

Appendix 1 to: Henning D, Lüno M, Jiang C, et al. Gut–brain axis volatile organic compounds derived from breath distinguish between schizophrenia and major depressive disorder. *J Psychiatry Neurosci* 2023. doi: 10.1503/jpn.220139. Copyright © 2023 The Author(s) or their employer(s). To receive this resource in an accessible format, please contact us at cmajgroup@cmaj.ca. Online appendices are unedited and posted as supplied by the authors.

Title: Gut-brain axis volatile organic compounds derived in breath separate schizophrenia and major depressive disorder

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Supplemental Text

Supplemental Methods

Breath gas analysis

To observe the VOCs contained in the subjects' breath gas, Proton-Transfer-Reaction Mass Spectrometry (PTR-MS) was used as a diagnostic tool. PTR-MS uses pre-generated hydronium ions (H_3O^+) to transfer their protons to the desired trace component in the examined gas sample as they react with one another in a designed reaction drift tube [1]. The proton transfer yields ionized products which are subsequently mass analyzed via mass spectrometry using a quadrupole mass analyzer which separates the ions based on their mass to charge ratio (m/z) and transfers them onto a detector for registration [1].

Similar to other established breath gas analysis tests such as the breathalyzer, which deduces a subject's blood alcohol level via the ethanol present in their breath gas and is commonly applied by law enforcement as well as in the medical field, PTR-MS also employs a non-invasive, apparatus-based technique. Subjects' breath samples were collected via Tedlar® bags, which are specific sample devices to collect VOCs and permanent gases. Breath gas probes were taken at awakening, after 30 min, and after 60 min. Since breath gas analysis of some VOCs such as isoprene is dependent on respiratory physiology, a standard procedure was used [1]. All subjects sat quietly for one minute. Then after two minutes of a controlled paced breath rhythm (with a normal RR of 10–12/min), they switched to a spontaneous rhythm and then started breath sampling as recommended by recent methodological work [1].

The samples could then easily be transferred from the Tedlar bags to the sample inlet of the mass spectrometer via a lockable valve installed in the bag through which the gas samples were also collected from the subjects. Upon collection, the breath samples would have a maximum storage life of 10 hours, which meant that they would have to be analyzed on the same day they were collected [2]. All samples were therefore analyzed in the morning right after collection so no breath sample would be stored longer than 4 hours. In order to prevent any spoiling of the samples, all subjects were asked to refrain from any form of extended physical

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activity including brushing their teeth, working out, eating and drinking anything but water over the 1-hour timespan in which the samples were collected. After the initial baseline inspection, a two-week follow-up appointment was arranged in which the sampling process was repeated.

Selection of VOCs for analysis

While the overall constitution and functional interaction of the human exhalome are still in the process of being deciphered, several key metabolites have already been identified as part of exhaled breath including isoprene, methanol, acetone, urea and free fatty acids [3, 4]. Most of these compounds, however, have yet to be linked to psychiatric diseases or cerebral metabolism in general. Based on previous studies examining breath gas, 35 VOCs corresponding to known organic compounds were preselected to be analyzed [5]. This included several known VOCs such as isoprene, acetone, 2-pentanone, acetic acid and ethanol, all of which have been previously investigated in real time measurements by PTR-MS (see supplemental table 1). Known exogenous compounds, especially those associated with smoking such as benzene, styrene, toluene and acetonitrile, were excluded from further analysis [6].

Recent literature with identified VOCs from human breath gas analyses was used to preselect the VOCs analyzed in this study [3, 4, 7-19].

Supplemental Discussion

M/z 88 has been linked to several isotopes such as N-ethyl-acetamide, N-methyl-propanamide, pentanamine and N,N-dimethyl-acetamide [20]. Most notably, N,N-dimethyl-acetamide has been described by previous studies as a pollutant from the Tedlar bag material [21] and thus a reduction of this mass could point to a shorter time between breath sampling and measurement in patients. This would, however, not explain why the other masses were reduced in patients as well and why differential effects are seen in patients with schizophrenia. Generally, a prolonged storage time in the bags should amount to a higher loss of substance, although the sample concentration is usually very stable over the first 10 hours [2].

Moreover, the fact that a standardized procedure was used and no difficulties were reported by any participant makes this unlikely. It can therefore not be ruled out that m/z 88 does underline a more specific pulmonary function as it has, for example, been found to be elevated in empyema patients [22].

