figure 4.** (A, C) *Fxr*<sup>+/+</sup> organoids; (B, D) *Fxr*<sup>-/-</sup> organoids. (A, B) results from treatment with different concentrations of DCA. (C, D) results from treatment with different concentrations of GW4064. Paneth cell defects were induced in *Fxr*<sup>+/+</sup> organoids by higher doses of DCA ( $P=0.0032$ ) and GW4064 ( $P=0.0019$ ). Each data point represents an independent experiment, which includes 20 organoids/condition. \*\*:  $P<0.01$ . (E) Represent photomicrographs of Paneth cells derived from *Fxr*<sup>-/-</sup> and *Fxr*<sup>+/+</sup> small intestinal organoids. Red: lysozyme; blue: Hoechst stain. Scale bar: 20 µm. (F) GW4064 treatment (10µM) did not significantly affect organoid sizes. All organoids analyzed in (A-D) were shown ( $n=60$ /group). (A-D, F): Statistical analysis was performed by Kruskal-Willis tests. Error bars represent standard deviations.



**Figure S7. Microbiota alone do not trigger Paneth cell defects, related to Figure 5.**

(A) Bar plot and (B) LDA score demonstrating changes in *Bacteroidetes*: *Firmicutes* ratio in the fecal microbiota in WD- and SD-fed mice ( $n=5$ /group). (C) Experimental design for cohousing experiment. Fecal microbiota transfer from WD-fed microbial donors did not induce (D) Paneth cell defects or (E) reduced Paneth cells/crypt in microbial recipients. (C-E) Total  $n$ : SD-Donors: 15, SD-Recipients: 14, WD-Donors: 20, WD-Recipients: 18. Statistical analysis was performed by Kruskal-Willis tests followed by Dunn's multiple comparison tests. (F) Gnotobiotic mice maintained on SD and gavaged with cecal contents from SD- or WD-fed mice housed in SPF showed higher percentages of normal Paneth cells compared to those gavaged with PBS and maintained on SD ( $P=0.0007$ ). Total  $n$ : SD-Con: 6, WD-Con: 8, PBS: 6. (G) Germ-free mice colonized with *C. scindens* and exposed to WD showed increased DCA in the ileum. Total  $n$ : PBS: 7, *C. scindens*: 8. Statistical analysis was performed by Kruskal-Wallis test. \*\*\*:  $P<0.001$ ; \*\*\*\*:  $P<0.0001$ . (D-G): Error bars represent standard deviations.