

**Table Legends:**

Table S1: Summary of clinical and sequencing data for all samples analyzed

Table S2: Marker genes identified for all clusters identified in all samples

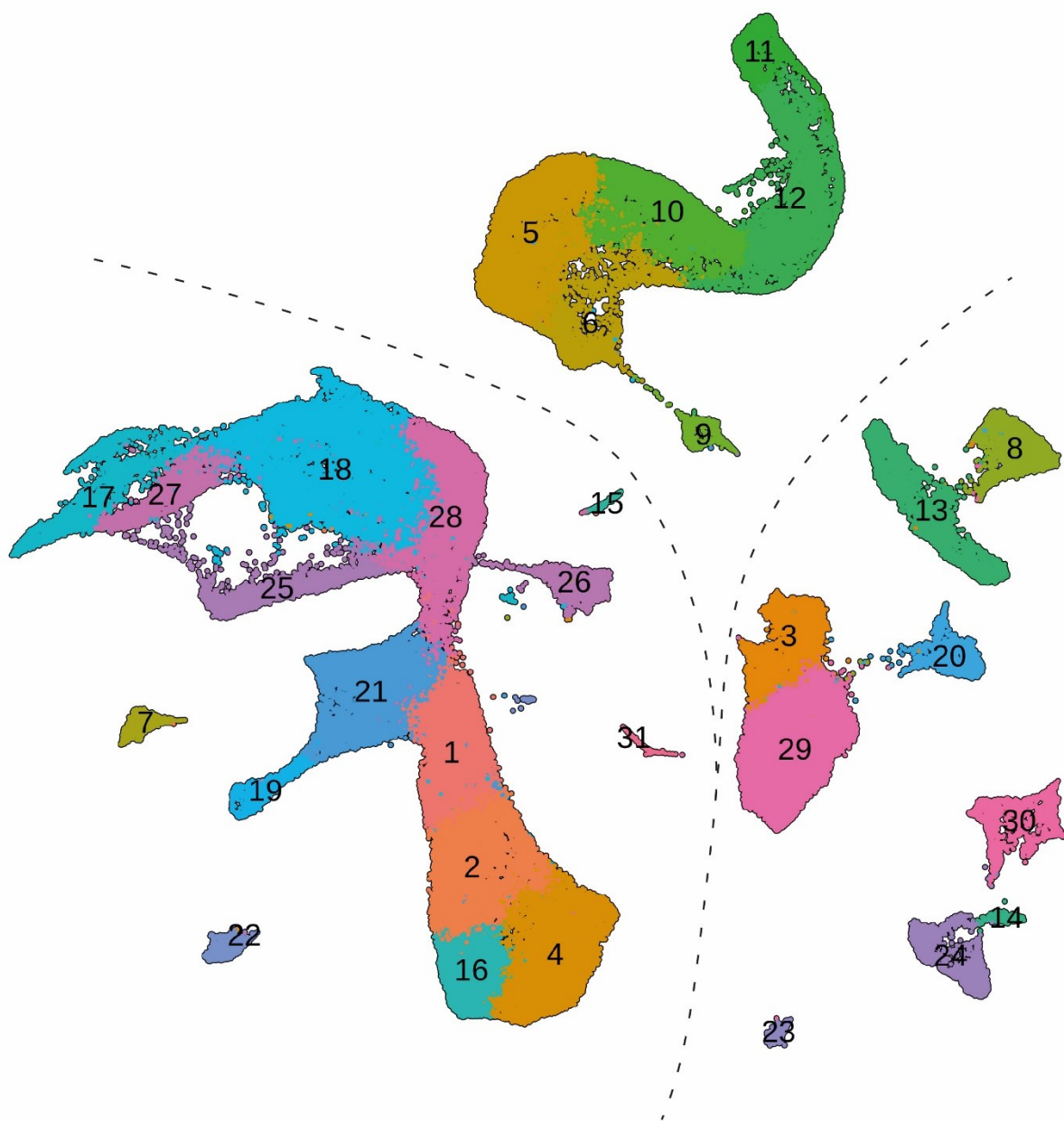
Table S3: Marker genes identified for the columnar cells

Table S4: Results of differential gene analysis between E-GM and normal tissues and NAG/CAG and normal tissues

Table S5: The summary of mutations detected in E-GM and IM samples

Table S6: Marker genes identified for the fibroblasts

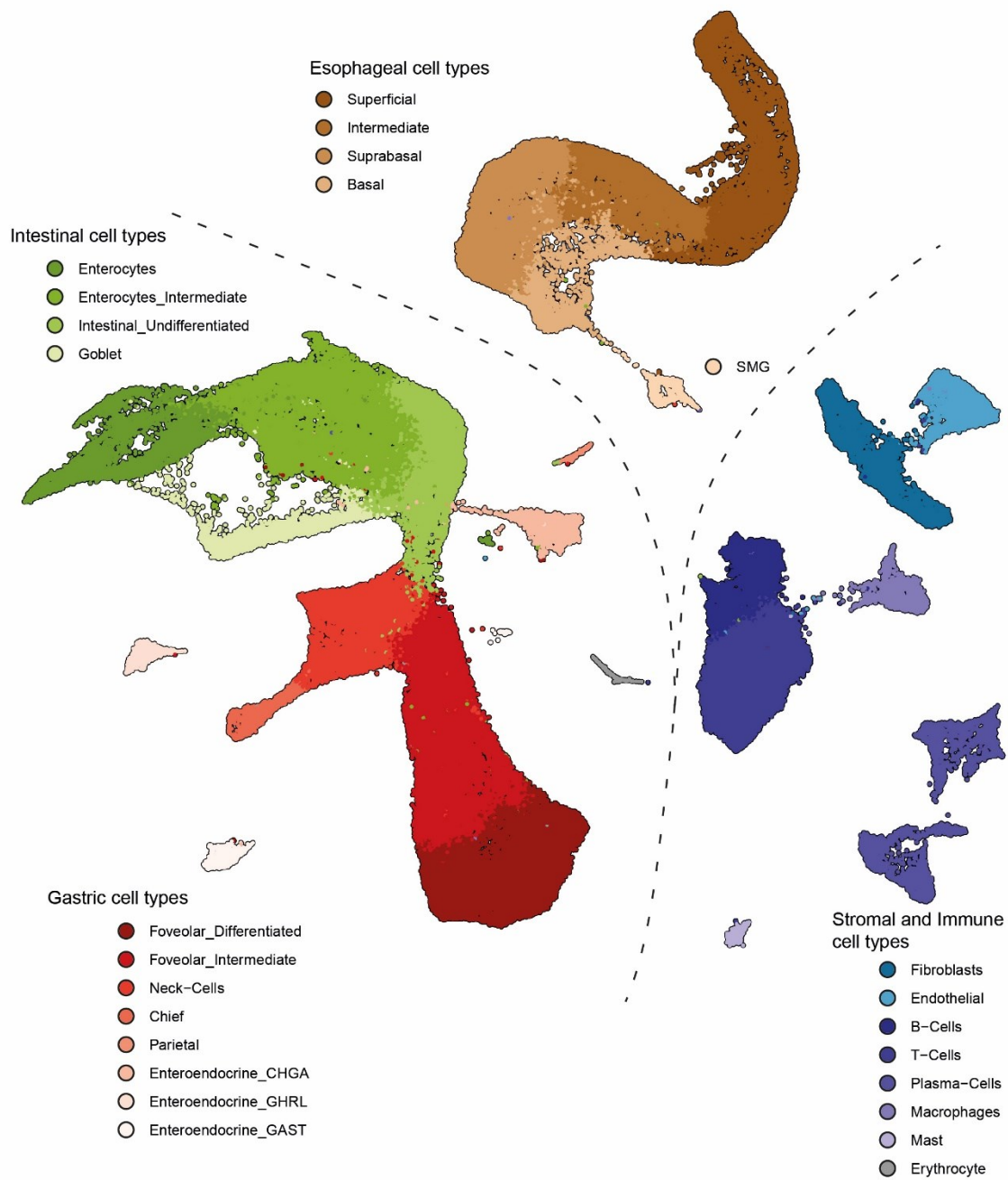
## Supplementary Figures and Legends



**Figure S1: Clustering of all cell types.**

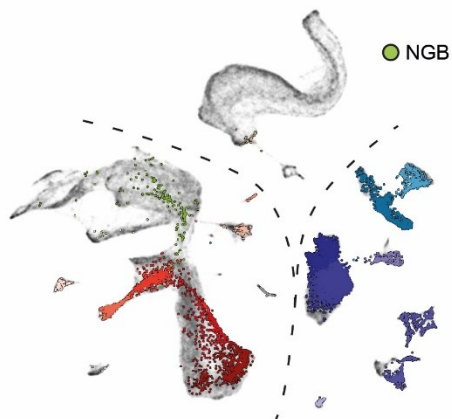
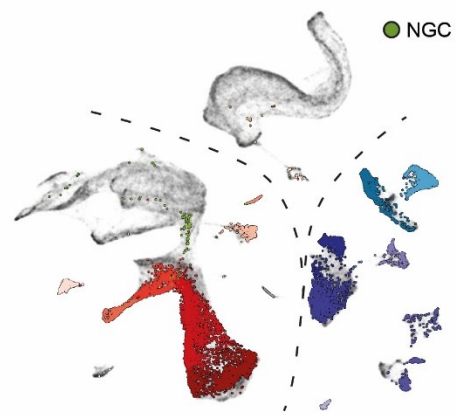
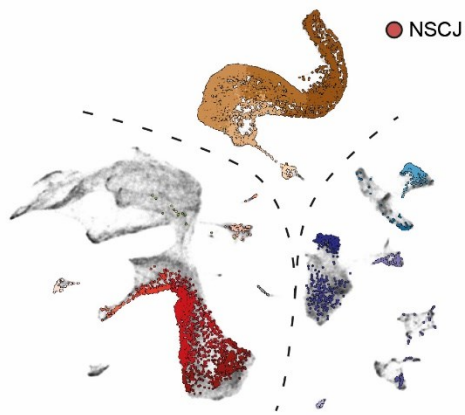
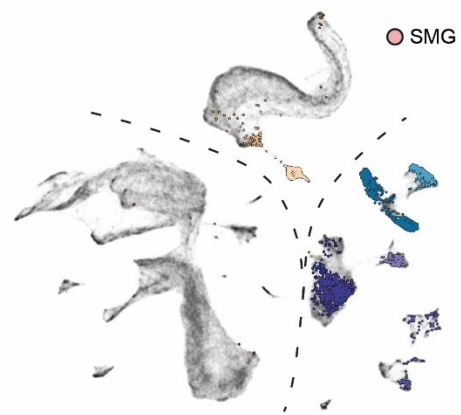
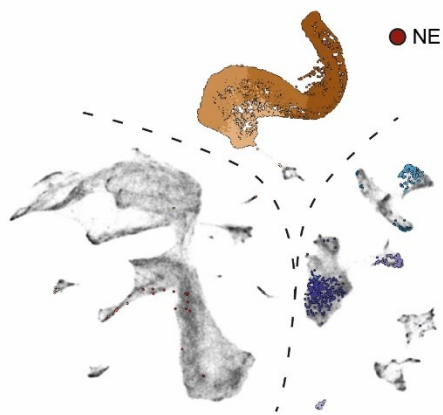
UMAP of batch corrected cells analyzed in this study with computationally identified cell clusters highlighted.





**Figure S2: Annotation of all cell types.**

UMAP of batch corrected cells analyzed in this study with manually annotated cell types highlighted.



#### Esophageal cell types

- Superficial
- Intermediate
- Suprabasal
- Basal
- SMG

#### Gastric cell types

- Foveolar Differentiated
- Foveolar Intermediate
- Neck-Cells
- Chief
- Parietal
- Enteroendocrine (CHGA)
- Enteroendocrine (GHRL)
- Enteroendocrine (GAST)

#### Intestinal cell types

- Enterocytes
- Enterocytes Intermediate
- Intestinal Undifferentiated
- Goblet

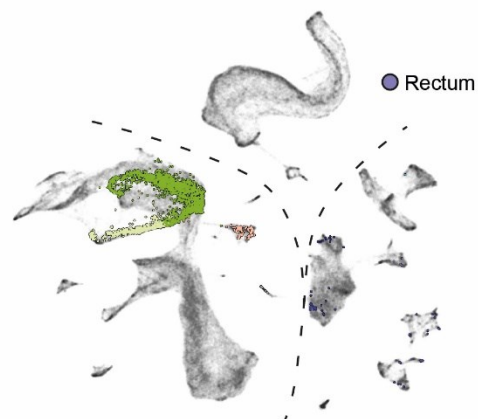
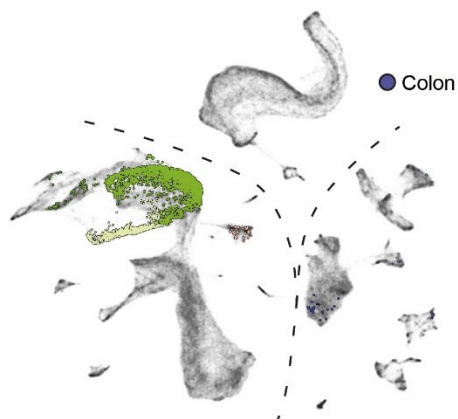
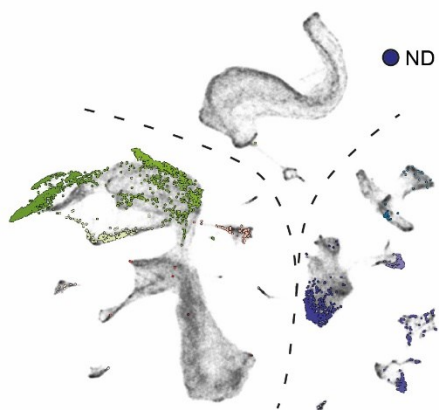
#### Stromal and Immune cell types

- Fibroblasts
- Endothelial
- B-Cells
- T-Cells
- Plasma-Cells
- Macrophages
- Mast
- Erythrocyte

**Figure S3: Annotation of all cell types in normal tissue types of stomach and esophagus**

UMAP of batch corrected cells analyzed in this study with manually annotated cell types highlighted in the NE, SMG, NSCJ, NGC and NGB samples. Please note that the NGB samples were collected from tissues adjacent to gastric cancer samples (Sathe et al.) and the cells from at least patient seem to contain intestinal foveolar-like and goblet cells suggesting presence of gastric IM in this patient.

Abbreviation: NE – normal squamous esophagus, SMG – esophageal submucosal glands, NSCJ – normal squamo-columnar junction, NGC – normal gastric cardia, NGB – normal gastric body.



#### Esophageal cell types

- Superficial
- Intermediate
- Suprabasal
- Basal
- SMG

#### Gastric cell types

- Foveolar Differentiated
- Foveolar Intermediate
- Neck-Cells
- Chief
- Parietal
- Enteroendocrine (CHGA)
- Enteroendocrine (GHRL)
- Enteroendocrine (GAST)

#### Intestinal cell types

- Enterocytes
- Enterocytes Intermediate
- Intestinal Undifferentiated
- Goblet

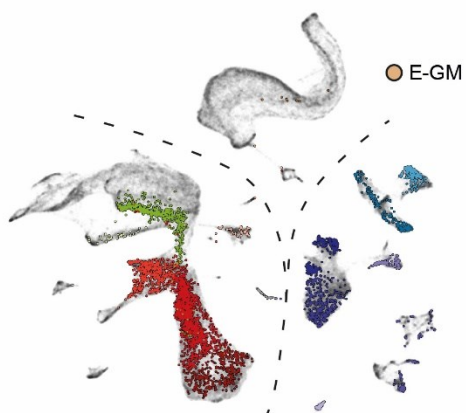
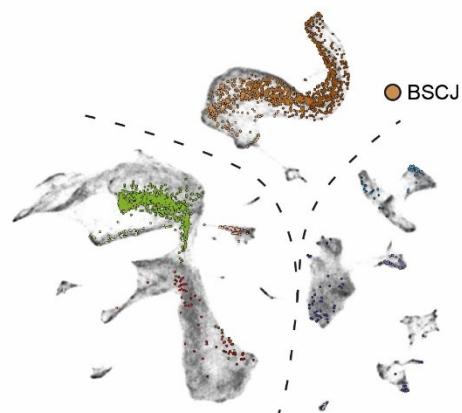
#### Stromal and Immune cell types

- Fibroblasts
- Endothelial
- B-Cells
- T-Cells
- Plasma-Cells
- Macrophages
- Mast
- Erythrocyte

**Figure S4: Annotation of all cell types in normal tissue types of intestine**

UMAP of batch corrected cells analyzed in this study with manually annotated cell types highlighted in the ND, Ileum, Colon and Rectum samples. Please note that Ileum, Colon and Rectum were actively enriched for the epithelial cells by the authors and very few non-epithelial cells were identified.

Abbreviation: ND – normal duodenum.



