

**Assessment of causal direction between gut microbiota-dependent metabolites and cardiometabolic health: a bi-directional Mendelian randomisation analysis**

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**Tweet:** The findings from a Mendelian randomization approach support that observational evidence for gut microbiota-dependent metabolite and cardiovascular diseases may be due to confounding or reverse causality. Interestingly, genetically increased choline may be associated with higher risk of type 2 diabetes.

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**Abstract**

We examined the causal direction between gut microbiota-dependent metabolite trimethylamine-N-oxide (TMAO) or its predecessors and cardiometabolic diseases such as risk of type 2 diabetes mellitus (T2DM), coronary artery disease (CAD), myocardial infarction (MI), stroke, atrial fibrillation (AF), and chronic kidney disease (CKD). We used genetic variants as instruments to test the causal associations. Genetically predicted higher TMAO and carnitine were not associated with higher odds of T2DM, AF, CAD, MI, stroke, and CKD after Bonferroni correction ( $P \leq 0.0005$ ). However, we observed that genetically increased choline showed a suggestive association with higher risk of T2DM (odds ratio: 1.84, 95% confidence interval: 1.00 to 3.42 per 10 units,  $P=0.05$ ). In contrast, genetically predicted higher betaine (0.68, 0.48 to 0.95 per 10 units,  $P=0.023$ ) was suggestively associated with a lower risk of T2DM. We observed a suggestive association of genetically increased choline with a lower level of body fat % (beta: -0.28, SE: 0.11,  $P=0.013$ ), but a higher level of estimated glomerular filtration rate ( $0.10 \pm 0.05$ ,  $P=0.034$ ). We further found that T2DM (beta: 0.130, SE: 0.036,  $P < 0.0001$ ) and CKD ( $0.483 \pm 0.168$ ,  $P=0.004$ ) were causally associated with higher TMAO levels. Our MR findings support that T2DM and kidney disease increase TMAO levels and observational evidence for cardiovascular diseases may be due to confounding or reverse causality.

## Introduction

Gut microbiota has been recently implicated as a novel endocrine organ that plays an important role in development of cardiovascular disease (CVD) and type 2 diabetes mellitus (T2DM) through modulating blood levels of bioactive metabolites.(1; 2) Recently, there is a growing appreciation that a gut microbiota dependent metabolite trimethylamine-N-oxide (TMAO), formed from ingested choline, betaine, and carnitine in humans,(3; 4) were predictive of cardiovascular events.(1; 5) Furthermore, a greater increase in TMAO, choline and L-carnitine has been implicated in lesser improvements in insulin sensitivity,(6) adiposity, and energy metabolism.(7) Animal studies have shown that the TMAO meta-organismal pathway enhances the accumulation of cholesterol in macrophages and platelet hyperreactivity,(1) and exacerbates impaired glucose tolerance by blocking the hepatic insulin signaling pathway,(8) which promotes CVD and diabetes in animal models.

However, the results from human studies are not always consistent.(9; 10) Although a recent meta-analysis of 19 observational cohorts found that elevated levels of TMAO and its precursors were associated with increased risk of major adverse cardiovascular events,(11) available evidence from observational studies mainly relies on self-reported information and is susceptible to confounding or reverse causation bias. Therefore, the causality of these observations remains unclear.

Documentation of such causality can inform on potential lifestyle or drug treatment targets for prevention of cardiometabolic disease.

The Mendelian randomization (MR) approach, which used genetic variant as instrumental variable in epidemiological study, has been widely accepted to explore the potential causal effect of exposure on disease.(12-16) Such MR method is analogous to a randomized controlled trial (RCT) where genetic alleles are randomly assorted during conception, and is less likely to be affected by confounding or reverse causation.(13; 17)

Therefore, in the present study, we performed a bi-directional MR analysis to examine the causal direction between gut microbiota-dependent metabolite TMAO or its predecessors such as choline, betaine, and carnitine and cardiometabolic diseases such as T2DM, coronary artery disease (CAD), myocardial infarction (MI), stroke, atrial fibrillation (AF), and chronic kidney disease (CKD) and related traits using summary data from genome-wide association studies (GWAS).

## **Methods**

### **Study design**

The MR approach must satisfy three assumptions (**Figure 1**):(18) first, the genetic variant selected as instrumental variable (IV) is associated with gut microbiota-dependent metabolite TMAO and its predecessors; second, the genetic variant is not associated with any unmeasured confounders of the gut microbiota-dependent metabolites and the cardiometabolic relationship; third, the genetic variant is associated with cardiometabolic events only through gut microbiota-dependent metabolites, not through other pathway.

### **Gut microbiota-dependent metabolites and instrumental variable selection**

The gut microbiota-dependent metabolites include TMAO, choline, betaine, and carnitine. We searched PubMed for GWASs of the gut microbiota-dependent metabolites and cardiometabolic diseases and identified genetic variants for each metabolite,(19) and diseases.(20-24) For each metabolite, we selected genetic variants (SNP, single nucleotide polymorphisms) at thresholds for suggestive genome-wide significance ( $P < 5 \times 10^{-5}$ ) from the published GWASs (**eTable 1**).(19) Details on GWAS studies where we extracted summary-level data are presented in **Table 1 and eTable 1**. Contributing studies received ethical approval from their respective institutional review boards. Informed consent was obtained from all participants of contributing studies.

### **Cardiometabolic diseases and data sources**

For disease outcomes, summary-level data were extracted from the DIAGRAM consortium for T2DM (n=149,821);(20) from the AFGen Consortium for AF;(21) from the Coronary ARtery Disease Genome wide Replication and Meta-analysis (CARDIoGRAM) plus the Coronary Artery Disease (C4D) Genetics (CARDIoGRAMplusC4D) consortium for CAD (60,801 cases and 123,504 controls), and MI (43,676 cases and 128,197 controls), respectively;(22) from the NINDS Stroke Genetics Network (SiGN) and International Stroke Genetics Consortium (ISGC) for stroke (37,792 cases and 397,209 controls);(23) and from the chronic kidney disease CKDGen consortium (n=133,814) (24) for CKD.