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The second marker related to schizophrenia is m/z 74. Mass m/z 74 can be related to protonated methylguanidine, a guanidine compound, and can be synthesized from creatine and creatinine [23]. Although it might reflect creatine metabolism, methylguanidine was also found to be highly dependent on the diet, e.g. boiled beef and fish [24]. M/z 74 might also correspond to N-butylamine, which naturally occurs in some fruits, but is also used as a key ingredient in a variety of industrial and food products and even in the production of pharmaceuticals [25]. Despite its industrial abundance, the exact metabolism of N-butylamine remains relatively unknown. In this investigation we found a reduction of m/z 74 levels in breath samples of patients with schizophrenia, making it unlikely to be a byproduct of medication, as it should then be increased. Thus, dietary habits are more likely relevant for this reduction.

Supplemental Table 1 Preselected VOCs for analysis

NH ₃	Ammonia	18
CH ₂ CO	Ketene	31
O ₂	Oxygen	32
H ₂ S	Hydrogen Sulfide	35
H ₂ O	Water	19
C ₂ H ₃ N	Acetonitrile	42
CO ₂	Carbon Dioxide	45
C ₂ H ₄ O	Acetaldehyde	45
CH ₂ O ₂	Formic Acid	47
C ₂ H ₅ OH	Ethanol	47
C ₃ H ₄ O	Acrolein	57
(CH ₃) ₂ CO	Acetone	59

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N(CH ₃) ₃	Trimethylamine	60
CH ₃ COOH	Acetic Acid	61
C ₃ H ₈ O	Isopropanol	61
CH ₃ CH ₂ SH	Ethanethiol	63
C ₅ H ₆	Cyclopentadien	67
C ₄ H ₄ O	Furan	69
C ₅ H ₈	Isoprene	69
C ₄ H ₆ O	Crotonaldehyde	71
C ₅ H ₁₀	Penten	71
C ₄ H ₈ O	Butanone	73
CH ₃ (CH ₂) ₃ NH ₂	N-Butylamine	74
C ₆ H ₆	Benzol	79
C ₄ H ₆ O ₂	γ-Butyrolactone	87
C ₅ H ₁₀ O	2- Pentanone	87
C ₄ H ₈ S	Tetrahydrothiophen	89
C ₄ H ₈ O ₂	Ethylacetate	89
CH ₃ CH ₂ CH ₂ CO ₂ H	Butyric Acid	90
C ₄ H ₁₀ S	2- Butanethiol	91
C ₇ H ₈	Toluol	93

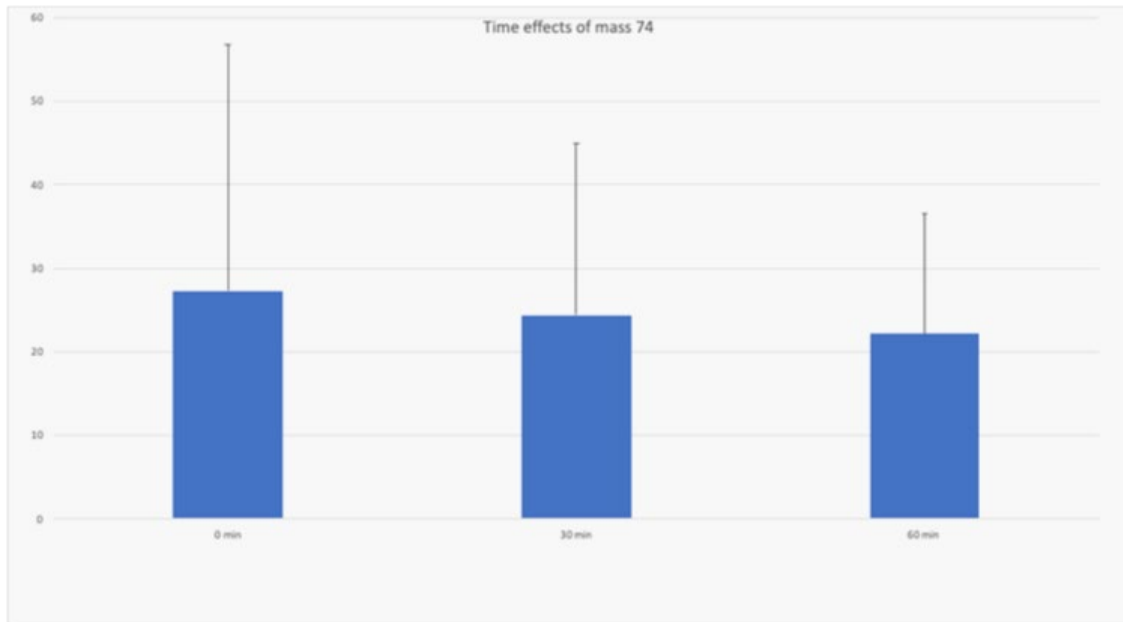
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C ₆ H ₆ O	Phenol	95
C ₅ H ₈ O ₂	Acetylacetone	101
C ₆ H ₁₂ O	Hexanal	101
C ₁₀ H ₁₆	Adamantan	137