#### Esophageal cell types

- Superficial
- Intermediate
- Suprabasal
- Basal
- SMG

#### Gastric cell types

- Foveolar Differentiated
- Foveolar Intermediate
- Neck-Cells
- Chief
- Parietal
- Enteroendocrine (CHGA)
- Enteroendocrine (GHRL)
- Enteroendocrine (GAST)

#### Intestinal cell types

- Enterocytes
- Enterocytes Intermediate
- Intestinal Undifferentiated
- Goblet

#### Stromal and Immune cell types

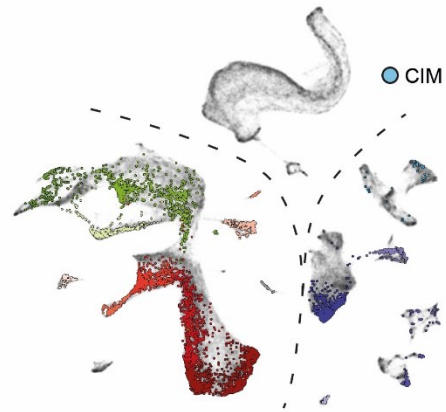
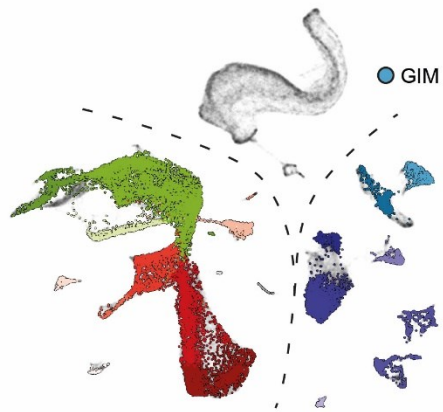
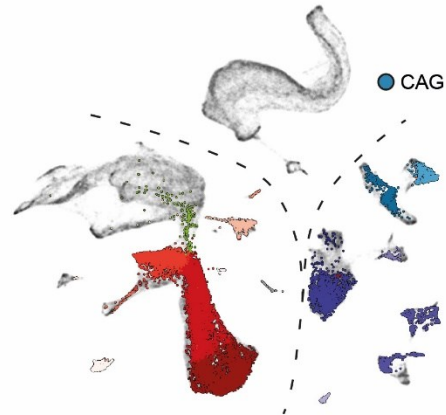
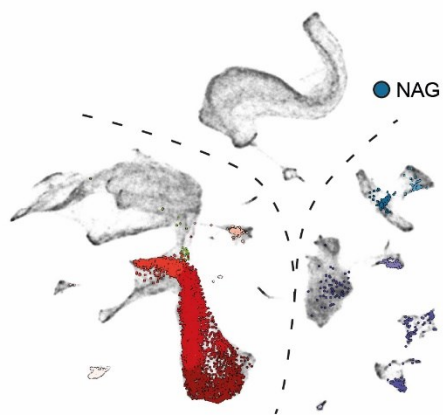
- Fibroblasts
- Endothelial
- B-Cells
- T-Cells
- Plasma-Cells
- Macrophages
- Mast
- Erythrocyte

**Figure S5: Annotation of all cell types in esophageal IM tissue types**

UMAP of batch corrected cells analyzed in this study with manually annotated cell types highlighted in the BE, BSCJ and GM samples. Please note that one BE sample contained squamous cells that originate from squamous island confirmed on the adjacent H&E.

Abbreviation: BE-IM – Barrett’s esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE.





#### Esophageal cell types

- Superficial
- Intermediate
- Suprabasal
- Basal
- SMG

#### Gastric cell types

- Foveolar Differentiated
- Foveolar Intermediate
- Neck-Cells
- Chief
- Parietal
- Enteroendocrine (CHGA)
- Enteroendocrine (GHRL)
- Enteroendocrine (GAST)

#### Intestinal cell types

- Enterocytes
- Enterocytes Intermediate
- Intestinal Undifferentiated
- Goblet

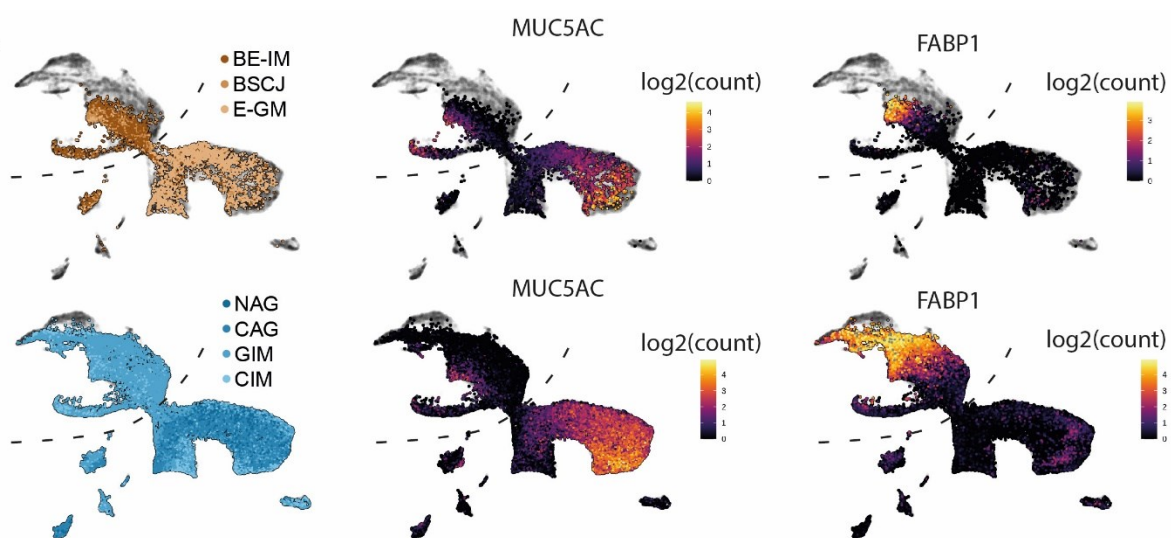
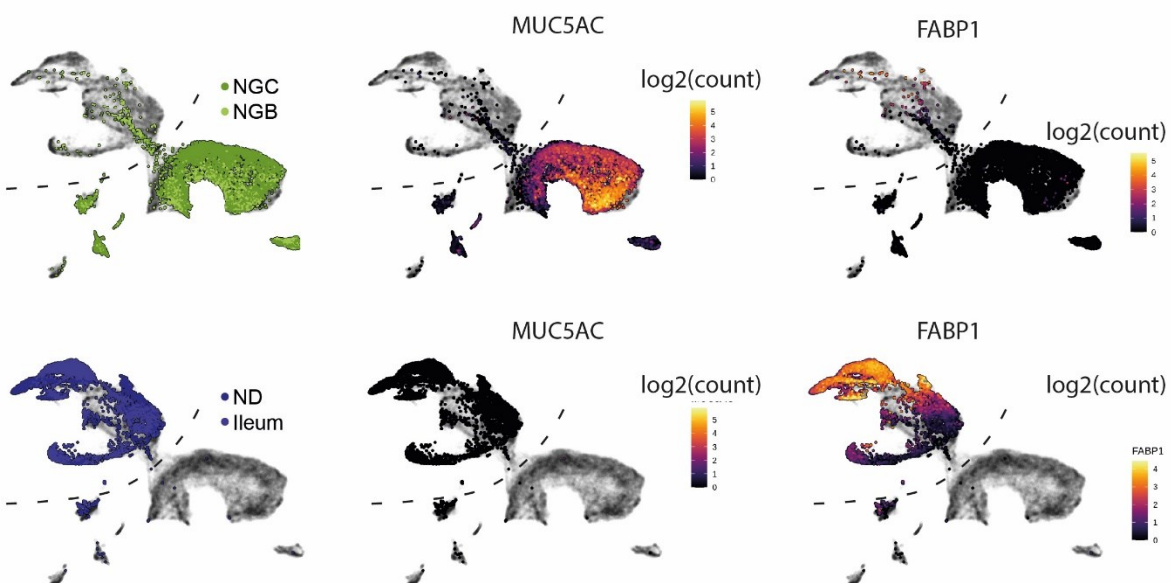
#### Stromal and Immune cell types

- Fibroblasts
- Endothelial
- B-Cells
- T-Cells
- Plasma-Cells
- Macrophages
- Mast
- Erythrocyte

**Figure S6: Annotation of all cell types in stomach IM tissue types**

UMAP of batch corrected cells analyzed in this study with manually annotated cell types highlighted in the NAG, CAG, GIM and CIM samples. Please note that NAG, CAG and GIM samples were collected in the pyloric stomach by Zhang et al. and these sample are the only samples containing Gastrin (GAST) producing enteroendocrine cells.

Abbreviation: CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.

**A****B**

**Figure S7: Expression of MUC5AC and FABP1 markers in normal gastric and intestinal cell types.**

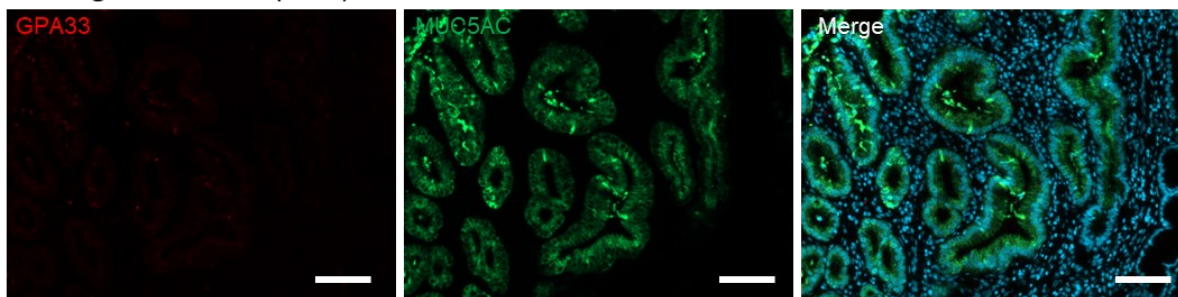
- A) UMAP of esophageal IM (E-GM, BE-IM, BSCJ) and stomach IM (NAG, CAG, GIM, CIM) with tissue types highlighted. The middle UMAP show expression of MUC5AC (marker of gastric foveolar cells) in the corresponding tissues. The right UMAP show expression of FABP1 (marker of intestinal enterocytes) in the corresponding tissues.
- B) UMAP of gastric (NGC and NGB) and small intestinal (ND, Ileum) cells with tissue types highlighted. The middle UMAP show expression of MUC5AC (marker of gastric foveolar cells) in the corresponding tissues. The right UMAP show expression of FABP1 (marker of intestinal enterocytes) in the corresponding tissues.

Abbreviation: BE-IM – Barrett’s esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE, CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis NGC – normal gastric cardia, NGB – normal gastric body, ND – normal duodenum.

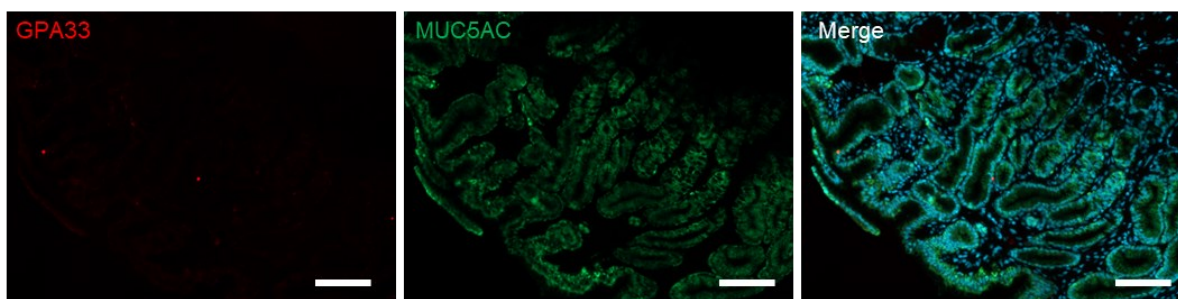
Normal duodenum (ND)



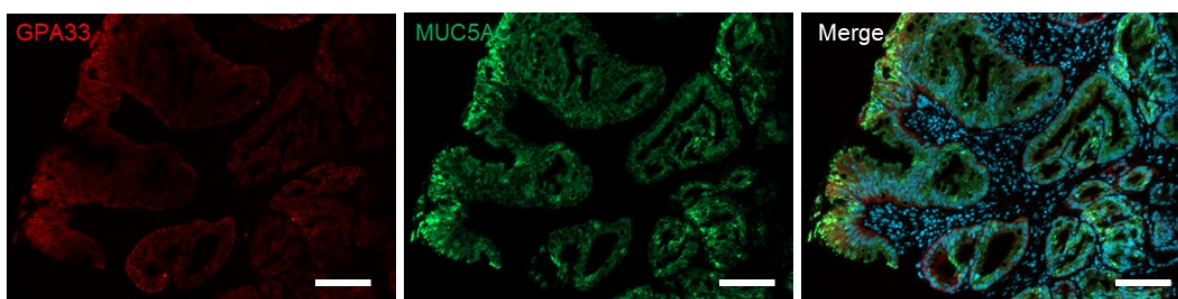
Normal gastric cardia (NGC)



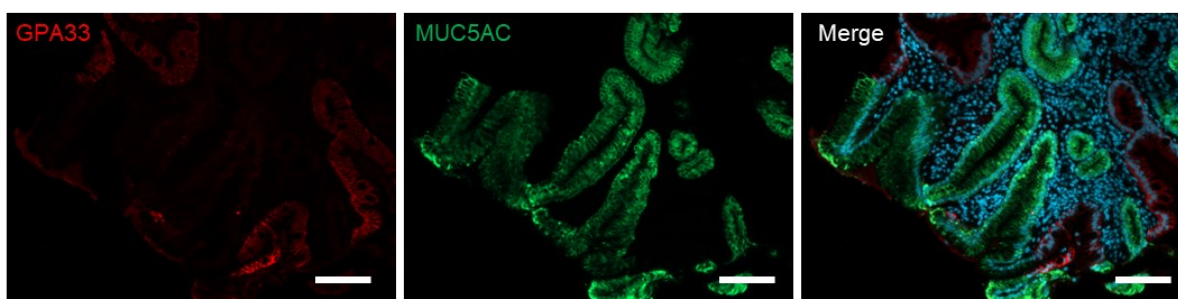
E-GM



BE-IM



GIM



Scale bar = 100  $\mu$ m

**Figure S8: Co-immunofluorescent staining with MUC5AC and GPA33**

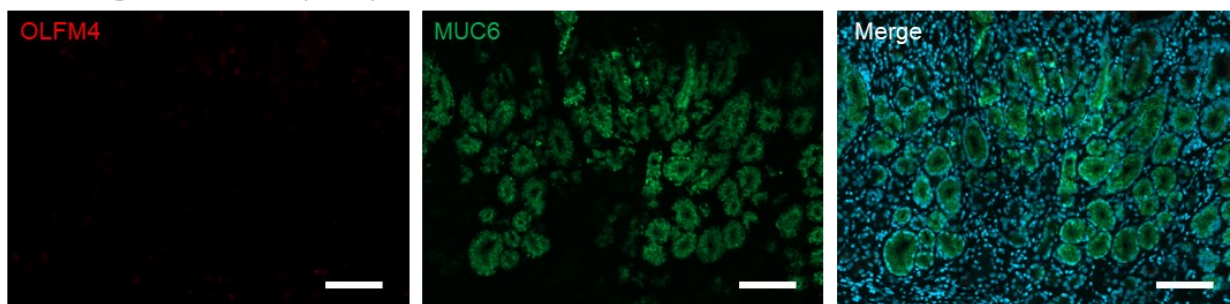
Co-immunofluorescent staining of Normal gastric cardia (NGC), duodenum (ND), Esophagus with gastric metaplasia (E-GM), Barrett's esophagus with intestinal metaplasia (BE-IM) and gastric intestinal metaplasia (GIM) shows co-expression of differentiated intestinal (GPA33) and gastric (MUC5AC) markers in both types of intestinal metaplasia. scale bar: 100  $\mu$ m. Related to figure 3C. Images are representative of 15 patients (NGC = 2, ND = 2, BE-IM = 4, GIM = 4, E-GM = 3). Each patient has 1 to 4 biopsies.