T2DM cases were diagnosed according to 1999 World Health Organization (WHO) criteria of fasting plasma glucose concentration  $\geq 7.0$  mmol/l or 2-h plasma glucose concentration  $\geq 11.1$  mmol/l, by report of diabetes medication use, or based on medical record review (25). Ascertainment of AF includes samples with one or more of the following codes 1) Non-cancer illness code, self-reported (1471, 1483); 2) Operation code (1524); 3) Diagnoses-main/secondary ICD10 (I48, I48.0-4, I48.9); 4) Underlying (primary/secondary) cause of death: ICD10 (I48, I48.0-4, I48.9); 5) Diagnoses-main/secondary ICD9 (4273); 6) Operative procedures-main/secondary OPCS (K57.1, K62.1-4);(21) CKD was classified people with eGFR<sub>crea</sub> < 60 ml/min/1.73m<sup>2</sup>.(24) CAD cases were determined with a broad definition including of MI, acute coronary syndrome, chronic stable angina, or coronary artery stenosis greater than 50%.(22)

### **Cardiometabolic traits and data sources**

We searched PubMed for GWASs of cardiometabolic traits. Summary-level data were extracted from the Genetic Investigation of ANthropometric Traits (GIANT) consortium for adiposity such as BMI,(26) body fat,(27) waist-to-hip ratio adjusted BMI (WHRadjBMI);(28) from the Meta-Analyses of Glucose and Insulin-related traits Consortium (MAGIC) (25; 29) for glycemc traits such as fasting glucose, log-transformed fasting insulin, 2h glucose, log-transformed homeostatic model assessment beta (log-transformed HOMA-B), log-transformed HOMA-insulin resistance (log-transformed

HOMA-IR), log-transformed proinsulin, and hemoglobin A1c (HbA1c); from the Global Lipids Genetics Consortium (GLGC) consortium (n=188,577) for lipids such as high density lipoprotein (HDL),(30) low density lipoprotein (LDL),(30) total cholesterol,(30) and triglycerides;(30) from the CKDGen consortium (n=133,814) for kidney function such as eGFR<sub>crea</sub>, which was estimated using the four-variable Modification of Diet in Renal Disease Study Equation and eGFR<sub>reys</sub>, which was estimated as  $76.7 \times (\text{serum cystatin C})^{-1.19}$ ;(24) and GWAS summary data for leptin,(31) and heart rate.(32)

## **Statistical analysis**

### **Linkage disequilibrium assessment and pleiotropy assessment**

To verify that the SNPs selected in this study met the assumption 1 & 2, we examined that genetic association with each metabolite, and further measured linkage disequilibrium (LD) between all the SNPs for same metabolite,(33) and selected independent genetic variants for each metabolite.(34) We chose the variant with the lowest P value for association with each metabolite if genetic variants are in LD, therefore the SNPs selected did not violate the assumption 2. All SNPs for the same metabolite show strong association (F-statistic>21.10, the strength of the instrument), thus meeting assumption 1. We used MR-Egger regression to assess the presence of pleiotropic effects on cardiometabolic outcomes.(18) Using the MR-Egger method, the SNP's effect upon each metabolite is plotted against its effect upon outcomes, and an intercept distinct from the origin provides evidence for pleiotropic effects.

### **Mendelian randomization analysis**

The estimates of the causal effect of each metabolite on outcomes were analysed using the inverse-variance weighted (IVW), that provides a combined estimate of the causal estimate from each SNP. IVW is equivalent to a two-stages least squares or allele score analysis using individual-level data, and is hence considered here as conventional MR.(35) Results are presented as odds ratios (95% confidence intervals) per 10 units genetically predicted increase in each metabolite. In addition, results

for causal effects of diseases on metabolites are presented as  $\beta \pm SE$  per each unit higher in log odds of disease. Furthermore, complementary approaches such as simple median method, weighted median method, the mode-based estimate (MBE), and MR-Egger for multiple genetic variants were used to examine causal effect.(35-38) Detailed information on these MR methods has been described previously.(35-38) Finally, the MR-Egger regression test was used to evaluate the pleiotropic effects.(18) Using the MR-Egger regression method, the effect of IV on the exposure is plotted against its effect on the outcome, and an intercept distinct from the origin provides evidence for pleiotropic effects. The slope of the MR-Egger regression can provide pleiotropy-corrected causal estimates.(18) In the present MR analyses, median weighted, MBE, and MR-Egger methods were considered as sensitivity analyses for MR investigations with multiple genetic variants.(35-37) Power calculations for MR were conducted based on the website: mRnd (<http://cnsgenomics.com/shiny/mRnd/>).

Analyses were performed using R version 3.2.3 (R Project for Statistical Computing). The threshold of statistical significance was  $P \leq 0.0005 (0.05/100)$  after Bonferroni correction.  $P \leq 0.05$  but above the Bonferroni corrected significance threshold was considered as suggestive of evidence for a potential association.

## Results

### Characteristics for selected SNPs

The characteristics of the selected SNPs for each gut microbiota-dependent metabolite are presented in **Table 1 and eTable 1**. To examine assumption 2 & 3, we tested whether any of the selected SNPs were influenced by LD. We chose the variant with the lowest P value for association with each metabolite if genetic variants are in LD. Our genetic analysis showed that 15.4% of betaine, 17.1% of carnitine, 8.0% of choline, and 9.6% of TMAO were explained by its SNPs (**eTable 2**). MR power calculation (<http://cnsgenomics.com/shiny/mRnd>) showed that we have 87%, 84%, 78%, 81% power to test significant ( $P < 0.05$ ) causal effect ( $OR = 1.3$ ) of betaine, carnitine, choline, and TMAO on cardiometabolic events, respectively.

