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| **Table S8.** Association between maternal age, infections during pregnancy, birth weight, and mode of delivery, respectively, and neonatal concentrations of inflammatory markers. The reported estimates correspond to percentage changes in the inflammatory markers with increasing maternal age, exposure to maternal infection or antimicrobial prescription during pregnancy vs. no infection/prescription, increasing birth weight (in 500-g intervals), and among children born by cesarean section vs. vaginal delivery, respectively | | | | | | | | | | | | | | | |
|  | **Maternal age** | |  | **Maternal hospital contact due to infection**  **during pregnancy**  **(yes vs. no)e** | |  | **Maternal antimicrobial prescription**  **during pregnancy**  **(yes vs. no)e** | |  | **Birth weight** | |  | **Mode of delivery**  **(C-section vs. vaginal)e** | |
|  | Percentage change  (95% CI) | p-valuea |  | Percentage change  (95% CI) | p-valuea |  | Percentage change  (95% CI) | p-valuea |  | Percentage change  (95% CI) | p-valuea |  | Percentage  change  (95% CI) | p-valuea |
|  |  | 0.14 |  |  | 0.21 |  |  | 0.85 |  |  | 0.54 |  |  | 0.10 |
| IL-6b | 1.4 (-1.0–3.9) |  |  | -7.7 (-39.1–40.1) |  |  | 8.4 (-12.7–34.6) |  |  | 5.3 (-16.4–32.6) |  |  | 12.6 (-22.6–63.8) |  |
| sIL-6Rα | -1.1 (-2.0– -0.1) |  |  | 0.9 (-14.7–19.3) |  |  | 0.4 (-8.0–9.6) |  |  | -5.1 (-13.4–4.1) |  |  | 2.5 (-11.7–19.1) |  |
| IL-8 | 0.1 (-0.8–1.1) |  |  | 11.0 (-6.0–31.2) |  |  | 1.2 (-7.2–10.5) |  |  | 1.8 (-7.1–11.6) |  |  | 14.3 (-1.5–32.6) |  |
| IL-12 | 0.7 (-0.2–1.5) |  |  | 8.9 (-5.9–25.9) |  |  | 1.7 (-5.8–9.7) |  |  | 6.2 (-2.0–15.0) |  |  | 4.5 (-8.2–19.0) |  |
| IL-17c | -0.7 (-2.5–1.2) |  |  | 5.2 (-26.4–50.6) |  |  | 2.9 (-12.9–21.6) |  |  | -0.6 (-16.7–18.6) |  |  | 1.8 (-23.8–35.8) |  |
| IL-18 | -0.1 (-1.4–1.2) |  |  | -24.7 (-40.2– -5.1) |  |  | 0.1 (-11.4–13.1) |  |  | 6.9 (-6.0–21.5) |  |  | 9.1 (-11.4–34.4) |  |
| TGF-β1 | -0.6 (-1.5–0.3) |  |  | 1.9 (-13.1–19.5) |  |  | 0.2 (-7.8–9.0) |  |  | 0.1 (-8.3–9.3) |  |  | 9.6 (-4.9–26.3) |  |
| MCP-1 | 0.1 (-0.6–0.8) |  |  | 0.8 (-11.1–14.2) |  |  | -0.4 (-6.7–6.4) |  |  | -1.7 (-8.3–5.3) |  |  | -7.0 (-16.8–4.0) |  |
| CRP | -0.5 (-2.6–1.7) |  |  | -12.9 (-40.4–27.3) |  |  | 6.0 (-13.0–29.2) |  |  | 29.7 (5.5–59.5) |  |  | -24.6 (-46.2–5.5) |  |

CI, confidence interval; CRP, C-reactive protein; C-section, caesarean section; IL, interleukin; MCP, monocyte chemotactic protein; sIL-6R, IL-6 soluble receptor; TGF, transforming growth factor.

Linear regression models with log-transformed concentrations of inflammatory markers as the outcomes, maternal age and birth weight as continuous exposures, and maternal infection during pregnancy and mode of delivery as binary exposures, adjusted for birth year (continuous), patient/control status, and day after birth of neonatal blood spot sampling (continuous).

a Multivariate analysis of variance p-value for joint tests, excluding children with any missing concentrations (n=53, leaving n=269 for analysis).

b Excluding children with missing IL-6 concentrations (n=24, leaving n=298 for analysis).

d Excluding children with missing IL-17 concentrations (n=31, leaving n=291 for analysis).

e The analyses of maternal hospital contact due to infection, antimicrobial prescriptions during pregnancy, and cesarean section included n=22, n=116, and n=28 events, respectively, in analysis of all other markers than IL-6 and IL-17; n=20, n=105, and n=25 events, respectively, in analysis of IL-6; and n=16, n=107, and n=25 events, respectively, in analysis of IL-17.