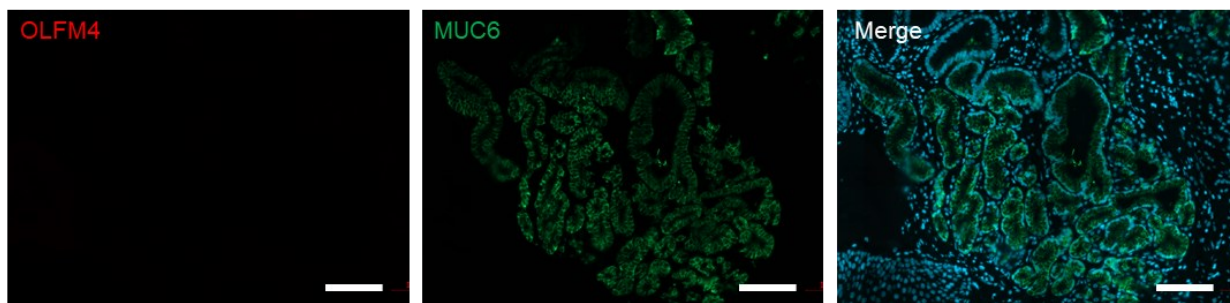
Normal duodenum (ND)



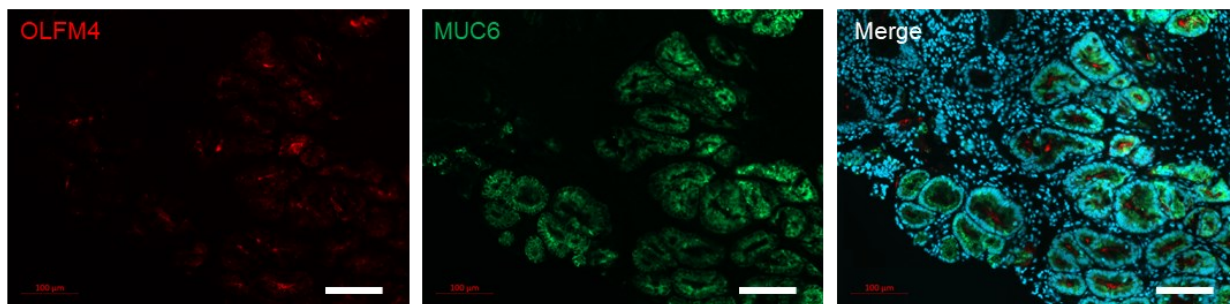
Normal gastric cardia (NGC)



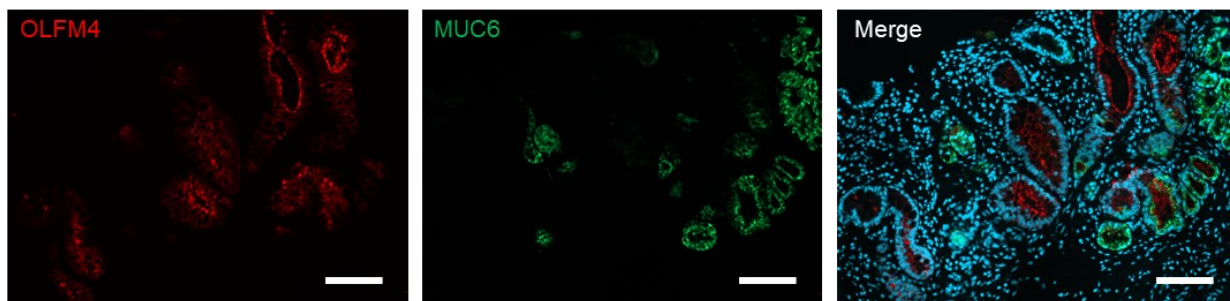
E-GM



BE-IM



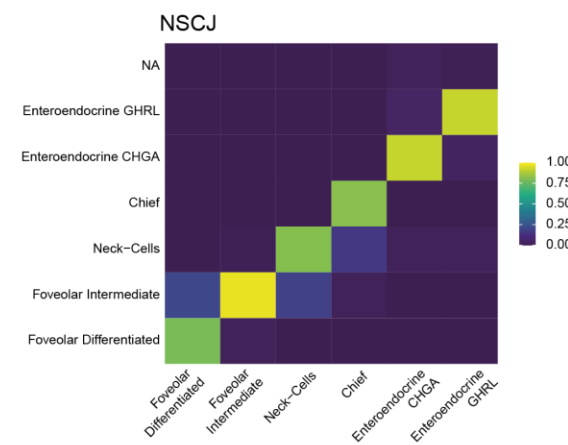
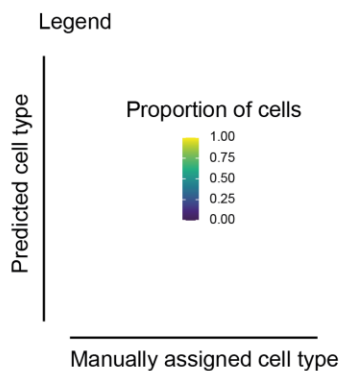
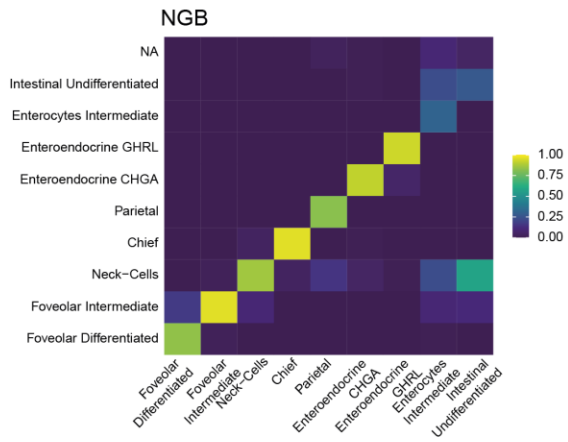
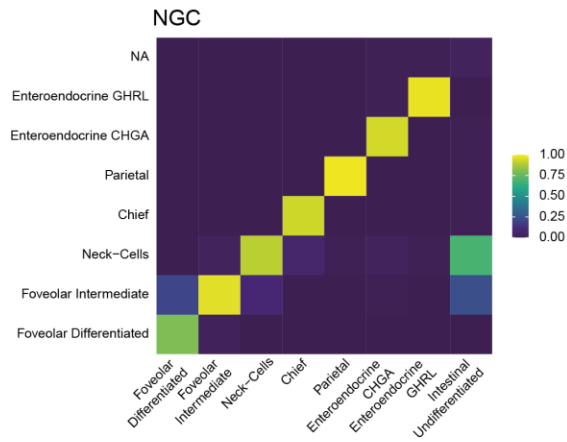
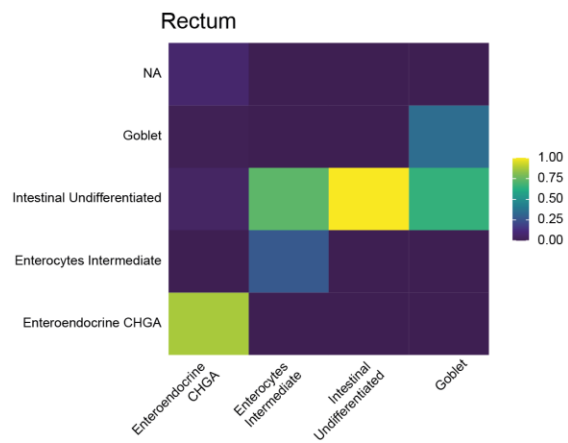
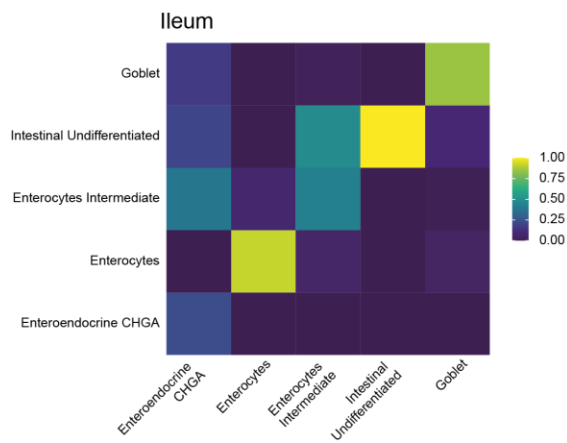
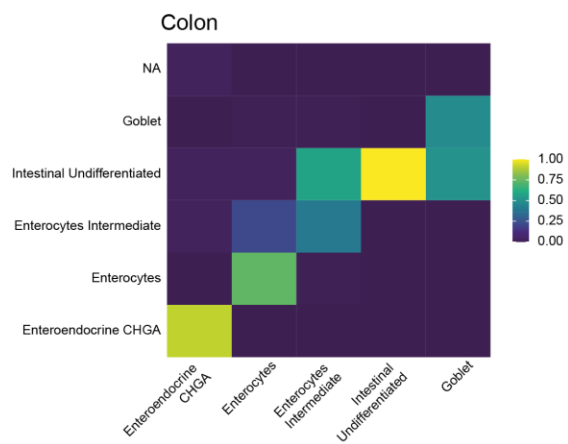
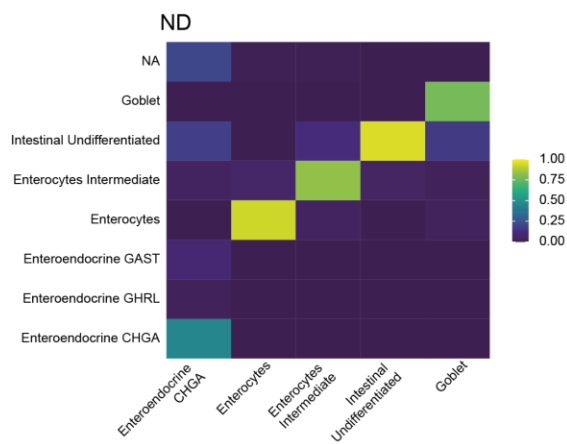
GIM



**Figure S9: Co-immunofluorescent staining with MUC6 and OLFM4**

Co-immunofluorescent staining of Normal gastric cardia (NGC), duodenum (ND), Esophagus with gastric metaplasia (E-GM), Barrett's esophagus with intestinal metaplasia (BE-IM) and gastric intestinal metaplasia (GIM) shows co-expression of intestinal (MUC6) and gastric (OLFM4) progenitor markers in both types of intestinal metaplasia. scale bar: 100  $\mu$ m. Related to figure 3C. Images are representative of 15 patients (NGC = 2, ND = 2, BE-IM = 4, GIM = 4, E-GM = 3). Each patient has 1 to 4 biopsies.

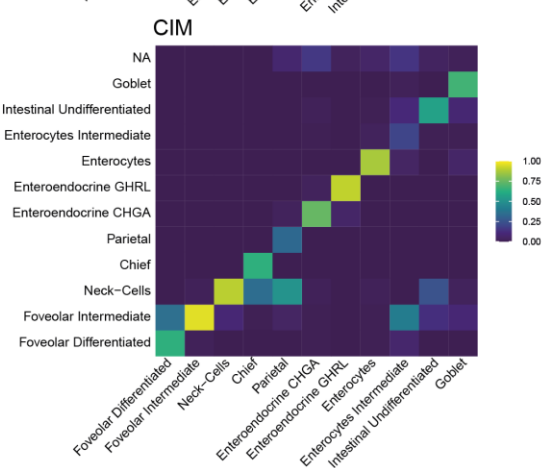
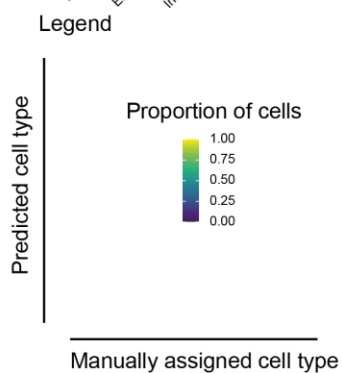
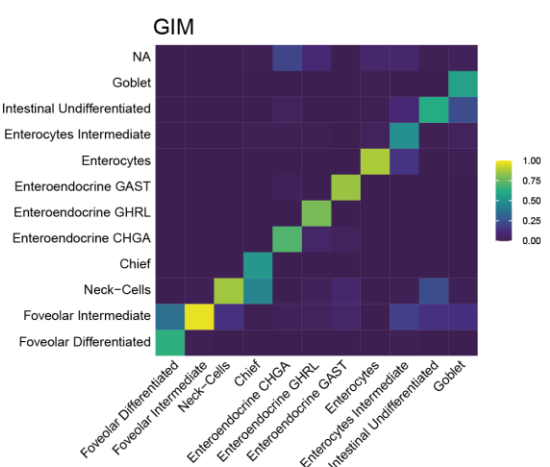
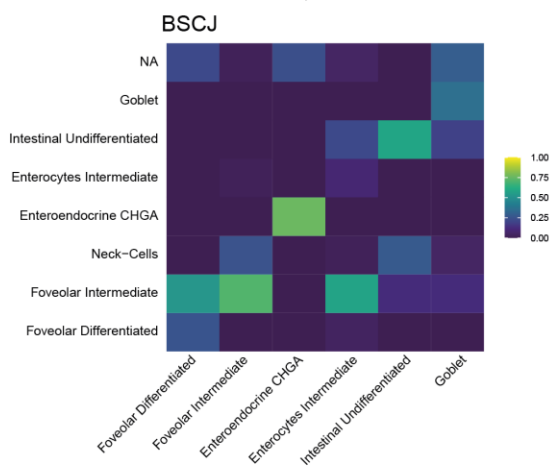
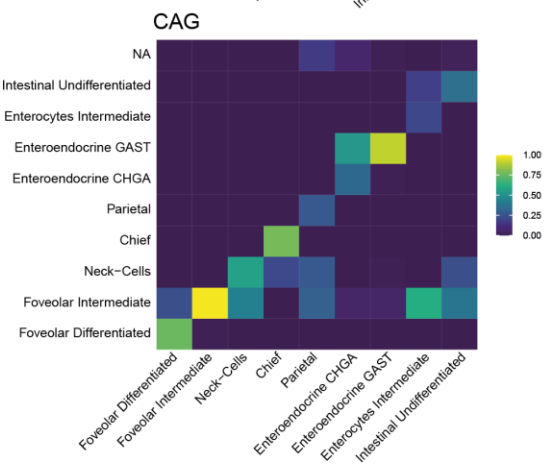
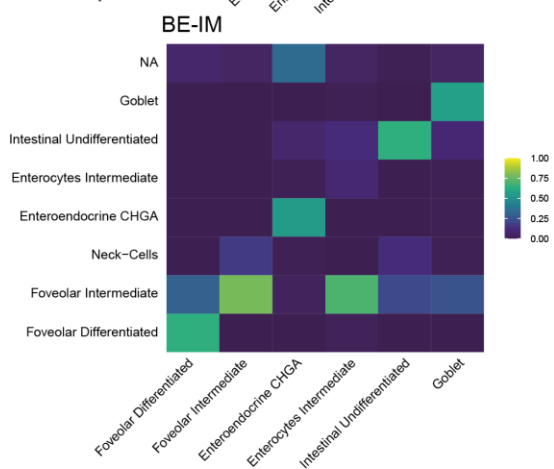
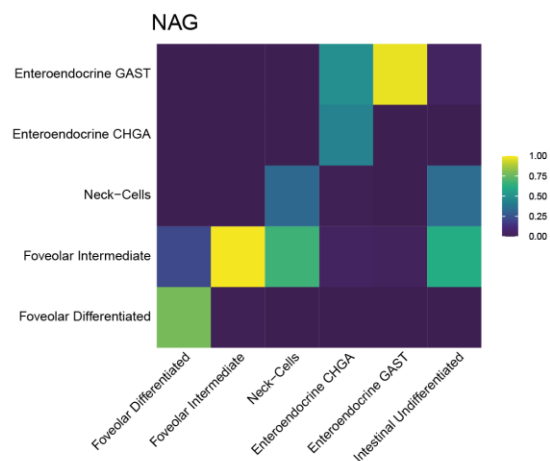
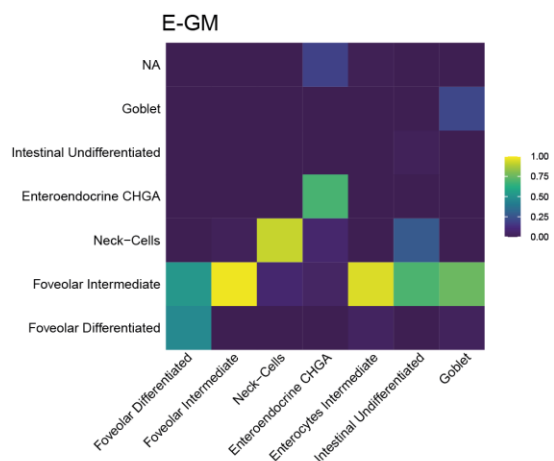




**Figure S10: Confusion matrix of cell type annotation in the normal tissue types using SingleR annotation.**

Confusion matrix displaying the proportion of cells that were annotated using SingleR (y-axis) that overlap the given reference cell types (x-axis).

Abbreviation: NSCJ – normal squamo-columnar junction, NGC – normal gastric cardia, NGB – normal gastric body, ND – normal duodenum,



**Figure S11: Confusion matrix of cell type annotation in the IM tissue types using SingleR annotation.**

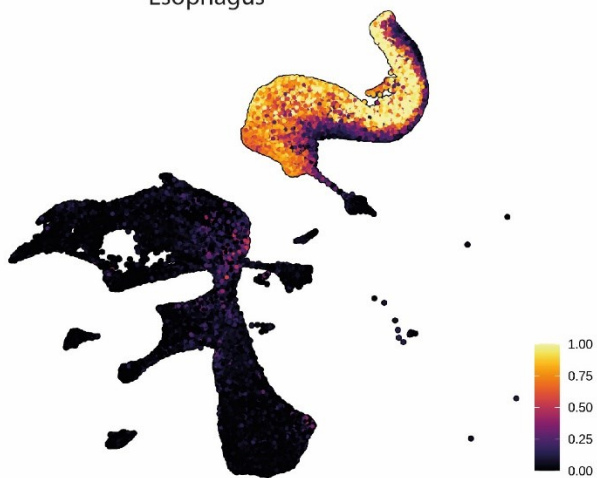
Confusion matrix displaying the proportion of cells that were annotated using SingleR (y-axis) that overlap the given reference cell types (manually annotated using reference genes from normal tissues, x-axis).

Abbreviation: BE-IM – Barrett’s esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE, CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.