### **Gut microbiota-dependent metabolites and cardiometabolic disease**

Genetically predicted higher TMAO was not associated with higher odds of T2DM (odds ratio: 0.96, 95% confidence interval: 0.59 to 1.57,  $P=0.863$ ), AF (0.99, 0.79 to 1.26,  $P=0.961$ ), CAD (1.00, 0.70 to 1.43,  $P=0.986$ ), MI (1.08, 0.73 to 1.60,  $P=0.708$ ), stroke (0.94, 0.53 to 1.65,  $P=0.83$ ), and CKD (1.08, 0.59 to 1.99,  $P=0.794$ ) per 10 units after Bonferroni correction (**Figure 2**). Likewise, genetically predicted higher carnitine was also not associated with each cardiometabolic disease.

However, we observed that genetically increased choline was suggestively associated with higher risk of T2DM (1.84, 1.00 to 3.42 per 10 units,  $P=0.05$ ), but not with cardiovascular events and CKD. In contrast, genetically predicted higher betaine (0.68, 0.48 to 0.95 per 10 units,  $P=0.023$ ) was suggestively associated with lower risk of T2DM. (**Figure 2**).

In addition, the associations were consistent in sensitivity analyses that used the simple median and weighted median methods (**eTable 3**). The MR-Egger regression test was used to examine the presence of pleiotropic effect. The intercepts (SE) from MR-Egger regression for each outcome was centered at the origin with a confidence interval including the null, suggesting that the results were not influenced by pleiotropy (**eTable 3**).

### **Gut microbiota-dependent metabolites and cardiometabolic traits**

Genetically predicted higher TMAO and betaine were not associated with any cardiometabolic factors after Bonferroni correction (**Table 2**). However, we observed a suggestive association ( $P<0.05$ ) of genetically increased choline with a lower level of body fat % (beta: -0.28, SE: 0.11,  $P=0.013$ ), but a higher level of estimated glomerular filtration rate (eGFR) based on cystine (0.10±0.05,  $P=0.034$ ). Additionally, genetically predicted higher carnitine was suggestively associated with a lower level of triglycerides (-0.17±0.07,  $P=0.012$ ) (**Table 2**). Results were similar in sensitivity analyses that used the simple median and weighted median methods (**eTable 4**). The results were not influenced by



directional pleiotropy ( $P > 0.05$ ). We further examined the genetic association of TMAO-SNPs with potential confounders such as alcohol intake and dietary factors (**eTable 5**). We did not find that TMAO SNPs were associated with any potential confounders, thus validating the assumption 2.

### **Causal effects of cardiometabolic diseases on gut dependent metabolites**

We further examined the causal effects of cardiometabolic diseases on gut dependent metabolites. We found that T2DM was causally associated with lower betaine (beta: -0.111, SE: 0.035,  $P=0.002$ ) and higher TMAO levels ( $0.13 \pm 0.036$ ,  $P < 0.0001$ ) per each 1 unit higher log odds. CKD was also causally associated with higher TMAO levels ( $0.483 \pm 0.168$ ,  $P=0.004$ ) per each 1 unit higher log odds (**Table 3 & eTable 6**).

### **Discussion**

In the present MR study, we did not observe significant association of genetically predicted higher gut microbiota-dependent metabolite TMAO and its predecessor with cardiometabolic disease and related traits. However, we observed a suggestive association of genetically increased choline with a higher risk of T2DM. Furthermore, genetically increased choline showed a suggestive association of with a lower body fat %, but a higher level of eGFR. Whereas, genetically predicted higher carnitine was suggestively associated with a lower level of triglycerides. We further found that T2DM and CKD were causally associated with higher TMAO levels. Our findings support that T2DM and CKD increase TMAO levels and that the previously observed association of TMAO and cardiovascular disease may be due to confounding or reverse causality.

Gut microbiota alteration has been implicated in development of diabetes.(39) Previous observational findings suggested that higher plasma TMAO was associated with increased odds of newly diagnosed T2DM.(40) Animal study showed that TMAO exacerbated impaired glucose tolerance and hyperglycemia through causing inflammation or blocking the hepatic insulin signaling pathway in adipose tissue.(41) Likewise, weight loss diet intervention study demonstrated that a greater increase

in TMAO was related to lesser improvements in the glyceemic traits.(6) However, previous studies have yielded inconsistent associations between plasma TMAO and T2DM.(40; 42)(43) Our MR analysis also did not confirm the causal effect of genetically increased TMAO on risk of T2DM. Interestingly, we found that T2DM increase TMAO levels. In addition, recent genome wide scan suggested human gut microbiota was influenced by host gene which has been associated with diabetes,(44) suggesting that TMAO-T2DM association may share genetic basis rather than causal relationship. We cannot exclude the possibility that the suggestive genome-wide SNP ( $P < 5.0 \times 10^{-5}$ ) used in the MR analysis might introduce a weak instrument bias,(19) thus diluted the association. Future investigation for identifying genome-wide significant SNP for TMAO and its causal role in development of T2DM is required.

Furthermore, a recent prospective study indicated that higher intake of phosphatidylcholine, the precursor to the generation of TMAO, was independently associated with an increased risk of type 2 diabetes in three US populations.(45) Interestingly, our MR results showed a suggestive association of genetically increased choline with higher risk of T2DM. Our findings were supported by previous weight loss diet intervention study, which demonstrated that greater decreases in choline and L-carnitine were significantly associated with greater improvements in fasting insulin concentrations and insulin resistance,(6) underscoring the importance of changes in choline and L-carnitine in improving insulin sensitivity.(6)

Our findings did not corroborate the results from previous meta-analysis of data from 19 prospective studies which provided quantitative pooled estimates of the associations of circulating TMAO level with the incidence of cardiovascular events.(11) It was estimated that high TMAO levels had a 62% increased risk for the development of cardiovascular events than participants with low TMAO levels.(11) However, our MR results showed that genetically increased TMAO was not associated with higher risk of cardiovascular event such as CAD, MI, stroke and AF, suggesting that observational evidence might result from confounding and reverse causality. Although we measured

LD between all selected SNPs using CEU samples from the 1000 Genomes Project,(33) we cannot exclude the possibility that our results might be affected by unmeasured confounders. Furthermore, the MR-Egger regression showed that our results were not influenced by pleiotropy.(18) Nevertheless, it is possible that the results reflect a shared genetic basis between gut microbiota related metabolites and cardiovascular disease rather than a causal relationship.

