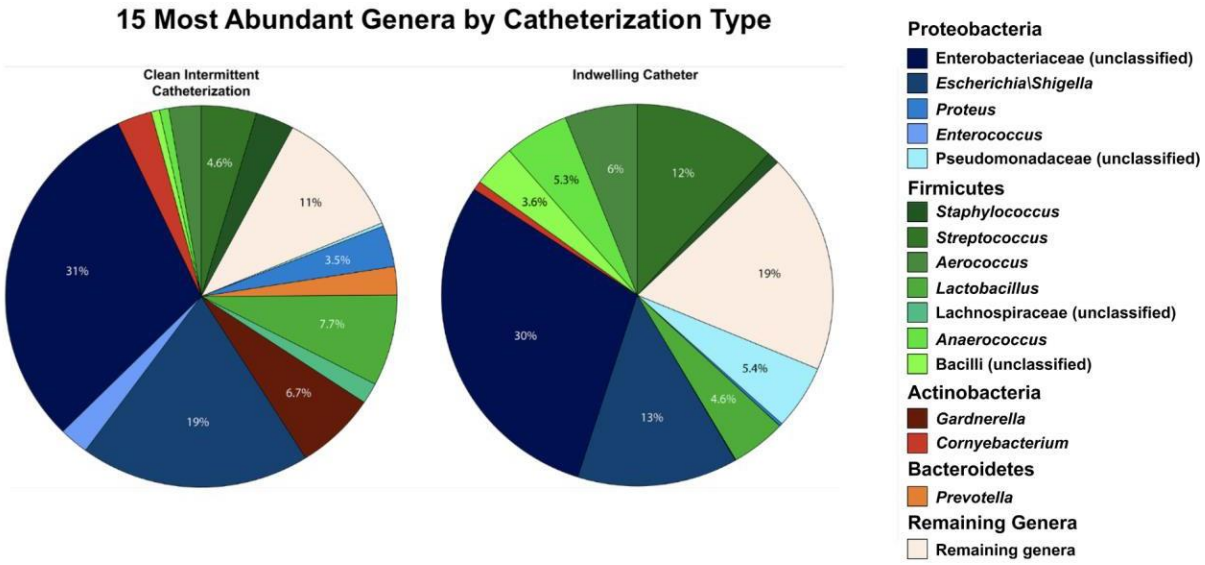
Supplemental Methods:

The following demographic and clinical data was collected and managed using REDCap (Research Electronic Data Capture): age, gender, race, menopausal status, etiology of NGB, catheterization regimen, prophylactic antibiotic use (including gentamicin bladder irrigations), estrogen use, cranberry use, methenamine use, intradetrusor botulinum toxin A (BTX-A) treatment, surgical history including bladder augmentation, urodynamic results, upper tract imaging, and UTI history in the past 12 months prior to study visit.

Supplemental Figure:



Supplemental Table: Clinical and demographic distinctions based on subgroups of interest, tables not shown

	Intermittent Catheterization (CIC) (n=76)	Indwelling Catheter Use (n=18)	p
Age (mean, SD)	53.4 (16.4)	65.6 (14.8)	0.006
Gender - Female	42 (55%)	9 (50%)	0.69
Race			0.35
Caucasian	64 (84%)	18 (100%)	
Asian	2 (3%)	0 (0%)	
African American	3 (4%)	0 (0%)	
Unknown	7 (9%)	0 (0%)	
BMI (mean, SD)	27.1 (.72)	34.5 (11.4)	<0.001
Cause of Neurogenic Bladder			0.26
Spinal cord injury	37 (49%)	6 (33%)	
Multiple sclerosis	10 (13%)	1 (6%)	
Myelomeningocele	5 (7%)	0 (0%)	
Non-neurogenic urinary retention	6 (8%)	3 (17%)	
Other	21 (28%)	9 (50%)	
3 or more UTI over 12 months			0.58
Yes	16 (21%)	6 (33%)	
Missing	23 (30%)	2 (11%)	
Antibiotic Prophylaxis			0.41
Daily oral prophylaxis	5 (7%)	2 (11%)	
Gentamicin bladder irrigation	27 (36%)	3 (17%)	
None	43 (57%)	13 (72%)	
Both	1 (1%)	0 (0%)	
Non-Antibiotic Prophylaxis*			
Cranberry	9 (12%)	2 (11%)	0.93
D-mannose	2 (3%)	1 (6%)	0.53
Methanamine	6 (8%)	1 (6%)	0.73
Probiotics	8 (11%)	0 (0%)	0.15

Vaginal Estrogen	2 (3%)	0 (0%)	0.49
Bladder BTX-A Use	42 (55%)	4 (22%)	0.012

Additional clinical and demographic distinctions based on subgroups of interest (tables not shown)

Gender (male versus female)

- Women tended to be older than men (59 vs 52, p=0.04)

Use of antibiotic prophylaxis (oral versus gentamicin irrigations versus none)

- There were no clinical or demographic differences based on use of antibiotic prophylaxis.

UTI frequency (≥ 3 versus < 3 per year)

- Those with three or more UTI per year were more often patients with a history of spinal cord injury versus not (73% vs 34%, p=0.03) and were younger (47 vs 59, p=0.01).

BTX-A treatment versus not.

- BTX-A users were more often patients with SCI (61% vs 31%, p=0.02) and were younger (52 vs 59, p=0.04) than non-BTX-A users