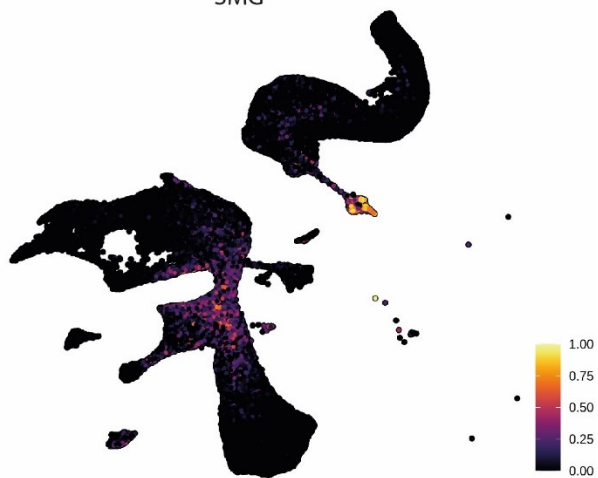
s

**A**

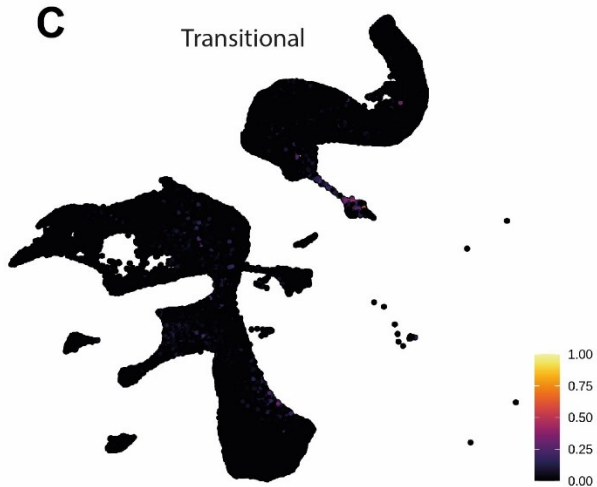
Esophagus

**B**

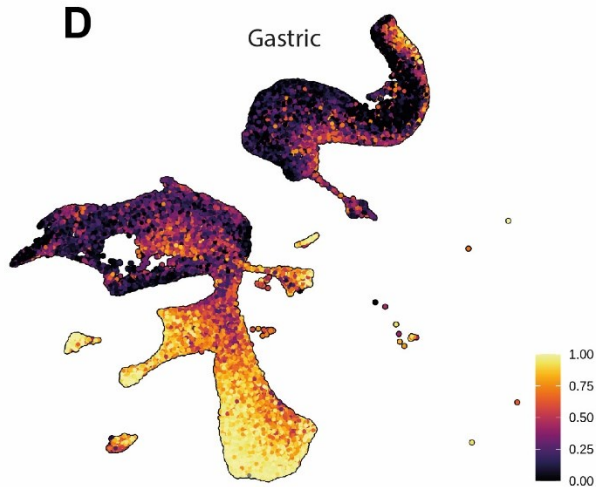
SMG

**C**

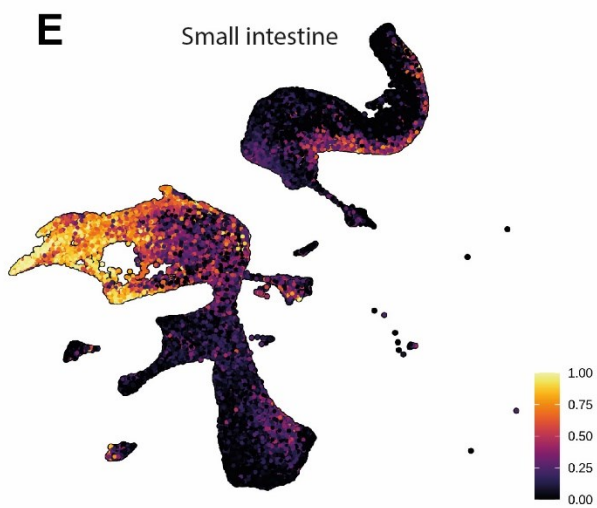
Transitional

**D**

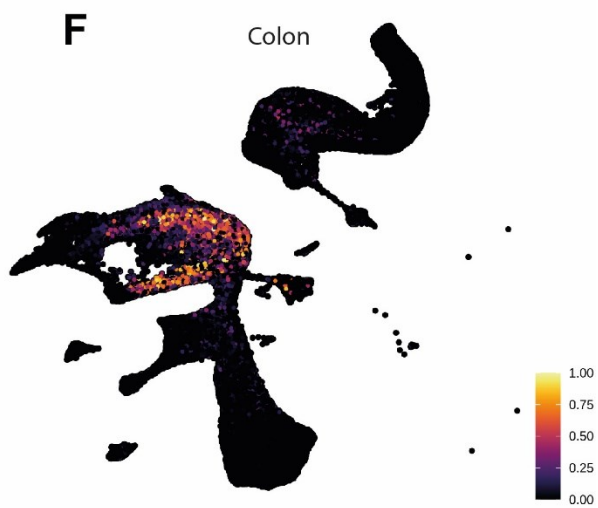
Gastric

**E**

Small intestine

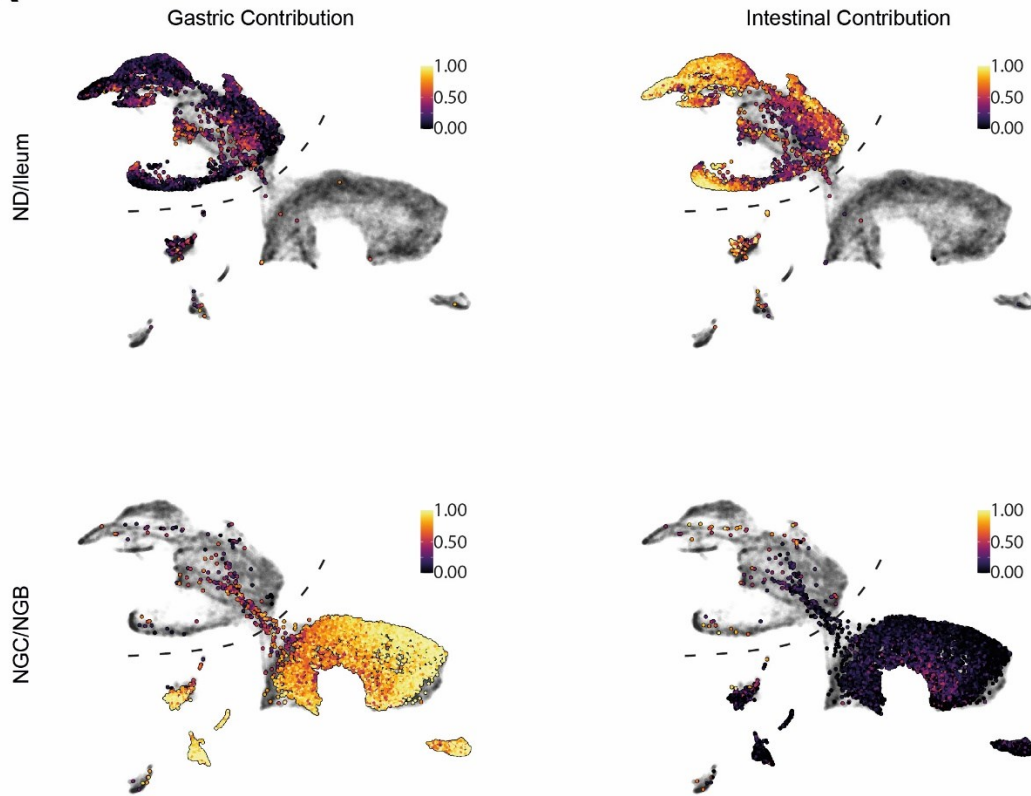
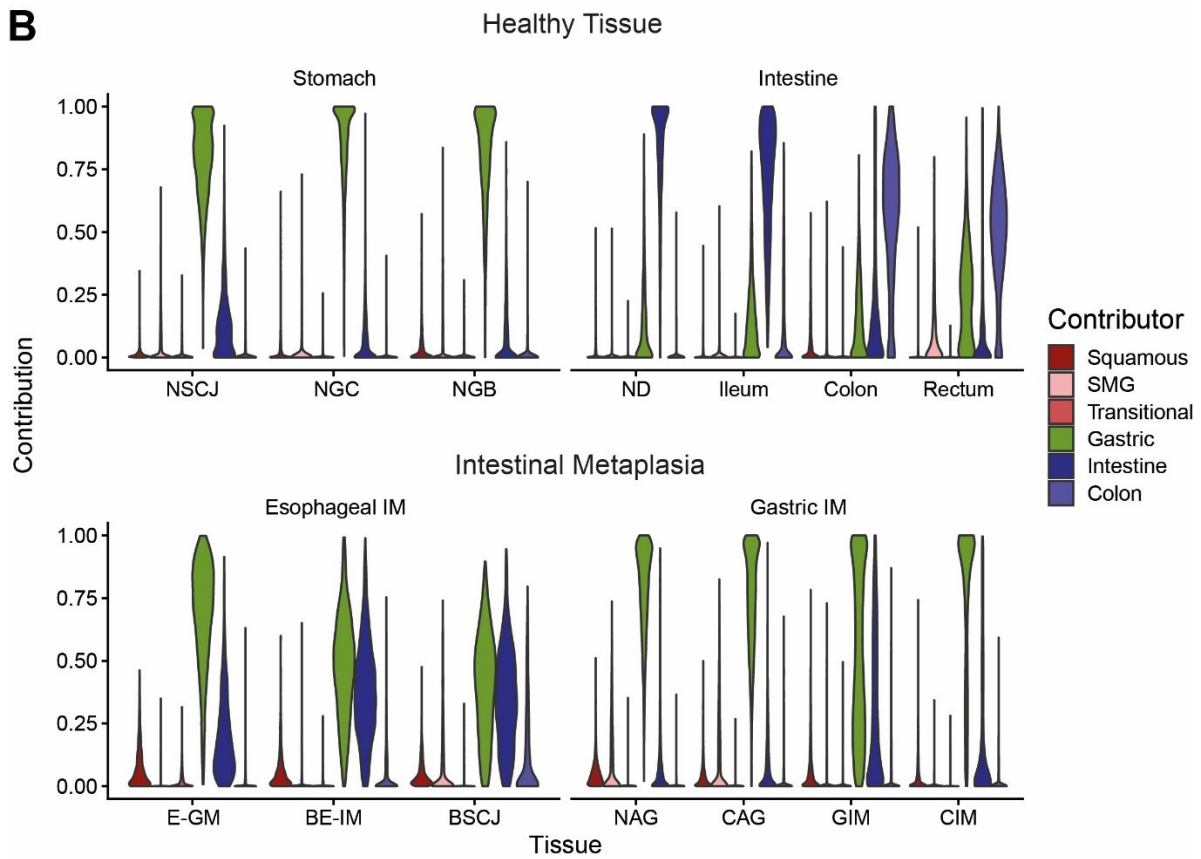
**F**

Colon



**Figure S12: MuSiC accurately predicts contribution of cell types to known tissue types.**

UMAP plot of all columnar cell types (same coordinates as figure 1B) with the contribution of Esophageal (A), SMG (B), Transitional (C), Gastric (D), Small intestinal (E) and Colonic (F) phenotypes highlighted. The contribution of Transitional phenotype is minimal as these cells share most phenotypic features with SMG cell types.

**A****B**

**Figure S13: Only Gastric and Intestinal phenotypes contribute to Esophageal and Gastric IM cell types**

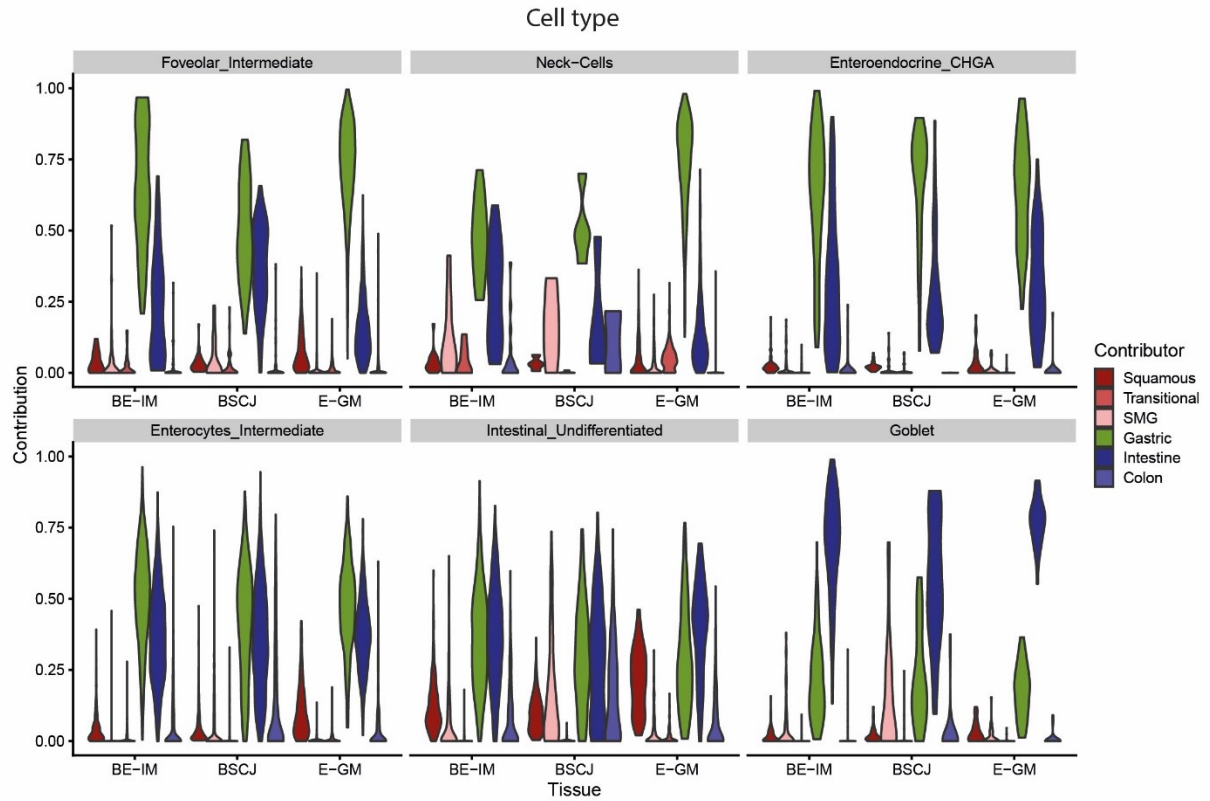
A) UMAP with MuSiC derived contribution of gastric and intestinal phenotypes to individual cells of the small intestine (ND and Ileum, top) and stomach (NGC and NGB).

B) Violin plot of MuSiC derived esophageal (squamous), SMG, Transitional, Gastric, Intestinal and Colonic phenotype contribution to columnar cells from normal tissue types (NSCJ, NGC, NGB, ND, Ileum, Colon, Rectum, top panel) or columnar cells from esophageal and Gastric IM tissue types (E-GM, BE-IM, BSCJ, NAG, CAG, GIM, CIM).

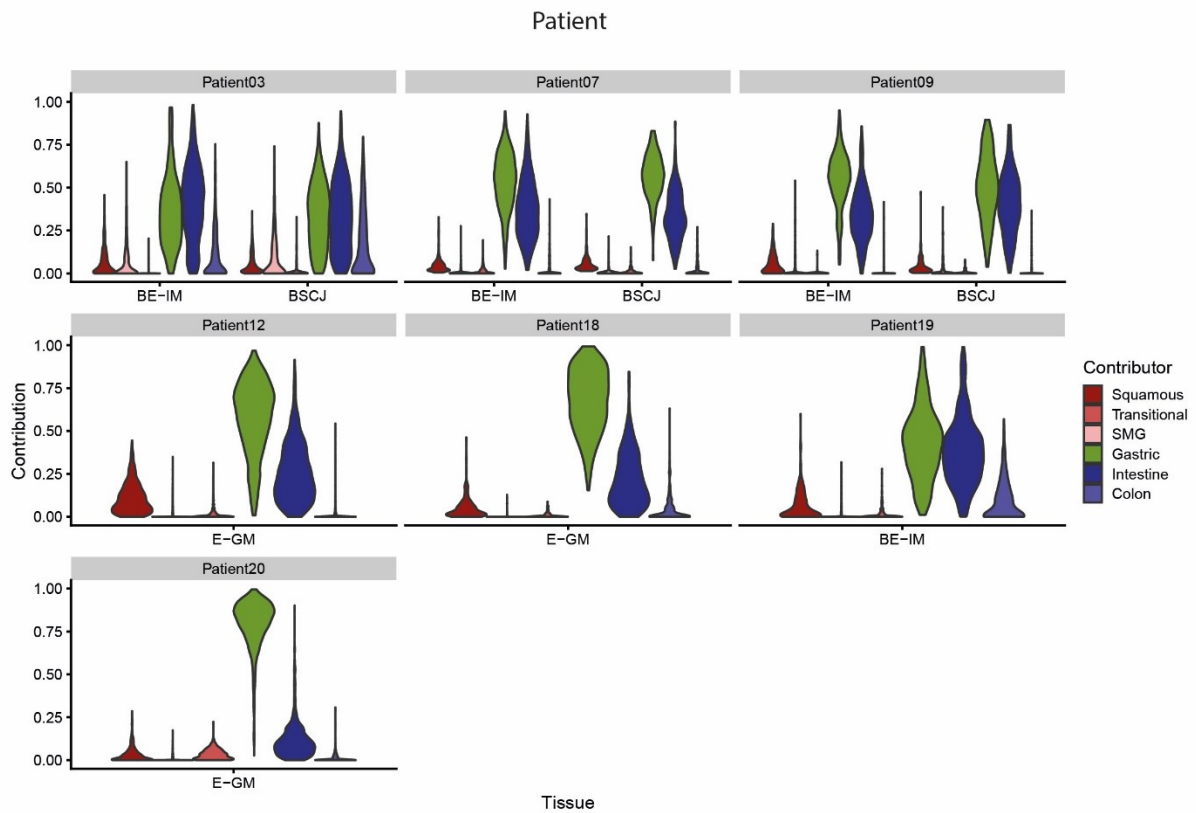
Abbreviation: NSCJ – normal squamo-columnar junction, NGC – normal gastric cardia, NGB – normal gastric body, ND – normal duodenum, BE-IM – Barrett’s esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE, CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.