Despite strong observational evidence for an association of predecessors of TMAO such as carnitine, choline, or betaine with risk of CAD, MI, stroke, and AF. Our results disagree with earlier meta-analysis of observational studies showing a positive association of l-carnitine, choline, or betaine with risk of cardiovascular events.(11) These null findings suggest that our findings did not support a causal role of predecessors of TMAO in development of CVD. However, we have to acknowledge that more variants, especially suggestive genome-wide SNPs may lead to greater pleiotropy and dilute the association in our analysis. However, we found that genetically predicted higher carnitine was suggestively associated with a lower level of triglycerides. The potential mechanism may be that dietary carnitine is metabolized in the liver by intestinal bacteria to produce TMA by enzyme flavin monooxygenase 3,(3; 4) which is reported to be a key integrator of hepatic cholesterol and lipid metabolism.(1; 5)

Interestingly, observational study has reported that TMAO, cleared by the kidney, is elevated in subjects with impaired renal function (46) and portends poorer long-term survival,(47) suggesting that circulating TMAO might play a role in kidney dysfunction.(9; 47-49) In the present MR study, our finding did not support a causal role of TMAO in kidney dysfunction. Surprisingly, we found that genetically increased choline showed a suggestive association of with higher level of eGFR.

Importantly, we demonstrated that kidney disease increases TMAO levels. Given the gut microbiota-mediated metabolism of choline or carnitine each ultimately produces TMAO,(3; 4) we speculate that there is a threshold in observed association between choline and kidney function and that optimal level of choline may be beneficial for improving kidney function, however, chronic high

dietary exposure to choline or carnitine that increase TMAO appears to be toxic and directly contributes to progressive renal fibrosis and dysfunction.(47) However, further investigation on mechanism is required in future studies.

This study has several strengths. First, we thus far for the first time systematically assessed the causal role of gut microbiota dependent metabolites in the development of T2DM, CAD, MI, stroke, AF, and CKD. Second, the present MR analysis used summary-level data from large GWAS, which might avoid bias from reverse causation and reduce confounding. Furthermore, the large sample size from GWAS summary statistics has sufficient power for reliable and lifelong causal estimation. Third, the consistent causal estimation across five methods such as the conventional inverse variance weighted, simple median, weighted median, MBE, and MR-Egger methods suggests robustness of our findings.

However, several limitations merit consideration. First, we assumed that the associations between continuous metabolites and outcomes are linear. However, our findings might suggest that there is a threshold in observed association. Therefore, further investigation is warranted on causal role of gut microbiota dependent metabolite in development of cardiometabolic disease. Second, we used the suggestive genome-wide SNPs for the metabolites, we cannot exclude the possibility that our findings might have been affected by weak instrument bias, which depends on the strength of the genetic instrument through the F statistic. Third, we do not have diet or lifestyle information; therefore, we can not test if the instrumental variables are associated with these factors. However, we used diet/lifestyle information from UK biobank, and demonstrated that the genetic variants were not associated with confounders. Fourth, we can not exclude the possible diet-gene or gene-environment interactions on outcomes, which may influence the observed results. Finally, completely ruling out an alternative direct causal pathway is a challenge for all MR analyses, particularly for metabolites determined by both gut microbiota and multiple genetic variants.

In summary, our findings from a MR approach support that TMAO and kidney disease increase TMAO levels and that observational evidence for gut microbiota-dependent metabolite and cardiovascular diseases may be due to confounding or reverse causality. Human genome influences both gut microbiota and chronic disease, therefore, we cannot exclude the possibility that such association may share genetic basis rather than causal relationship. Large-scale genome wide scan for genetic variants of gut microbiota related metabolites and further investigation in understanding the potential role of gut microbiota-dependent metabolites in development of cardiometabolic disease are required.

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**Conflict of Interest.** All authors declare: no support from companies for the submitted work; no relationships with companies that might have an interest in the submitted work in the previous three years; no spouses, partners, or children have no financial relationships that may be relevant to the submitted work; no non-financial interests that may be relevant to the submitted work.

**Author Contributions.** JJ, PD, and TH designed the research. MG, JJ, PD, CL, XK, ZL, and TH wrote the paper and performed the data analysis. All authors contributed to the statistical analysis, critically reviewed the manuscript during the writing process, and approved the final version to be published.

**Guarantor Statement.** JJ, ZL and TH are the guarantors for the study, had full access to all the data in the study and take responsibility for the integrity of the data and the accuracy of the data analysis.

**Data Availability.** All data used in the present study were obtained from genome wide association study summary statistics which were publicly released by genetic consortia.

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## Figure legends

### Figure 1. Schematic representation of a Mendelian randomization analysis

MR can be used to test the hypothesis that exposure (gut microbiota related metabolites) causes T2DM, CAD, MI, AF, stroke, and CKD. Three assumptions of MR:

1. Genetic variants must be associated with gut microbiota related metabolites.
2. Genetic variants must not be associated with confounders.
3. Genetic variants must influence disease outcomes only through gut microbiota related metabolites, not through other pathways.

### Figure 2. Mendelian randomization of gut microbiota related metabolites and risk of T2DM, CAD, MI, AF, stroke, and CKD

OR: odds ratio; CI: confidence interval; SNPs: single nucleotide polymorphisms

OR (95% CI) means risk of cardiometabolic disease per 10 units increase in genetically predicted gut microbiota related metabolites.