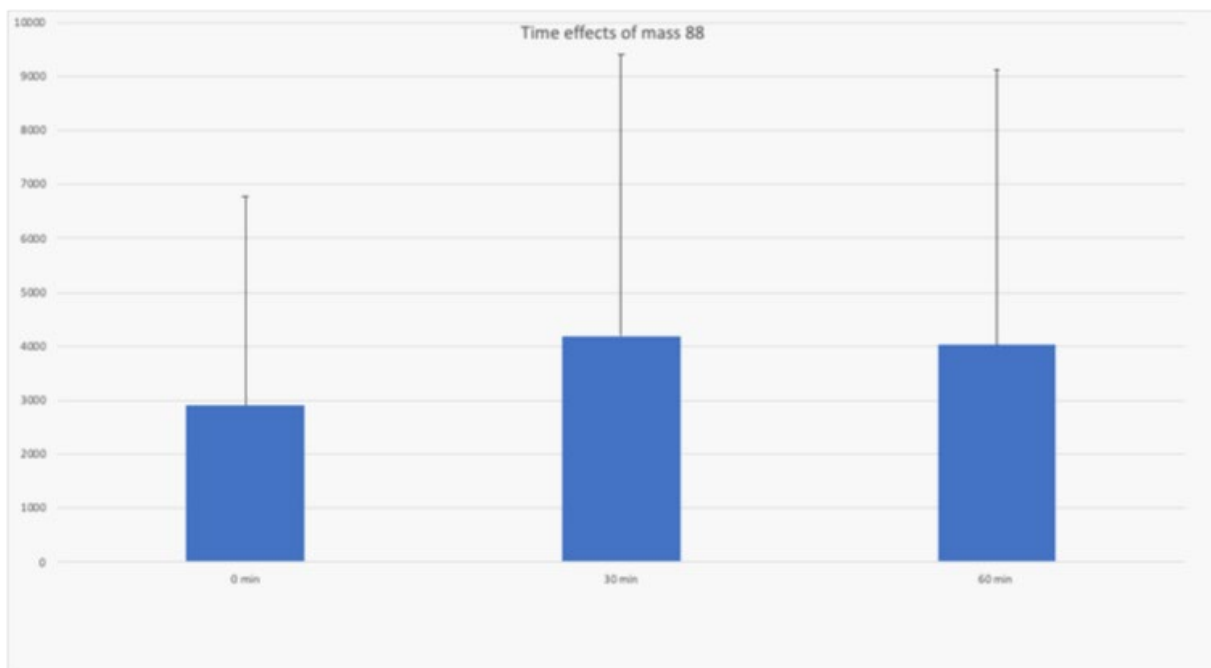
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Supplemental Figure Time effects of VOCs for the baseline, 30 minutes and 60 minutes measurement after awakening: A: m/z 74, B: m/z 88, C: m/z 90, D: m/z 60, E: m/z 69