**A**



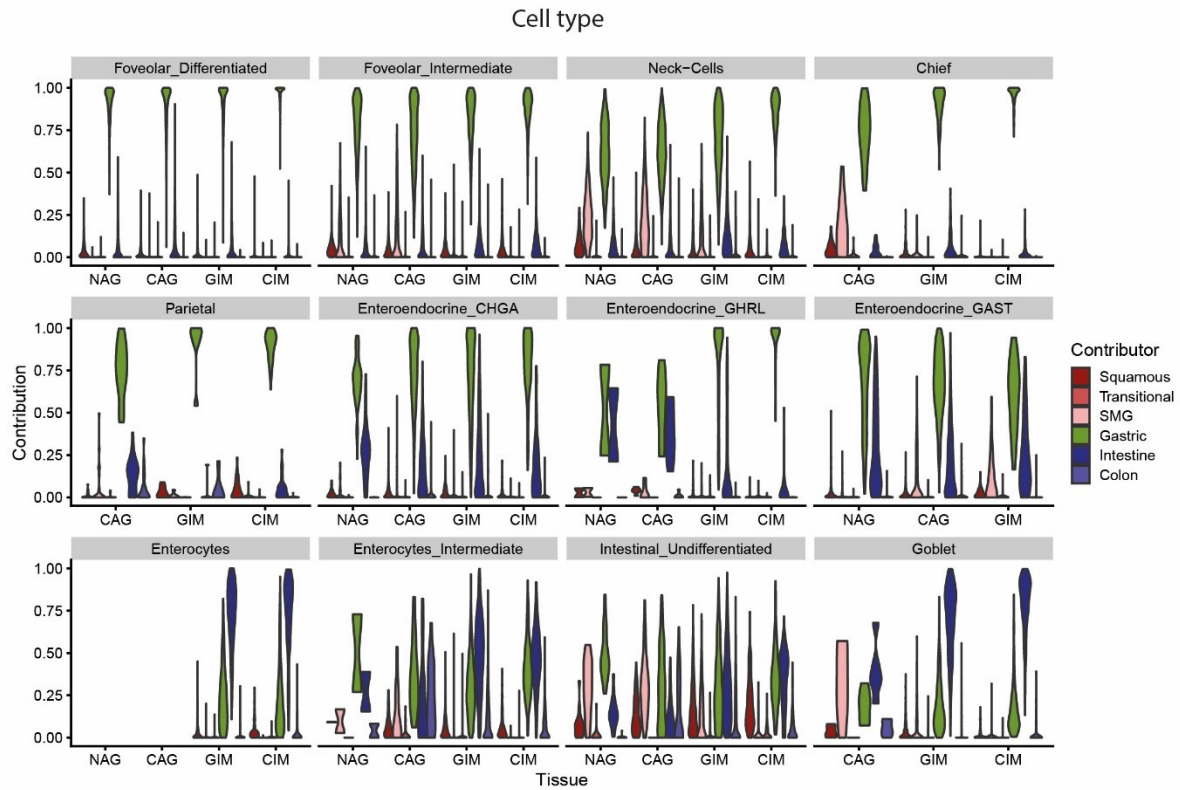
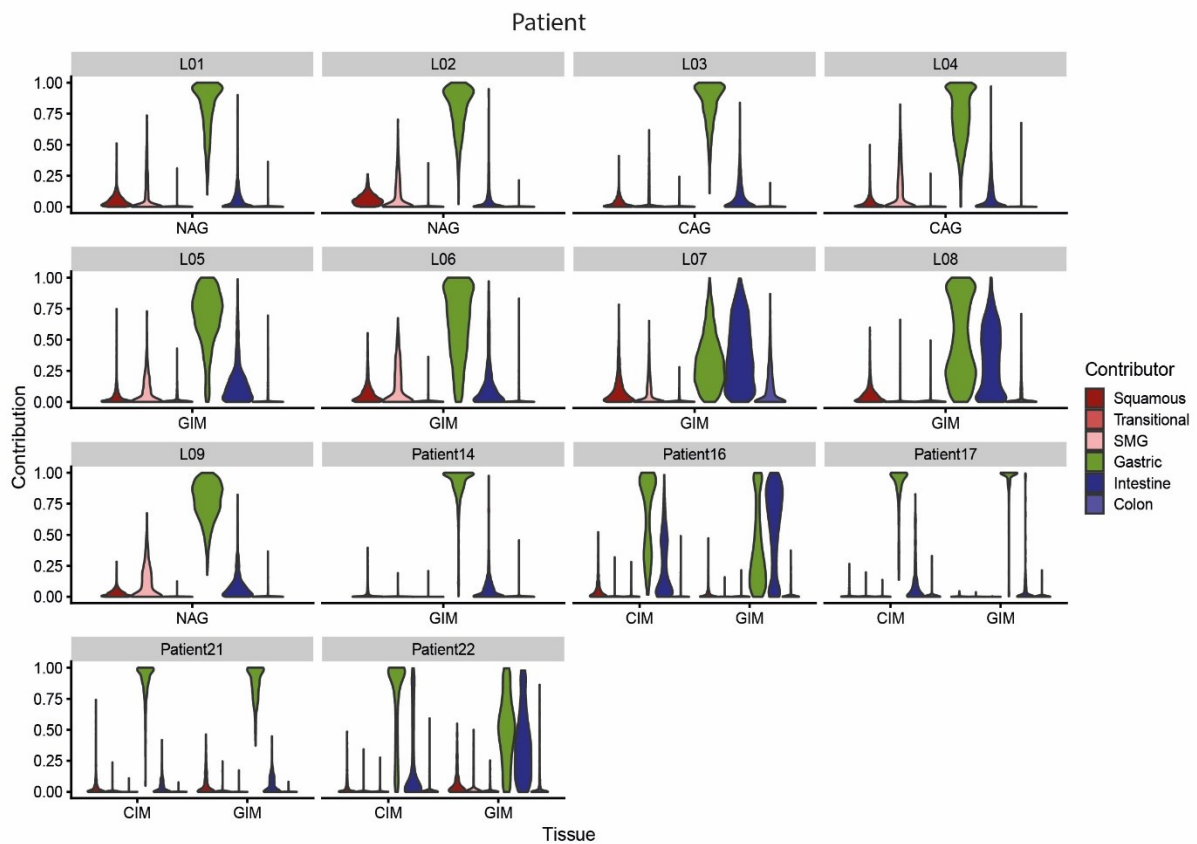
**B**



**Figure S14: Tissue contribution to esophageal IM samples stratified by cell type and patient**

Violin plot of MuSiC derived esophageal (squamous), SMG, Transitional, Gastric, Intestinal and Colonic phenotype contribution to columnar cells from esophageal IM tissue types (E-GM, BE-IM, BSCJ). Data is divided by cell type annotation using *louvain* method (A) or stratified by the patient (B).

Abbreviation: BE-IM – Barrett’s esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE.

**A****B**

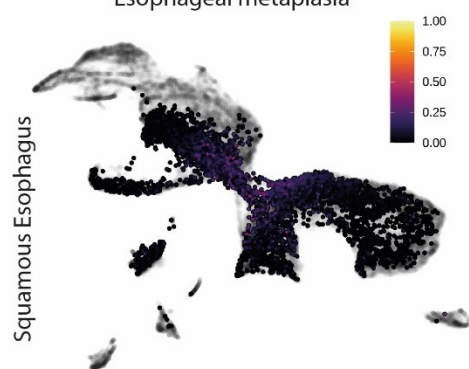
**Figure S15: Tissue contribution to stomach IM samples stratified by cell type and patient**

Violin plot of MuSiC derived esophageal (squamous), SMG, Transitional, Gastric, Intestinal and Colonic phenotype contribution to columnar cells from esophageal IM tissue types (NAG, CAG, GIM and CIM). Data is divided by cell type annotation using *louvain* method (A) or stratified by the patient (B).

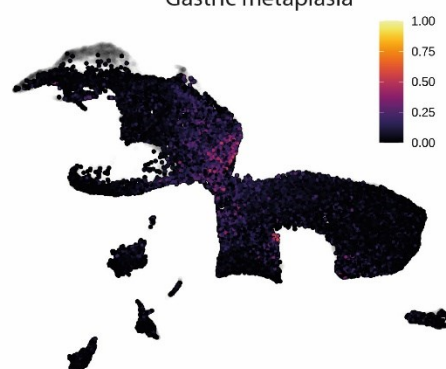
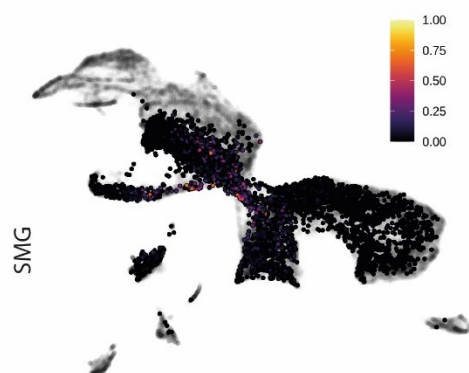
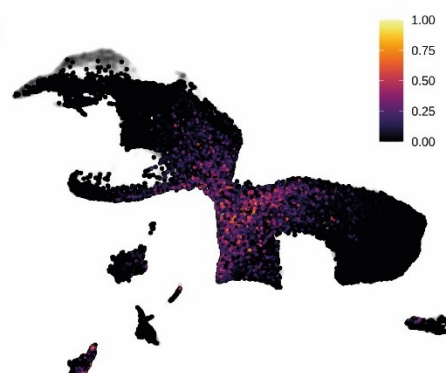
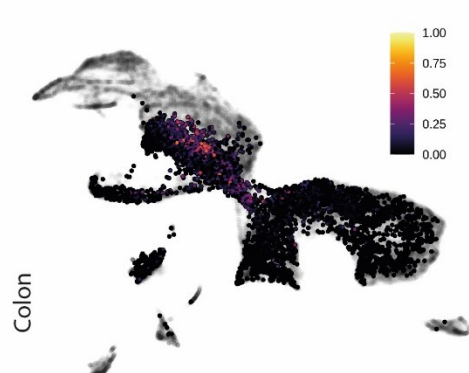
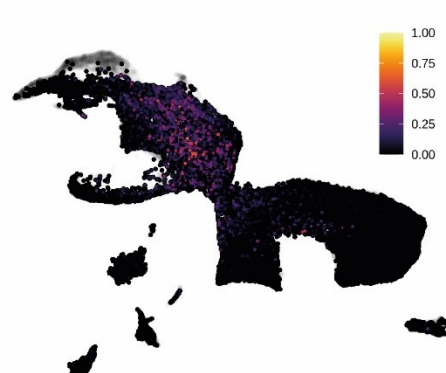
Abbreviation: CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.

**A**

Esophageal metaplasia

**B**

Gastric metaplasia

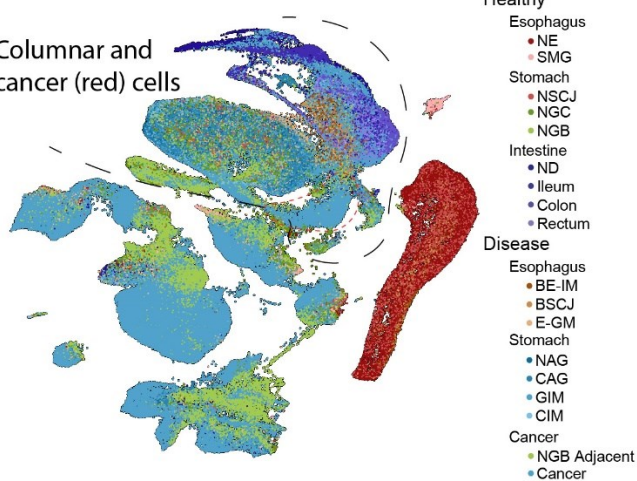
**C****D****E****F**

**Figure S16: Esophageal IM (E-GM and BE-IM) and Gastric IM (NAG, CAG, GIM, CIM) cell do not share features with squamous esophagus, SMG nor Colonic cell types.**

UMAP project of columnar cell types from esophageal IM (E-GM and BE-IM) (A, C, E) or gastric IM (NAG, CAG, GIM, CIM) (B, D, F) (same coordinates as figure 3A) with MuSiC derived contribution of squamous esophageal (A, B), SGM (C, D) or Colonic (E, F) phenotypes highlighted.