**Table 1. Description of modifiable factors or cardiometabolic disease**

	Consortium or study	Sample size	Population	Year
<b>Adiposity</b>				
BMI, kg/m <sup>2</sup>	GIANT	339224	Europeans	2015
Body fat, %	GIANT, SAT-VAT, LEPgen, GLGC, MAGIC, DIAGRAM, CARDIoGRAMplusC4D	100716	Trans-ethnic	2016
WHR	GIANT	224459	Europeans	2015
<b>Glycemic traits</b>				
Fasting glucose, mmol/L	MAGIC	133010	Europeans	2013
Fasting insulin, pmol/L	MAGIC	133010	Europeans	2013
HOMA-IR	MAGIC	133010	Europeans	2013
HOMA-B	MAGIC	133010	Europeans	2013
Fasting proinsulin, pmol/L	DIAGRAM	16378	Europeans	2011
2h glucose, mmol/L	MAGIC	133010	Europeans	2013
HbA1C, % (mmol/mol)	DIAGRAM	46368	Europeans	2010
<b>Lipids</b>				
HDL, mg/dL	GLGC	188578	Trans-ethnic	2013
LDL, mg/dL	GLGC	188578	Trans-ethnic	2013
Total cholesterol, mg/dL	GLGC	188578	Trans-ethnic	2013
Triglycerides, mg/dL	GLGC	188578	Trans-ethnic	2013
<b>Kidney function</b>				
eGFR <sub>crea</sub> in DM, ml/min/1.73m <sup>2</sup>	CKDGen	133814	Europeans	2016
eGFR <sub>crea</sub> , ml/min/1.73m <sup>2</sup>	CKDGen	133814	Europeans	2016
eGFR <sub>cys</sub> , ml/min/1.73m <sup>2</sup>	CKDGen	133814	Europeans	2016
<b>Others</b>				
Leptin, µg/ml	ADIPOGen Study	52140	Trans-ethnic	2015
Heart rate, bpm	UK Biobank	265046	Europeans	2016
<b>Diseases</b>				
T2DM	DIAGRAM, AGEN-T2D, SAT2D, MAT2D	47979/139611	Europeans	2014
AF	AFGen	65446/522744	Trans-Ethnic	2018
CAD	CARDIoGRAM and CARDIoGRAMplusC4D	60801/123504	Trans-Ethnic	2018
MI	CARDIoGRAM and CARDIoGRAMplusC4D	43676 /128197	Trans-Ethnic	2018
Stroke	NINDS SiGN and ISGC	37792/397209	Trans-Ethnic	2015
CKD	CKDGen	133814	Trans-Ethnic	2016

HbA1C: hemoglobin A1c; HDL: high density lipoprotein; LDL: low density lipoprotein; eGFR<sub>crea</sub>: estimated glomerular filtration rate based on creatinine; eGFR<sub>cys</sub>: estimated glomerular filtration rate based on cystatin C; T2DM: type 2 diabetes mellitus; GIANT: Genetic Investigation of ANthropometric Traits; GLGC: The Global Lipids Genetics; SAT-VAT: abdominal visceral adipose tissue (VAT) and subcutaneous adipose tissue (SAT); LEPgen: the leptin genetic consortium; MAGIC: the Meta-Analyses of Glucose and Insulin-related traits Consortium the Meta-Analyses of Glucose and Insulin-related traits Consortium; DIAGRAM: DIAbetes Genetics Replication And Meta-analysis; CARDIoGRAMplusC4D: the Coronary ARtery Disease Genome wide Replication and Meta-analysis (CARDIoGRAM) plus the Coronary Artery Disease (C4D) Genetics (CARDIoGRAMplusC4D) consortium; SiGN: the NINDS Stroke Genetics Network; ISGC: International Stroke Genetics Consortium.

**Table 2. Mendelian randomization analysis of gut microbiota-dependent metabolite and cardiometabolic traits**

	Betaine		Carnitine		Choline		TMAO	
	Beta±SE	P-value	Beta±SE	P-value	Beta±SE	P-value	Beta±SE	P-value
<b>Adiposity</b>								
BMI, kg/m <sup>2</sup>	0.02±0.06	0.686	-0.06±0.05	0.246	0.04±0.08	0.605	0.06±0.07	0.411
WHR	-0.05±0.08	0.509	-0.07±0.06	0.294	-0.04±0.09	0.683	0.01±0.09	0.988
Body fat, %	0.07±0.07	0.312	0.01±0.10	0.997	-0.28±0.11	0.013	0.13±0.08	0.112
<b>Glycemic traits</b>								
Fasting glucose, mmol/L	0.06±0.06	0.325	-0.04±0.08	0.608	0.16±0.09	0.065	-0.02±0.08	0.775
Fasting insulin, pmol/L	0.10±0.07	0.159	-0.02±0.06	0.716	-0.06±0.08	0.439	-0.02±0.08	0.768
HbA1C, % (mmol/mol)	0.05±0.06 (0.31±0.37)	0.43	0.01±0.05 (0.06±0.31)	0.942	-0.02±0.07 (-0.12±0.43)	0.818	-0.01±0.05 (0.06±0.31)	0.866
HOMA-B	0.07±0.06	0.227	0.03±0.06	0.527	-0.05±0.06	0.485	0.02±0.09	0.858
HOMA-IR	0.09±0.07	0.178	0.01±0.06	0.879	0.01±0.08	0.974	-0.02±0.08	0.772
Fasting proinsulin, pmol/L	-0.03±0.11	0.791	0.09±0.11	0.436	-0.19±0.18	0.291	-0.01±0.12	0.936
2h glucose, mmol/L	0.12±0.32	0.708	0.35±0.29	0.216	0.32±0.39	0.415	0.31±0.39	0.438
<b>Lipids</b>								
HDL, mg/dL	0.01±0.10	0.953	-0.01±0.07	0.919	0.10±0.10	0.356	0.03±0.10	0.744
LDL, mg/dL	0.01±0.12	0.94	-0.07±0.08	0.347	0.22±0.13	0.094	0.05±0.11	0.608
Total cholesterol, mg/dL	-0.01±0.12	0.906	-0.09±0.07	0.242	0.10±0.13	0.433	0.05±0.10	0.652
Triglycerides, mg/dL	0.01±0.08	0.934	-0.17±0.07	0.012	0.08±0.11	0.476	0.05±0.10	0.636
<b>Kidney function</b>								
eGFR <sub>crea</sub> in DM, ml/min/1.73m <sup>2</sup>	0.05±0.06	0.367	-0.03±0.06	0.636	0.07±0.09	0.475	0.05±0.09	0.552
eGFR <sub>crea</sub> , ml/min/1.73m <sup>2</sup>	0.01±0.02	0.792	0.01±0.01	0.536	-0.02±0.02	0.38	-0.02±0.01	0.186
eGFR <sub>cys</sub> , ml/min/1.73m <sup>2</sup>	-0.04±0.03	0.307	0.01±0.03	0.642	0.10±0.05	0.034	-0.01±0.04	0.844
<b>Others</b>								
Leptin, µg/ml	-0.08±0.08	0.272	0.03±0.07	0.644	-0.01±0.13	0.912	-0.07±0.12	0.535
Heart rate, bpm	-0.11±0.31	0.729	-0.15±0.48	0.75	-1.03±0.87	0.237	-0.14±0.45	0.757