A

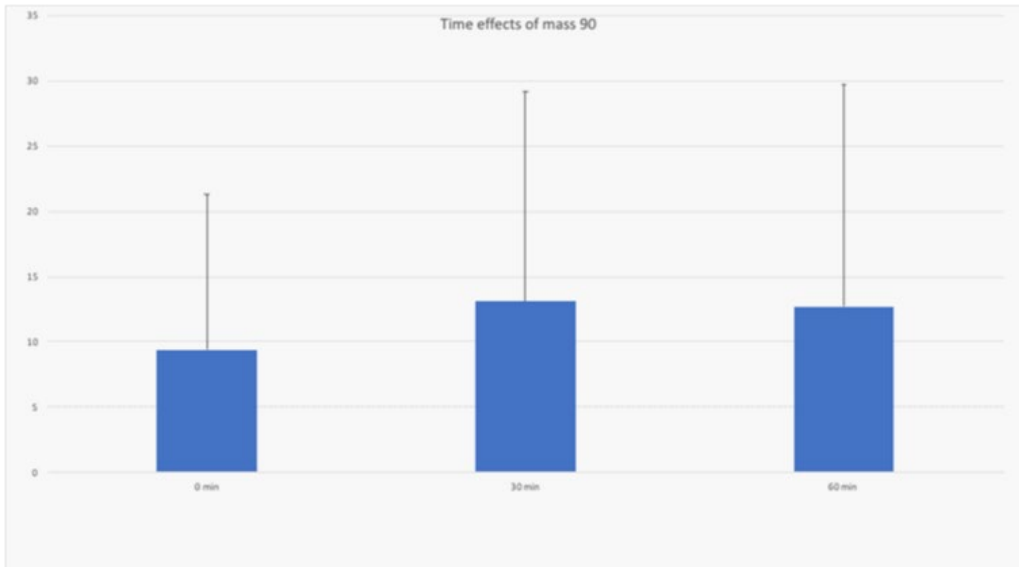


B

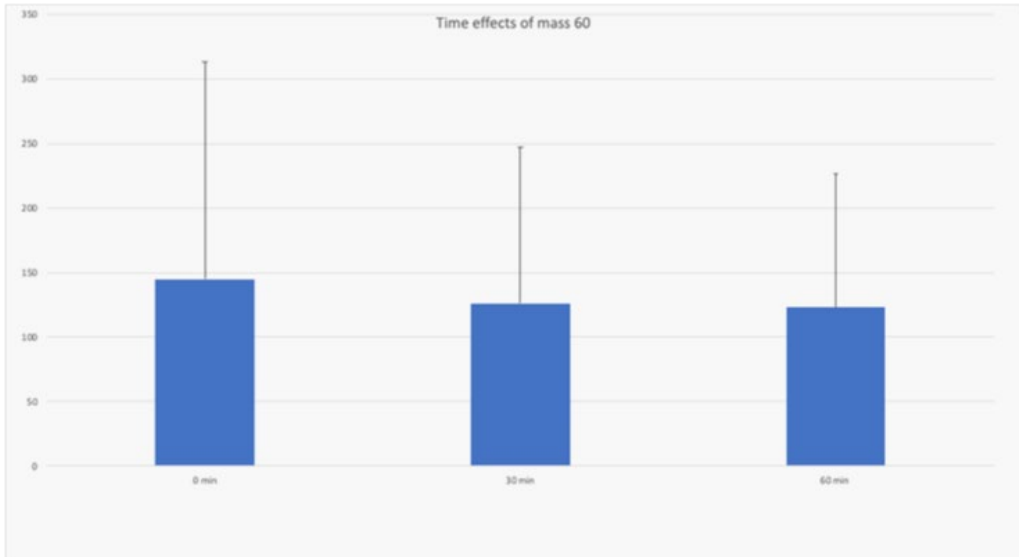


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C

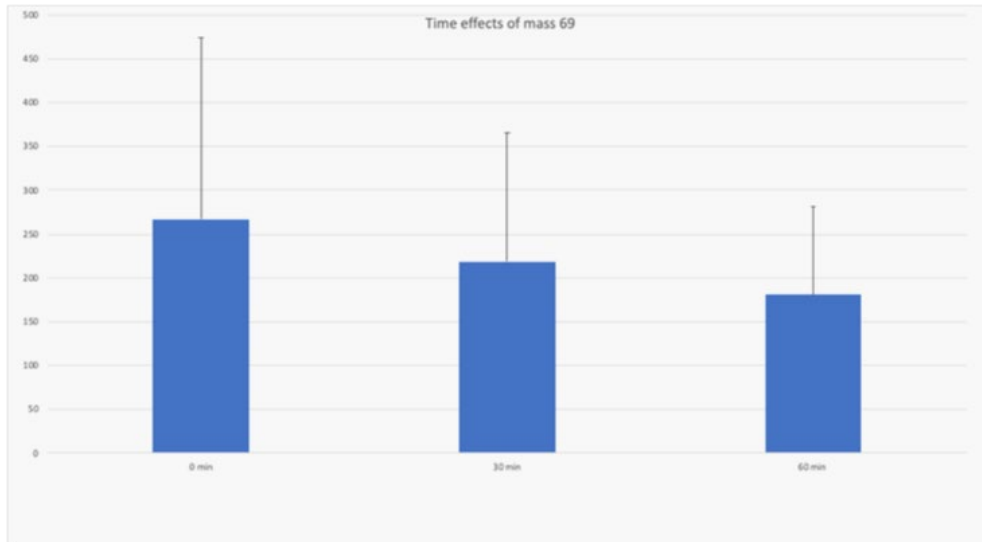


D



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E



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