

Supplementary Table 1. Clinical criteria for chronic enteropathy associated with *SLCO2A1* gene (CEAS)

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- 1 Persistent and occult blood loss from the GI tract except during bowel rest or postoperative period.
  - 2 Confirmation of characteristic small intestinal lesions by macroscopy, radiography, or enteroscopy.
    - i Circular or oblique in alignment.
    - ii Sharply demarcated from surrounding normal mucosa.
    - iii Geographic or linear in shape.
    - iv Multiplicity in number with < 4cm distance from each other.
    - v Ulcers not reaching proper muscular layer.
    - vi Scarred ulcers presumed to be the healing stage of those characterized by i-v<sup>a</sup> in cases treated by bowel rest.
  - 3 Homozygous or compound heterozygous *SLCO2A1* mutations which are predicted to be deleterious.
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<sup>a</sup>Depicted as symmetric and eccentric rigidity under small-bowel radiography, and concentric or nonconcentric stricture under enteroscopy. GI, gastrointestinal.

Supplementary Table 2. Selected cut-off values for PGE-MUM concentrations for differentiating between CEAS and CD

| cut-off values           | Sensitivity (%) | Specificity (%) |
|--------------------------|-----------------|-----------------|
| PGE-MUM > 34.2           | 100             | 60.2            |
| <b>PGE-MUM &gt; 48.9</b> | <b>95.0</b>     | <b>79.6</b>     |
| PGE-MUM > 50.9           | 90.0            | 80.6            |
| PGE-MUM > 62.5           | 75.0            | 86.7            |
| PGE-MUM > 79.4           | 60.0            | 90.8            |

PGE-MUM: Prostaglandin E major urinary metabolites, CEAS: Chronic enteropathy associated with *SLCO2A1* gene, CD: Crohn's disease.