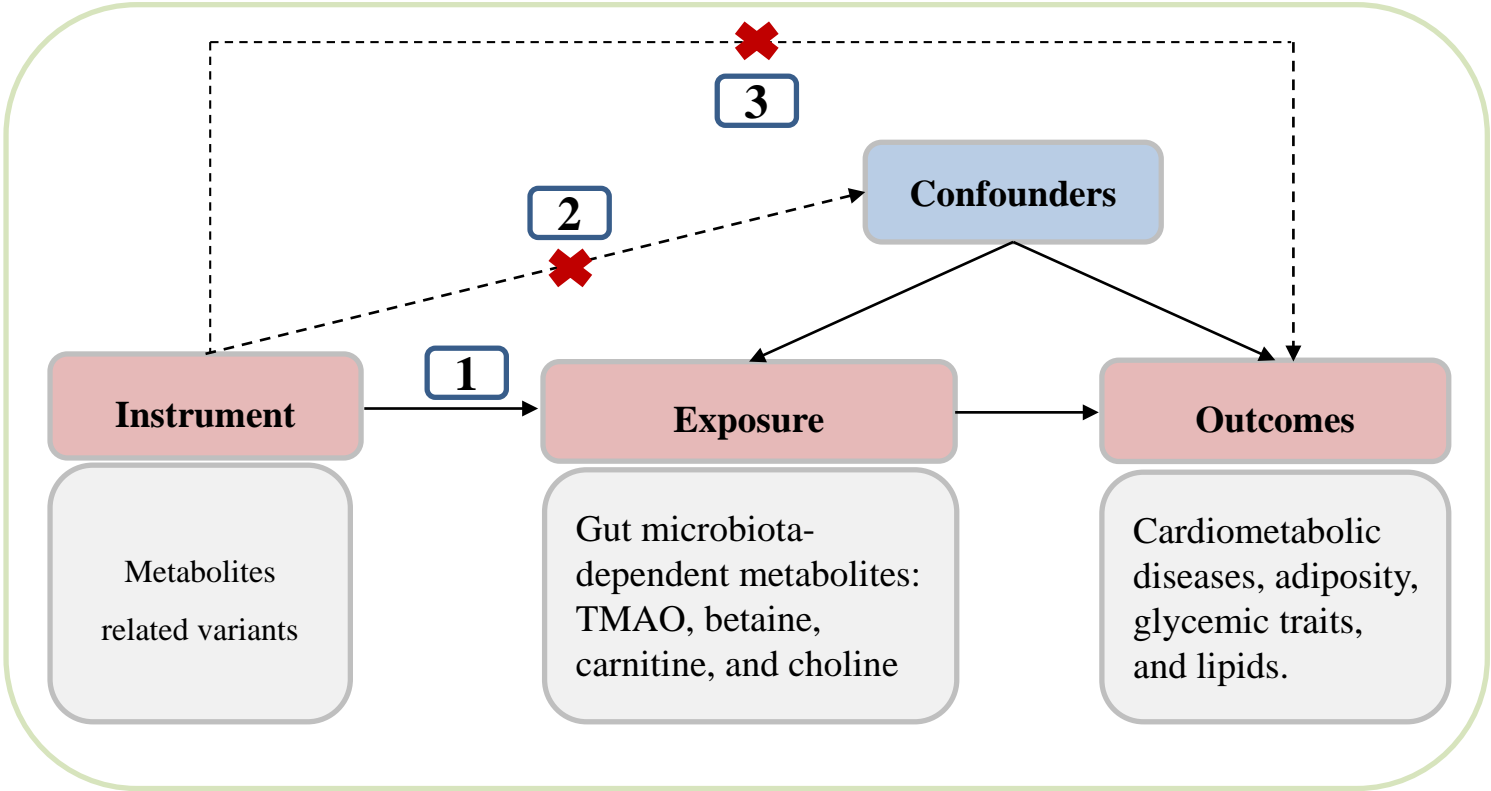
Results are presented as beta±SE. Causal effects were estimated using instrumental variables. Beta coefficient means each SD changes in outcomes per 10 units increase in genetically predicted gut microbiota dependent metabolite.