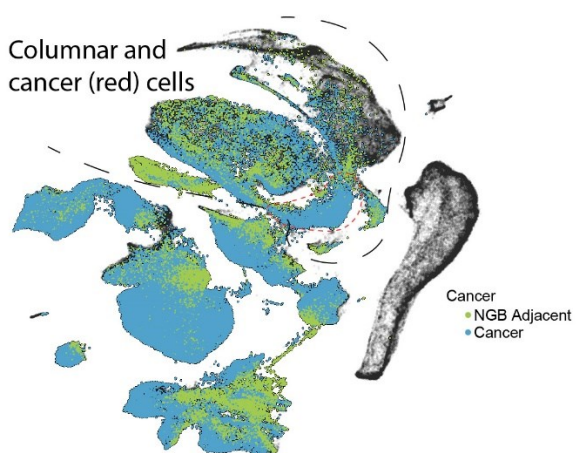
**A**

Columnar and cancer (red) cells



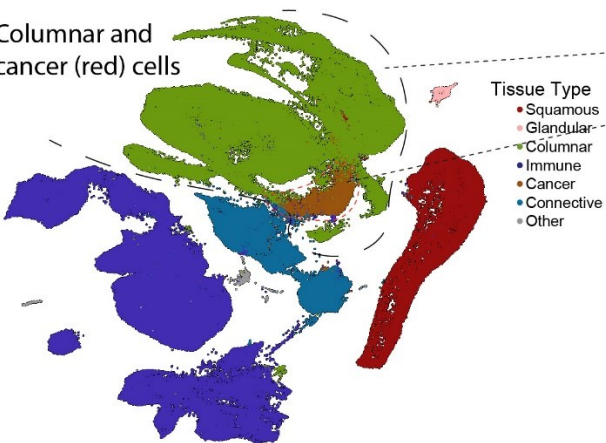
**B**

Columnar and cancer (red) cells

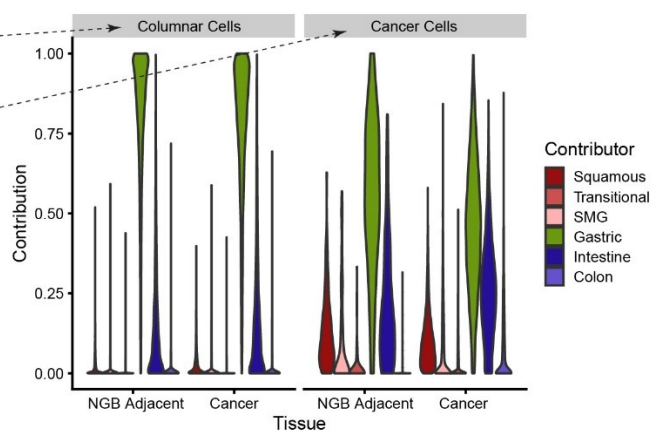


**C**

Columnar and cancer (red) cells



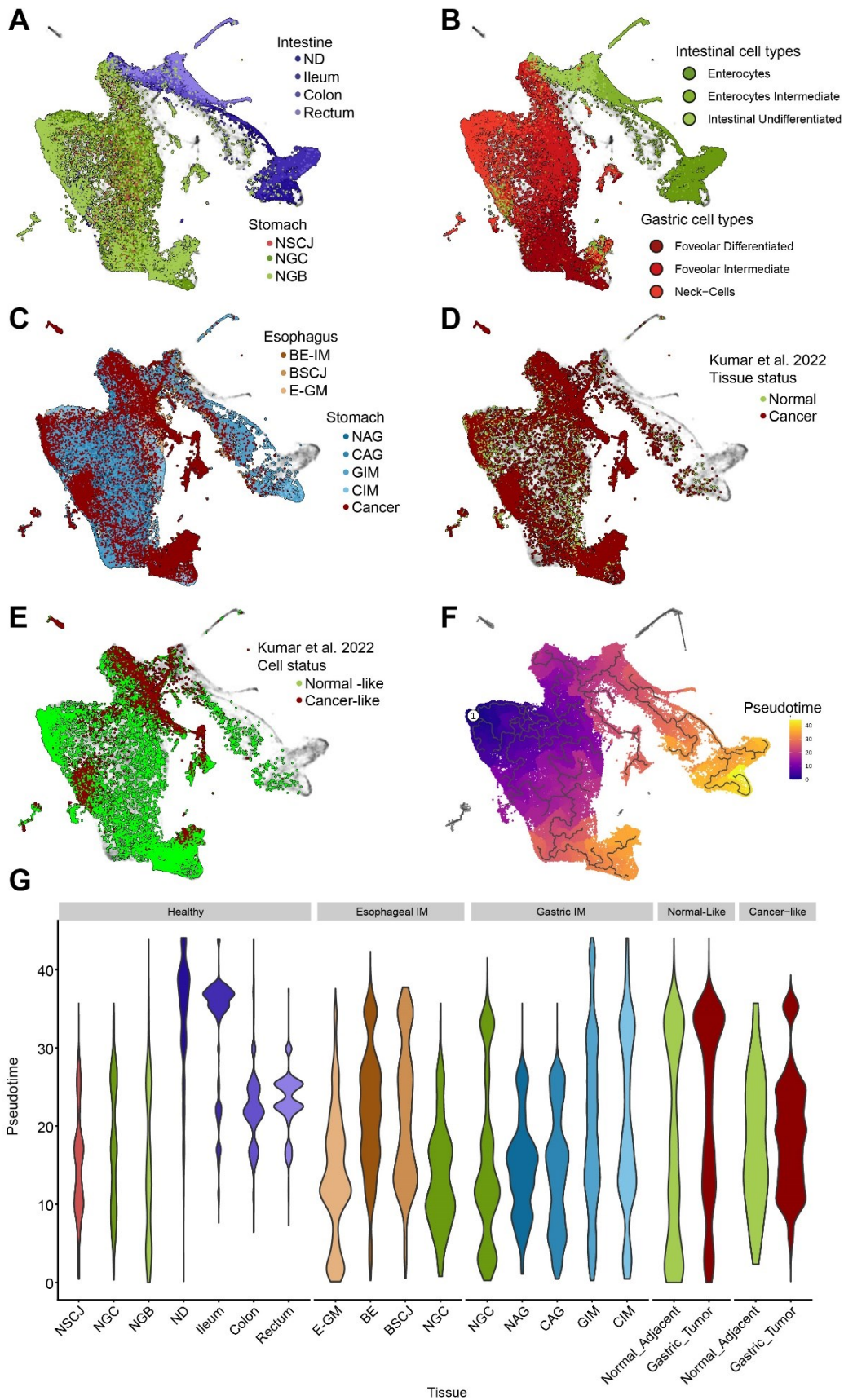
**D**



**Figure S17: Gastric cancer cells do not share features with squamous esophagus, SMG nor Colonic cell types.**

- A) UMAP of all cells from this study with cells obtained from normal gastric samples adjacent to gastric cancer and gastric cancer cells overlaid (Kumar et al. 2022)
- B) UMAP of normal gastric samples adjacent to gastric cancer and gastric cancer cells overlaid (Kumar et al. 2022). Only cells from Kumar et al 2022 are presented.
- C) UMAP of all cells from this study with cells obtained from normal gastric samples adjacent to gastric cancer and gastric cancer cells overlaid with global tissue type of cells indicated
- D) Violin plot of MuSiC-derived esophageal (squamous), SMG, Transitional, Gastric, Intestinal and Colonic phenotype contribution to columnar cells from normal cells adjacent to cancer or columnar cells from gastric cancer samples. Cell from each tissue type were split into Cancer like cells (brown cells in C) or columnar (non-cancer) like cells (green in C).



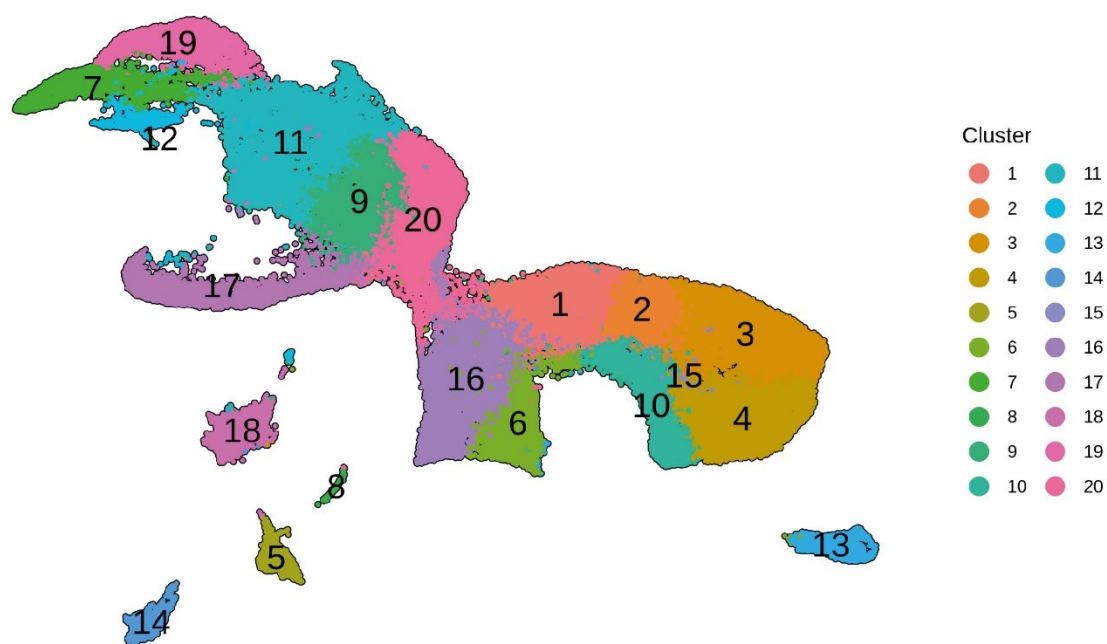


**Figure S18: *Monocle3* pseudotime analysis places esophageal and gastric intestinal metaplasia cells and gastric cancer cells between normal gastric and intestinal cells.**

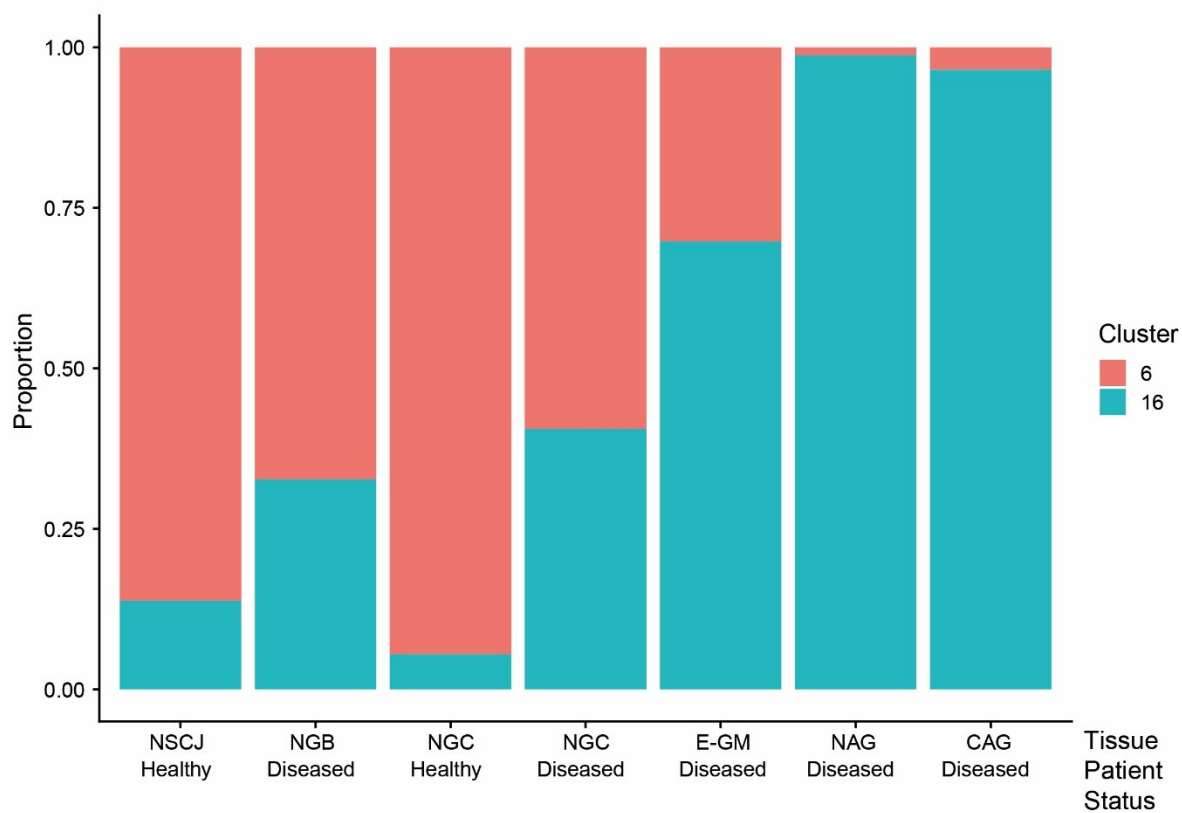
- A) UMAP of columnar cell types obtained using *monocle3* analysis. Only cells from normal tissue types are visualized and tissue types are indicated.
- B) UMAP of columnar cell types obtained using *monocle3* analysis. Only cells from normal tissue types are visualized and cell types are indicated.
- C) UMAP of columnar cell types obtained using *monocle3* analysis. Only cells from metaplastic and cancer tissue types are visualized and tissue types are indicated.
- D) UMAP of columnar cell types obtained using *monocle3* analysis. Only cells from Kumar et al 2022 study are indicated with sample annotation (normal adjacent to or cancer) indicated.
- E) UMAP of columnar cell types obtained using *monocle3* analysis. Only cells from Kumar et al 2022 study are indicated with cells showing properties of cancer cells indicated.
- F) *Monocle3* pseudotime trajectory of all columnar cells from normal and metaplastic tissues. Pseudotime trajectory was anchored at the gastric mucous-neck cells, most likely stem-like cells of normal gastric epithelium
- G) Violin plot of *monocle3* pseudotime trajectory with cells split into individual tissue types and segregated into healthy and esophageal or stomach IM groups. NGC samples were collected from healthy stomach or from endoscopically normal gastric tissue adjacent to BE or Gastric IM (hence it listed 3 time, depending on patient status).

Abbreviation: NSCJ – normal squamo-columnar junction, NGC – normal gastric cardia, NGB – normal gastric body, ND – normal duodenum, BE-IM – Barrett’s esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE, CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.

**A**



**B**

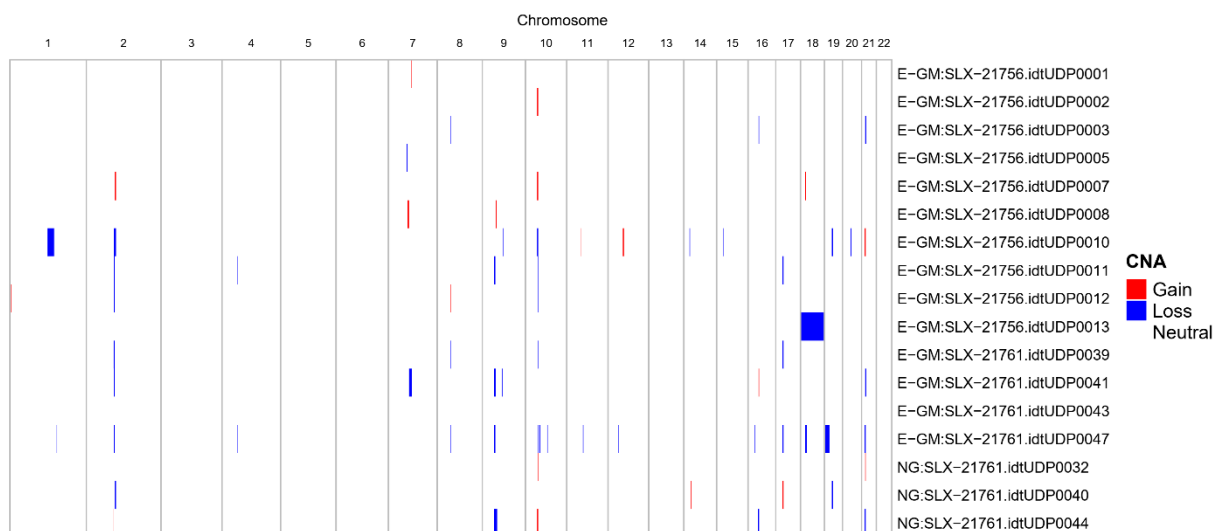


**Figure S19: Reclustering of columnar cells identifies a new subtype of Neck-like cells.**

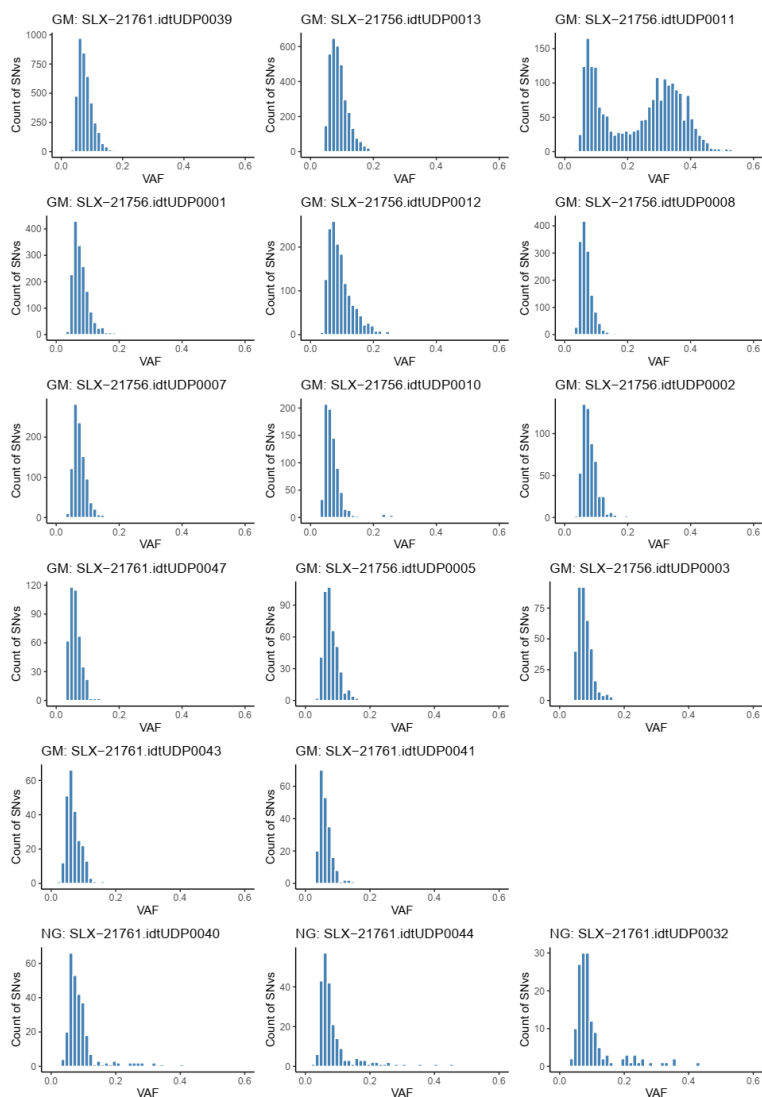
- A) UMAP of all columnar cell types (coordinates as in Fig. 3A) with clusters identified during the reclustering highlighted.
- B) Stack bar chart of contribution of neck-like cells that overlap cluster 6 and 16 to individual tissue types. For tissue that patient status could be identified, the tissue was split into healthy and disease states. NGB sample were adjacent to gastric cancer samples.

Abbreviation: NSCJ – normal squamo-columnar junction, NGC – normal gastric cardia, NGB – normal gastric body, E-GM – gastric metaplasia of esophagus, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.

