

**Supplemental Table 1:** Outcomes data of our study cohort (n=55) based on their birth weights.

		Birth weight		
		≤ 1500 g (n=26)	1501 to 2500 g (n=25)	2501-3500 g (n=4)
Bronchopulmonary Dysplasia				
	Our study Cohort – n (%)	10 (38.5)	0 (0)	0 (0)
Necrotizing Enterocolitis				
	Our study cohort – n (%)	3 (11.5)	1 (4.0)	0 (0)
Sepsis				
	Our study cohort – n (%)	6 (23.1)	0 (0)	0 (0)
Mortality				
	Our study cohort – n (%)	1 (3.8)	0 (0)	0 (0)

**Supplemental Table 2:** The distribution of GDF15 levels within the first week of life in the study cohort. Two sample t-test showed a significant association between gestational age and the initial GDF15 levels, and no significant association between the initial GDF15 levels and birth weight or sex.

		GDF15 levels within the first week of life, (pg/mL)			
		Mean ± SD	Min	Max	p-value
<b>All subjects (n = 52)<sup>a</sup></b>		4856.4 ± 3329.5	1217.5	15738.3	
<b>Infants Characteristics</b>					
<b>Gestational Age</b>					
	23-30 weeks (n=17)	7201.1 ± 3880.4	2278.1	15738.3	<0.001
	31-36 weeks (n=35)	3717.5 ± 2336.4	1217.5	11119.5	
<b>Birth weight</b>					
	< 2000 g (n=37)	5390.5 ± 3693.8	1217.5	15738.3	0.069
	≥ 2000 g (n=15)	3538.8 ± 1638.6	1253.9	6713.8	
<b>Gender</b>					
	Female (n=22)	4622.2 ± 3364.3	1217.5	15738.3	0.669
	Male (n=30)	5028.0 ± 3350.7	1253.9	15738.3	
<sup>a</sup> Five subjects out of the 57 were excluded, due to inability to retrieve scavenged specimens within the first week of life.					

<b>Supplemental Table 3: The serum GDF15 levels at different postmenstrual ages</b>					
	<b>GDF15 levels at different postnatal ages, (pg/mL)</b>				
	PMA <sup>a</sup> 23-25	PMA <sup>a</sup> 26-28	PMA <sup>a</sup> 29-31	PMA <sup>a</sup> 32-34	PMA <sup>a</sup> 35-36
<b>Mean ± SD</b>	8747 ± 3978	7073 ± 3748	5203 ± 3281	2864 ± 1863	2033 ± 1052
<b>Minimum</b>	3405	2278	1956	1090	807.2
<b>Maximum</b>	15738	15738	15738	9953	4396
<sup>a</sup> PMA: Postmenstrual age in weeks					