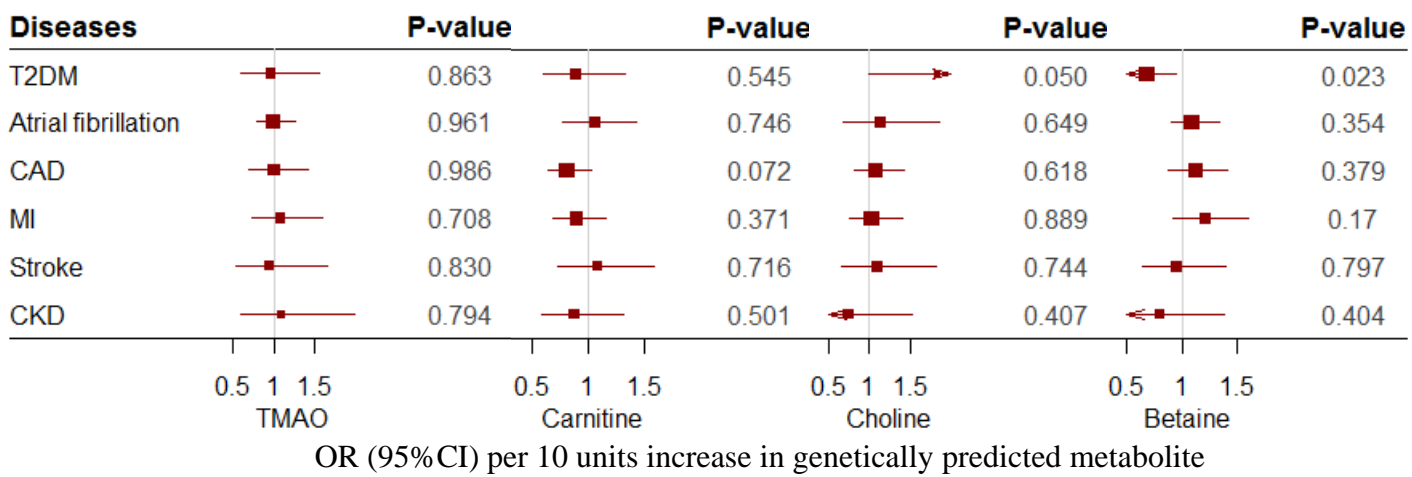
**Table 3. Mendelian randomization analysis of cardiometabolic diseases on gut microbiota-dependent metabolites**

Diseases	Betaine		Carnitine		Choline		TMAO	
	Beta±SE	P-value	Beta±SE	P-value	Beta±SE	P-value	Beta±SE	P-value
<b>Type 2 diabetes</b>	-0.111±0.035	0.002	0.054±0.036	0.133	0.001±0.036	0.969	0.13±0.036	<0.0001
<b>Atrial fibrillation</b>	-0.069±0.054	0.203	-0.076±0.051	0.14	-0.036±0.057	0.522	-0.004±0.051	0.942
<b>CAD</b>	0.039±0.06	0.513	0.024±0.06	0.686	0.062±0.077	0.42	0.005±0.073	0.944
<b>MI</b>	-0.004±0.059	0.947	0.007±0.059	0.908	0.083±0.076	0.277	0.018±0.068	0.793
<b>Stroke</b>	0.025±0.067	0.707	0.128±0.068	0.059	0.056±0.086	0.515	0.044±0.067	0.51
<b>CKD</b>	0.085±0.123	0.49	0.257±0.149	0.085	0.039±0.144	0.787	0.483±0.168	0.004



**Figure 1**





eTable 1 Characteristics of selected SNPs.

Metabolites	SNP	CHR	POS	RISK_AL	OTHER_A	MAF	BETA
Betaine	rs10178297	2	103998526	C	T	0.159669	0.206804
Betaine	rs10786317	10	83003759	A	G	0.437371	0.158004
Betaine	rs10817686	9	116739671	C	T	0.470655	0.456095
Betaine	rs10883712	10	103929295	T	G	0.403856	0.159156
Betaine	rs11030909	11	29933817	A	C	0.089041	0.288461
Betaine	rs11224038	11	134231086	T	C	0.013001	1.210678
Betaine	rs11742447	5	117598798	T	C	0.34453	0.245998
Betaine	rs1321958	11	31005259	A	G	0.388073	0.15249
Betaine	rs17815398	18	47967754	G	A	0.019989	0.838038
Betaine	rs1868264	2	239151212	G	A	0.195369	0.192036
Betaine	rs2087307	12	10153542	T	G	0.25941	0.171974
Betaine	rs2879414	18	47962958	G	A	0.459427	0.152593
Betaine	rs358538	19	37696665	G	A	0.054655	0.455873
Betaine	rs6862283	5	78355394	C	T	0.305742	0.192604
Betaine	rs9587723	13	108375283	C	T	0.003186	3.283542
Carnitine	rs10821590	10	61197033	A	G	0.071265	0.598428
Carnitine	rs1171610	10	61147703	C	T	0.383057	0.195072
Carnitine	rs1171617	10	61137188	T	G	0.230228	0.417521
Carnitine	rs11733138	4	22769759	A	G	0.345948	0.225106
Carnitine	rs16913790	10	61016188	A	G	0.138238	0.215648
Carnitine	rs274554	5	131752849	T	C	0.15858	0.210812
Carnitine	rs4656852	1	158071277	C	T	0.05341	0.507554
Carnitine	rs562672	11	125488674	C	T	0.366342	0.233674
Carnitine	rs6108228	20	8926063	T	G	0.405993	0.175224
Carnitine	rs6959875	7	19788530	G	A	0.301445	0.270154
Carnitine	rs7606454	2	45795867	T	C	0.138628	0.234925
Carnitine	rs9879988	3	5284556	G	A	0.163268	0.239135
Choline	rs10098425	8	106016051	A	G	0.053791	0.458636
Choline	rs10819950	9	97975154	A	G	0.316435	0.207834
Choline	rs10826197	10	59912647	C	A	0.486752	0.151452
Choline	rs12444044	16	78024057	G	A	0.11218	0.36411
Choline	rs2408564	12	90546484	A	G	0.169697	0.249124
Choline	rs4008155	9	38478919	C	T	0.156004	0.215446
Choline	rs4312185	13	75564535	A	T	0.426908	0.155875
Choline	rs9599459	13	68851492	T	A	0.011635	1.015407
TMAO	rs12221306	10	17041344	A	T	0.386961	0.157561
TMAO	rs13236413	7	156563826	C	T	0.090077	0.408223
TMAO	rs16917161	8	53128610	A	T	0.091895	0.261652
TMAO	rs17418675	2	55064109	T	C	0.341383	0.155799
TMAO	rs2703228	8	5863417	C	G	0.323034	0.216537
TMAO	rs3935570	1	19039958	G	T	0.260675	0.22712
TMAO	rs4846884	1	229153698	A	C	0.156395	0.210836
TMAO	rs692588	15	26804716	A	G	0.030551	2.793966
TMAO	rs7302178	12	26899160	A	G	0.16379	0.237074