**A**



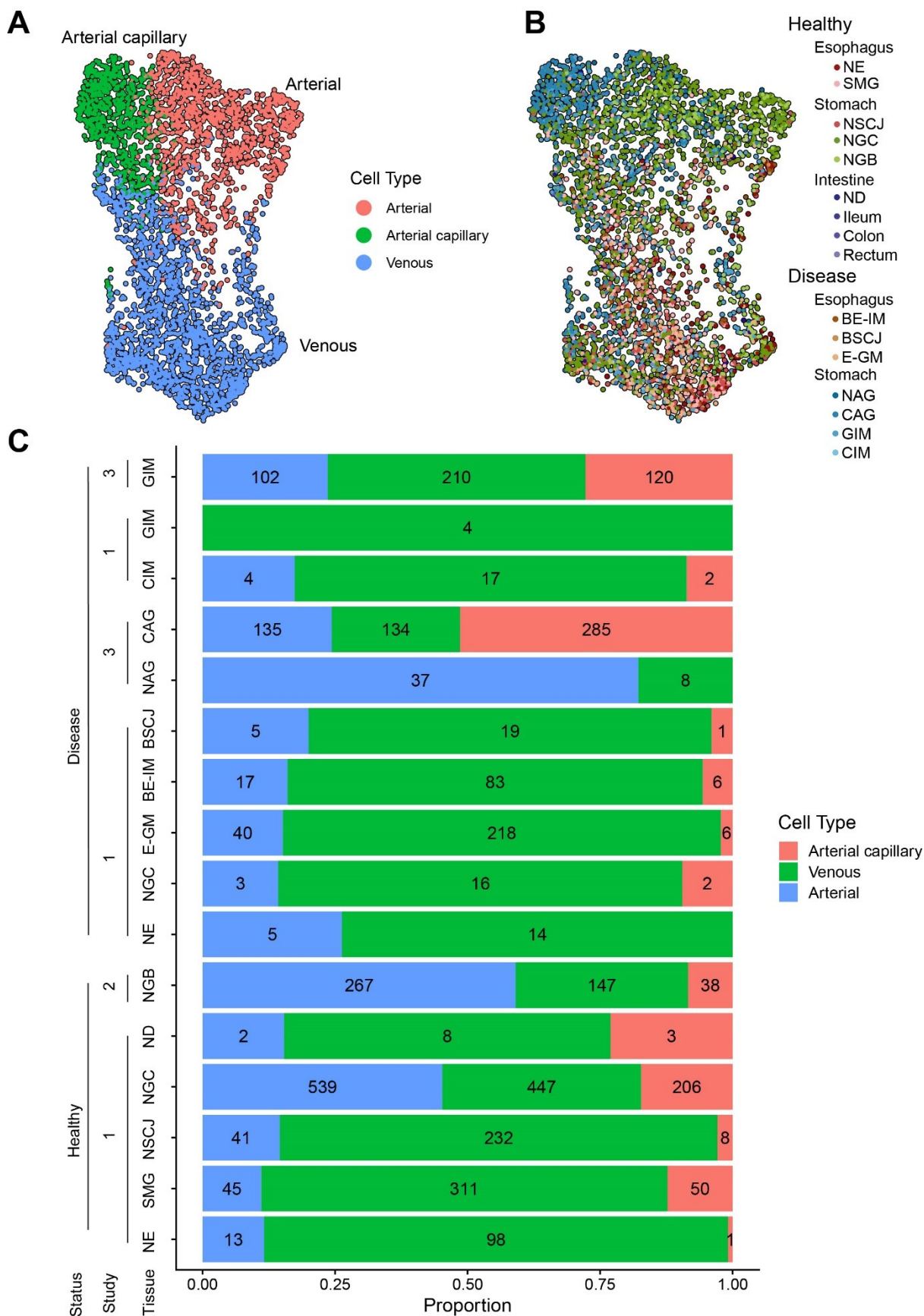
**B**



**Figure S20: Genetic changes detected in the esophagus with gastric metaplasia**

- A) Heatmap of copy number alterations identified in the esophagus with gastric metaplasia (E-GM) or normal gastric cardia (NG).
- B) Histograms of the distribution of variant allele frequency (VAF) in the esophagus with gastric metaplasia (GM) or normal gastric cardia (NG).

To retain privacy, individual samples are named after their library preparation barcodes.

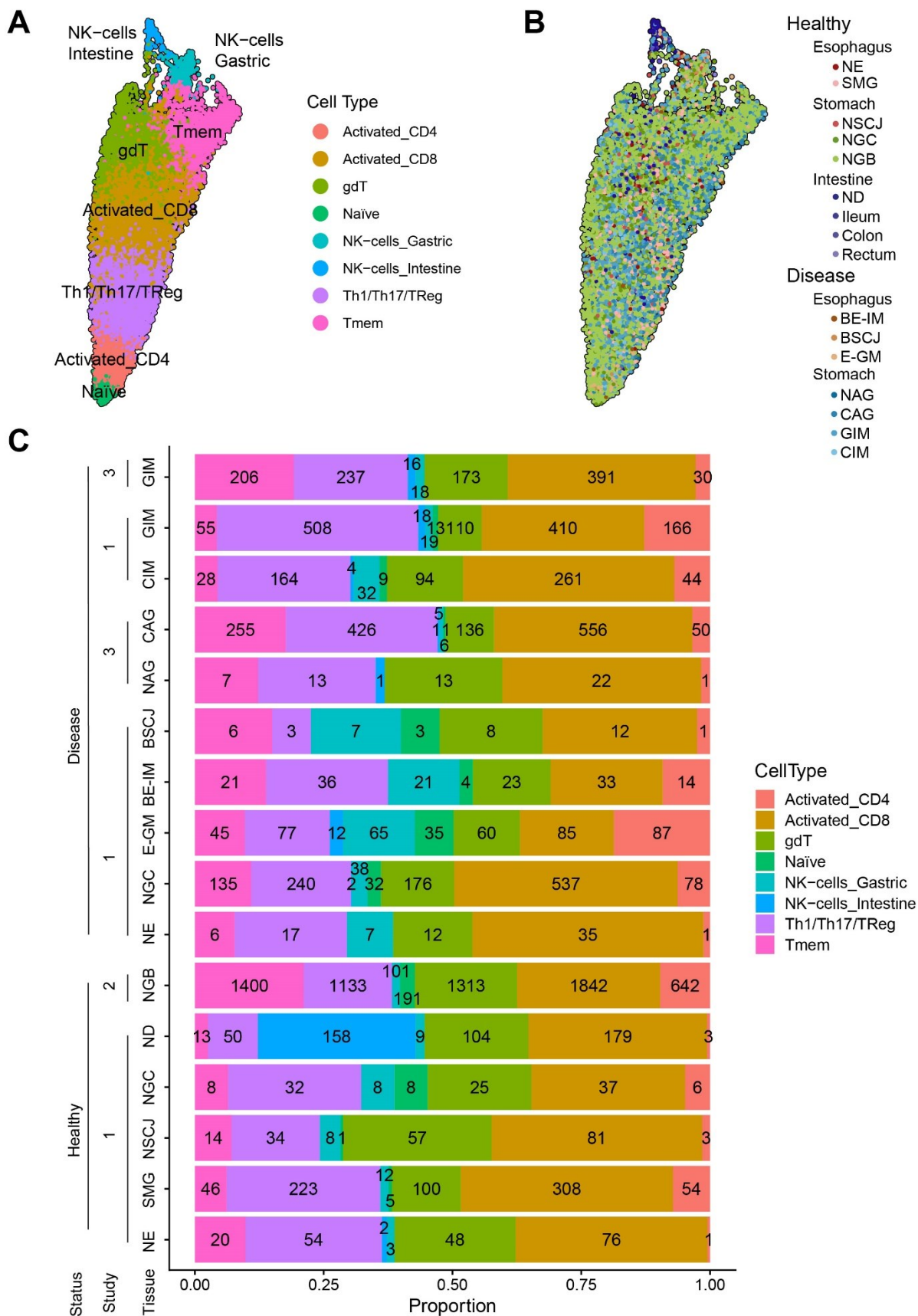


### Figure S21: Cell classification of endothelial cell types

- A) UMAP projection cell types identified within the endothelial cells
- B) UMAP projection with tissues of origin for the individual endothelial cell
- C) Contribution of endothelial cell types to cell counts from individual tissue types. The tissues originate from three studies: 1 – Nowicki-Osuch and Zhuang et al. and this study, 2 – Sathe et al. 3 – Zhang et al.. For tissue that patient status could be identified, the tissue was split into healthy and disease states. NGB sample were adjacent to gastric cancer samples.

Abbreviation: NE – Normal Esophagus, SMG – esophageal submucosal glands, NSCJ – normal squamo-columnar junction, NGC – normal gastric cardia, NGB – normal gastric body, ND – normal duodenum, BE-IM – Barrett’s esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE, CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.

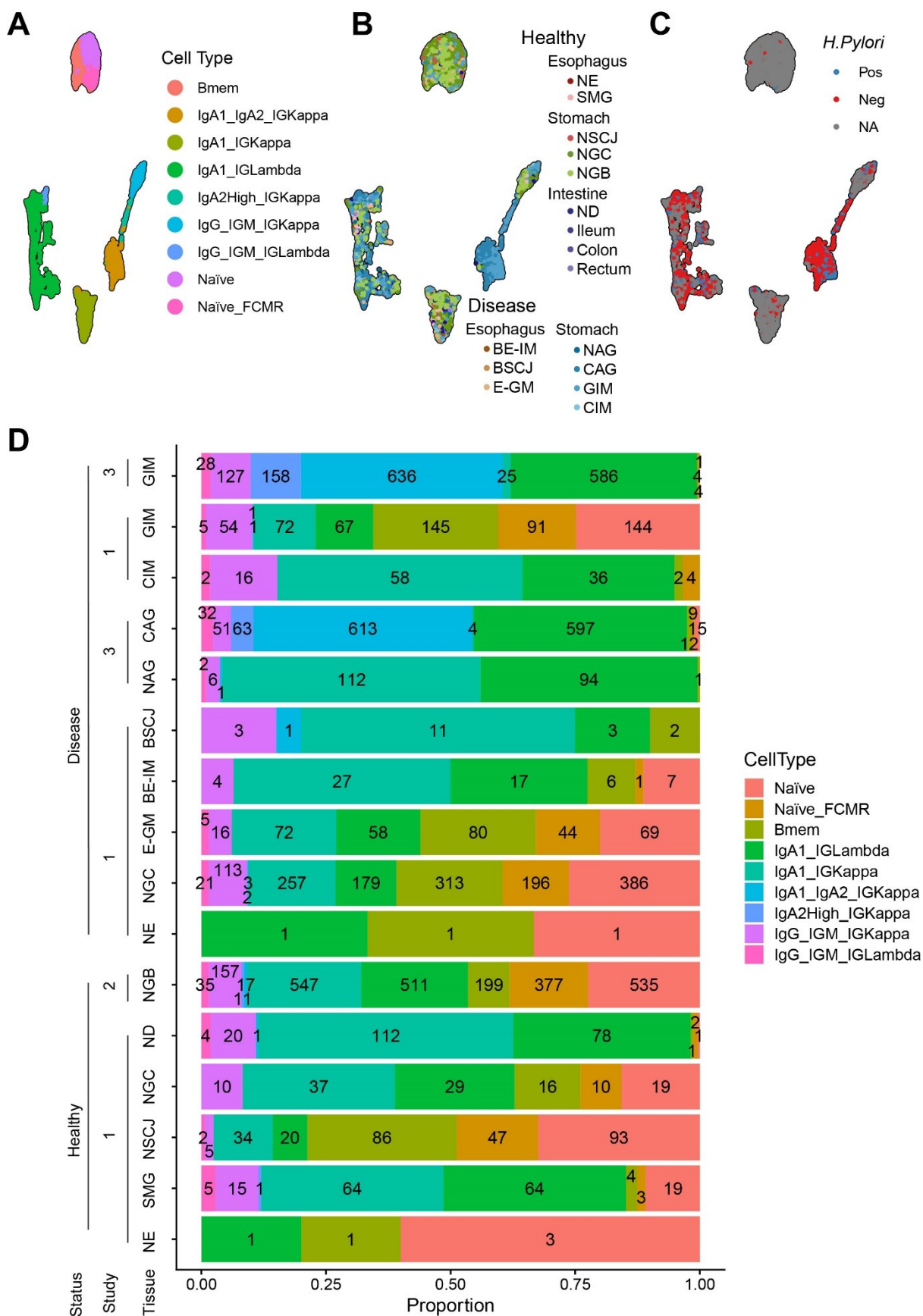




**Figure S22: Cell classification of T cell types**

- A) UMAP projection cell types identified within the T cells cluster
- B) UMAP projection with tissues of origin for the individual endothelial cell
- C) Contribution of endothelial cell types to cell counts from individual tissue types. The tissues originate from three studies: 1 – Nowicki-Osuch and Zhuang et al. and this study, 2 – Sathe et al. 3 – Zhang et al.. For tissue that patient status could be identified, the tissue was split into healthy and disease states. NGB samples were adjacent to gastric cancer samples.

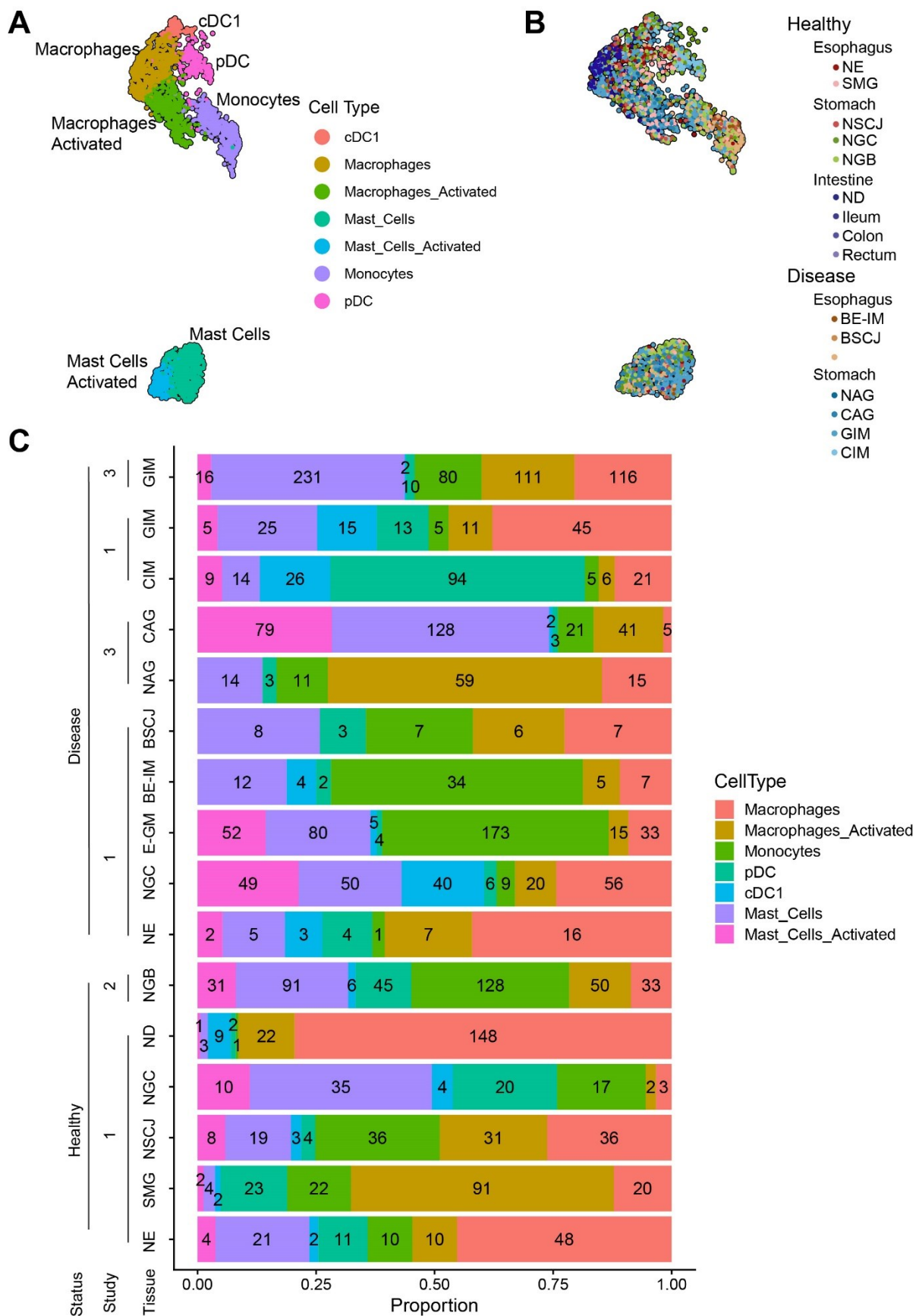
Abbreviation: NE – Normal Esophagus, SMG – esophageal submucosal glands, NSCJ – normal squamo-columnar junction, NGC – normal gastric cardia, NGB – normal gastric body, ND – normal duodenum, BE-IM – Barrett’s esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE, CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.



**Figure S23: Cell classification of B- and plasma cell types**

- A) UMAP projection cell types identified within the B- and plasma cell clusters
- B) UMAP projection with tissues of origin for the individual endothelial cell
- C) UMAP projection with *H.pylori* status (Pos – positive, Neg – negative, NA – data not available) overlay
- D) Contribution of endothelial cell types to cell counts from individual tissue types. The tissues originate from three studies: 1 – Nowicki-Osuch and Zhuang et al. and this study, 2 – Sathe et al. 3 – Zhang et al.. For tissue that patient status could be identified, the tissue was split into healthy and disease states. NGB samples were adjacent to gastric cancer samples.

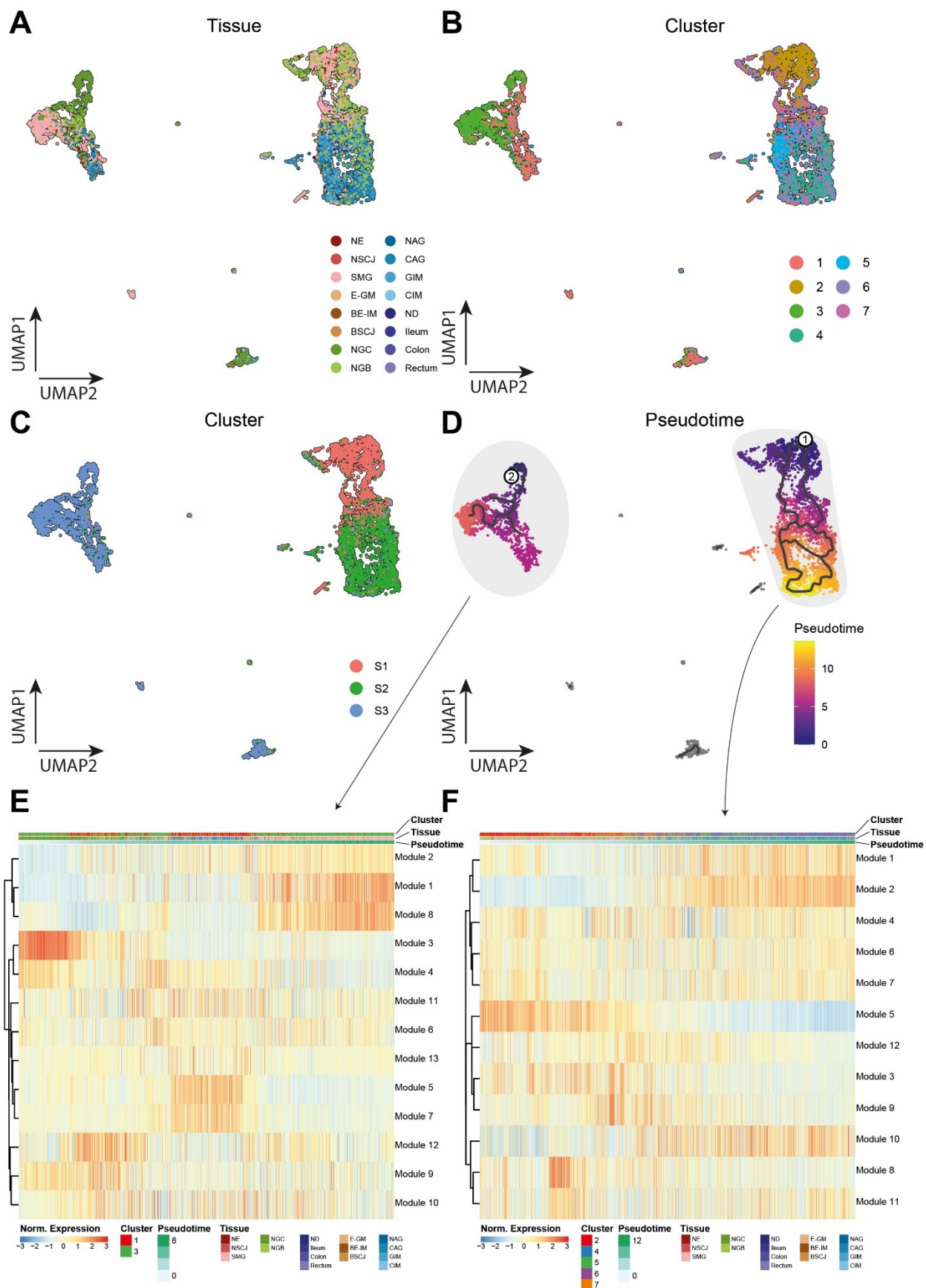
Abbreviation: NE – Normal Esophagus, SMG – esophageal submucosal glands, NSCJ – normal squamo-columnar junction, NGC – normal gastric cardia, NGB – normal gastric body, ND – normal duodenum, BE-IM – Barrett's esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE, CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.



**Figure S24: Cell classification of myeloid cell types**

- A) UMAP projection cell types identified within the myeloid cell clusters
- B) UMAP projection with tissues of origin for the individual endothelial cell
- C) Contribution of endothelial cell types to cell counts from individual tissue types. The tissues originate from three studies: 1 – Nowicki-Osuch and Zhuang et al. and this study, 2 – Sathe et al. 3 – Zhang et al.. For tissue that patient status could be identified, the tissue was split into healthy and disease states. NGB samples were adjacent to gastric cancer samples.

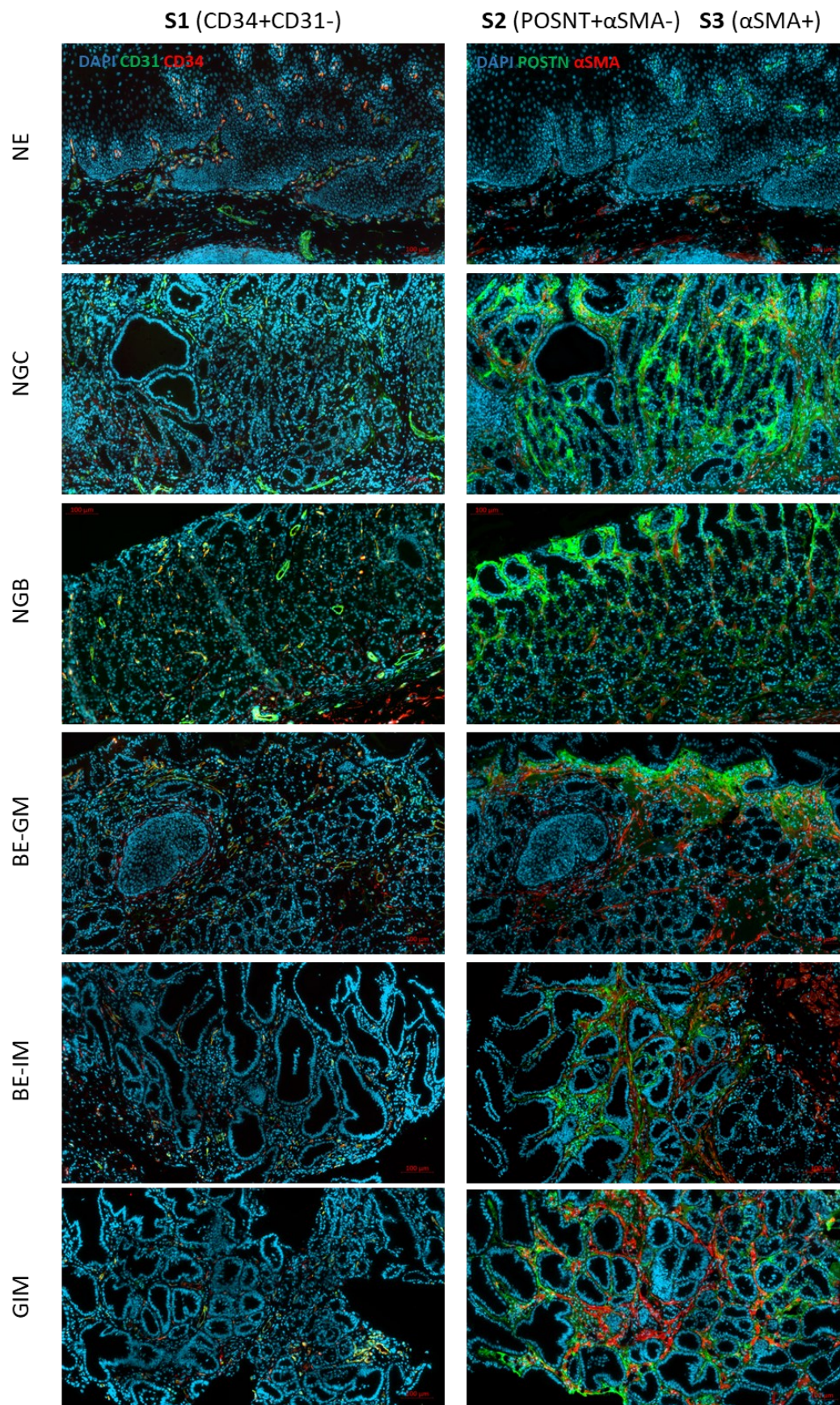
Abbreviation: NE – Normal Esophagus, SMG – esophageal submucosal glands, NSCJ – normal squamo-columnar junction, NGC – normal gastric cardia, NGB – normal gastric body, ND – normal duodenum, BE-IM – Barrett’s esophagus, E-GM – gastric metaplasia of esophagus, BSCJ – squamo-columnar junction between NE and BE, CIM – cardia intestinal metaplasia, GIM – gastric intestinal metaplasia, NAG – non-chronic atrophic gastritis, CAG – chronic atrophic gastritis.



**Figure S25: *Monocle3* pseudotime time analysis of stromal cell types**

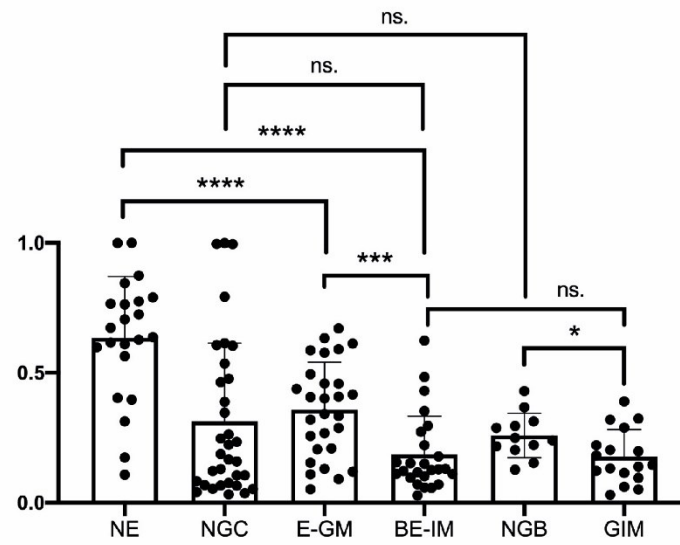
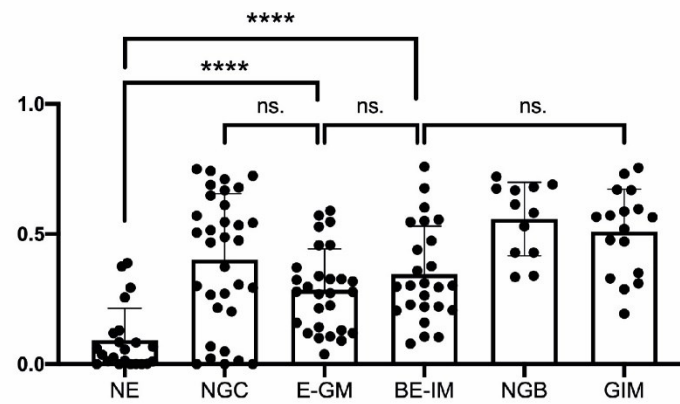
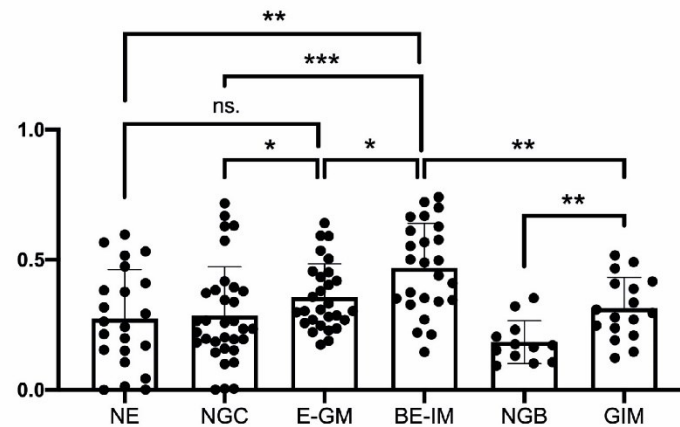
- A) UMAP of fibroblasts-like cells (cluster 13 on figure S1) with contribution of individual tissue types highlighted.
- B) UMAP of fibroblasts-like cells (cluster 13 on figure S1) with fibroblast specific clusters highlighted.
- C) UMAP of fibroblasts-like cells (cluster 13 on figure S1) with manually annotated cell types derived from Davidson et al.
- D) UMAP of fibroblasts-like cells (cluster 13 on figure S1) with *monocle3* pseudotime overlay. The trajectories were fixed at the extreme of S1 cell population (for S1-S2 trajectory) and at the normal gastric terminus of S3 trajectory.
- E) Heatmap of normalized expression values for gene modules identified in the S3 trajectory. The cells are ordered by pseudotime value from D.
- F) Heatmap of normalized expression values for gene modules identified in the S1-S2 trajectory. The cells are ordered by pseudotime value from D.





**Figure S26: Immunofluorescent staining of S1 (CD34+CD31-), S2 (POSTN+aSMA-) and S3 (aSMA+) fibroblasts.**

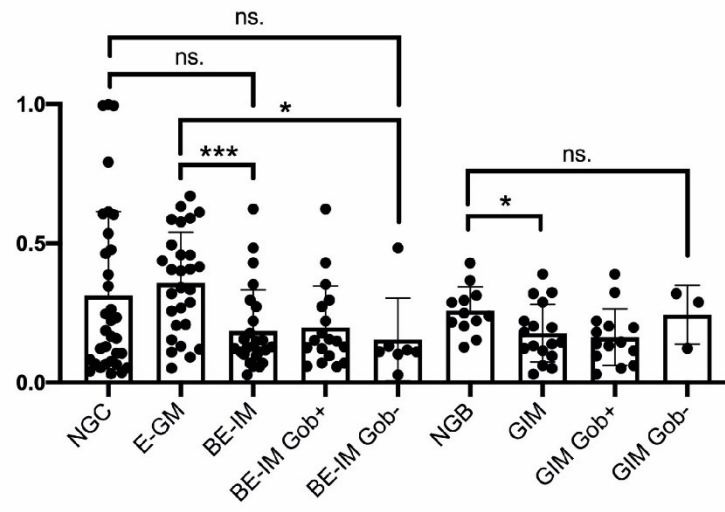
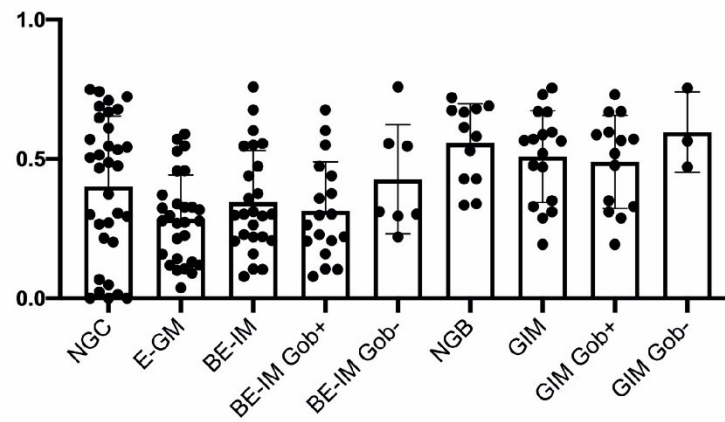
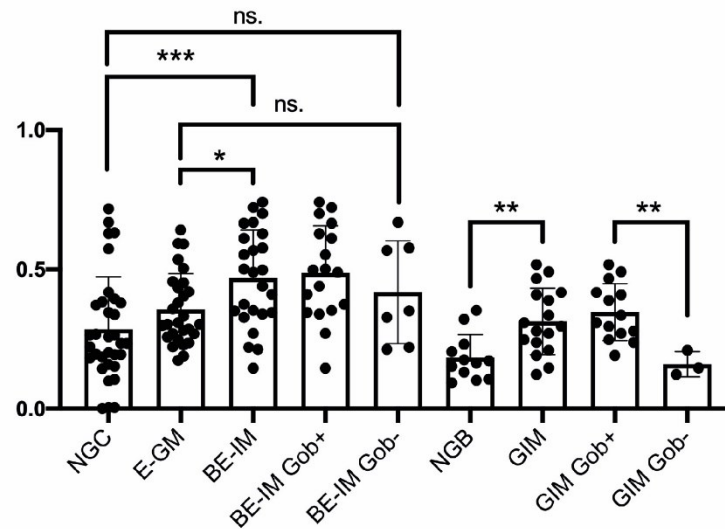
NE, NGC and NGB samples for immunofluorescence were from disease-free organ donors. NGC was defined as the immediate 3 mm long mucosa area adjacent to the Z-line; NGB was defined as the gastric mucosa that 3 to 5 cm away from the Z-line. NE – normal esophagus, NGC – normal gastric cardia, NGB – normal gastric body, E-GM – esophagus with gastric metaplasia, BE-IM – Barrett's esophagus with intestinal metaplasia, GIM – gastric intestinal metaplasia

**A****S1 proportion in total S1+S2+S3****B****S2 proportion in total S1+S2+S3****C****S3 proportion in total S1+S2+S3**

**Figure S27: Proportion of each subtype in total S1/S2/S3 fibroblasts derived from immunofluorescent staining of E-GM, BE-IM and GIM.**

- A) Proportion of S1 populations in total S1/S2/S3 count of fibroblasts
- B) Proportion of S2 populations in total S1/S2/S3 count of fibroblasts
- C) Proportion of S3 populations in total S1/S2/S3 count of fibroblasts

Statistical analysis was performed using Mann Whitney two-tailed test: \*\*\*\*:  $p < 0.0001$ ; \*\*\*:  $p < 0.001$ ; \*\*:  $p < 0.01$ ; \*:  $p < 0.05$ ; n.s. – not significant

**A****S1 proportion in total S1+S2+S3****B****S2 proportion in total S1+S2+S3****C****S3 proportion in total S1+S2+S3**



**Figure S28: Proportion of each subtype in total S1/S2/S3 fibroblasts derived from immunofluorescent staining of E-GM, BE-IM, and GIM in the context of goblet cells**

- A) Proportion of S1 populations in total S1/S2/S3 count of fibroblasts
- B) Proportion of S2 populations in total S1/S2/S3 count of fibroblasts
- C) Proportion of S3 populations in total S1/S2/S3 count of fibroblasts

BE-IM Gob+: biopsies from BE-IM segment, in which goblet cells are present; BE-IM Gob-: biopsies from BE-IM segment, in which goblet cells are absent; GIM Gob+: biopsies from GIM patient, in which goblet cells are present; GIM Gob-: biopsies from GIM patient, in which goblet cells are absent. Statistical analysis was performed using Mann Whitney two-tailed test: \*\*\*\*:  $p < 0.0001$ ; \*\*\*:  $p < 0.001$ ; \*\*:  $p < 0.01$ ; \*:  $p < 0.05$ ; n.s. not significant