SE	Pvalue	Closest Gene
0.04594	6.74E-06	MRPS9
0.034522	4.72E-06	NRG3
0.095242	1.68E-06	TNC
0.03452	4.02E-06	PPRC1
0.064322	7.30E-06	FSHB
0.250897	1.40E-06	LOC89944
0.050599	1.16E-06	DMXL1
0.034175	8.12E-06	DCDC1
0.186726	7.19E-06	MEX3C
0.042037	4.92E-06	TRAF3IP1
0.038655	8.63E-06	CLEC1A
0.033436	5.03E-06	MEX3C
0.102009	7.86E-06	PDCD5
0.036104	9.57E-08	ARSB
0.724486	5.84E-06	TNFSF13B
0.111938	8.99E-08	SLC16A9
0.036118	6.63E-08	CCDC6
0.039627	5.87E-26	CCDC6
0.049769	6.10E-06	LOC643751
0.048046	7.18E-06	CCDC6
0.046042	4.68E-06	LOC441108
0.113868	8.30E-06	FCRL6
0.052136	7.39E-06	RPUSD4
0.037254	2.56E-06	PLCB1
0.054621	7.58E-07	TWISTNB
0.053084	9.62E-06	SRBD1
0.046672	3.00E-07	ARL8B
0.103259	8.93E-06	ZFPM2
0.046236	6.95E-06	SLC35D2
0.033949	8.15E-06	TFAM
0.080297	5.77E-06	WWOX
0.051647	1.41E-06	BTG1
0.046732	4.02E-06	ALDH1B1
0.034719	7.13E-06	UCHL3
0.216489	2.73E-06	DACH1
0.03453	5.04E-06	RSU1
0.086287	2.23E-06	MNX1
0.059005	9.23E-06	PCMTD1
0.035111	9.11E-06	FLJ31438
0.041	1.28E-07	ANGPT2
0.043297	1.56E-07	ALDH4A1
0.046646	6.19E-06	ARV1
0.576651	1.27E-06	GOLGA8G
0.052534	6.40E-06	C12orf11

**eTable 2. Variation of metabolites explained by SNPs**

Metabolites	SNP	CHR	POS	RISK_ALI	OTHER_A	MAF	BETA
Betaine	rs1017829	2	103998526	C	T	0.159669	0.206804
Betaine	rs1078631	10	83003759	A	G	0.437371	0.158004
Betaine	rs1081768	9	116739671	C	T	0.470655	0.456095
Betaine	rs1088371	10	103929295	T	G	0.403856	0.159156
Betaine	rs1103090	11	29933817	A	C	0.089041	0.288461
Betaine	rs1122403	11	134231086	T	C	0.013001	1.210678
Betaine	rs1174244	5	117598798	T	C	0.34453	0.245998
Betaine	rs1321958	11	31005259	A	G	0.388073	0.15249
Betaine	rs1781539	18	47967754	G	A	0.019989	0.838038
Betaine	rs1868264	2	239151212	G	A	0.195369	0.192036
Betaine	rs2087307	12	10153542	T	G	0.25941	0.171974
Betaine	rs2879414	18	47962958	G	A	0.459427	0.152593
Betaine	rs358538	19	37696665	G	A	0.054655	0.455873
Betaine	rs6862283	5	78355394	C	T	0.305742	0.192604
Betaine	rs9587723	13	108375283	C	T	0.003186	3.283542
Carnitine	rs1082159	10	61197033	A	G	0.071265	0.598428
Carnitine	rs1171610	10	61147703	C	T	0.383057	0.195072
Carnitine	rs1171617	10	61137188	T	G	0.230228	0.417521
Carnitine	rs1173313	4	22769759	A	G	0.345948	0.225106
Carnitine	rs1691379	10	61016188	A	G	0.138238	0.215648
Carnitine	rs274554	5	131752849	T	C	0.15858	0.210812
Carnitine	rs4656852	1	158071277	C	T	0.05341	0.507554
Carnitine	rs562672	11	125488674	C	T	0.366342	0.233674
Carnitine	rs6108228	20	8926063	T	G	0.405993	0.175224
Carnitine	rs6959875	7	19788530	G	A	0.301445	0.270154
Carnitine	rs7606454	2	45795867	T	C	0.138628	0.234925
Carnitine	rs9879988	3	5284556	G	A	0.163268	0.239135
Choline	rs1009842	8	106016051	A	G	0.053791	0.458636
Choline	rs1081995	9	97975154	A	G	0.316435	0.207834
Choline	rs1082619	10	59912647	C	A	0.486752	0.151452
Choline	rs1244404	16	78024057	G	A	0.11218	0.36411
Choline	rs2408564	12	90546484	A	G	0.169697	0.249124
Choline	rs4008155	9	38478919	C	T	0.156004	0.215446
Choline	rs4312185	13	75564535	A	T	0.426908	0.155875
Choline	rs9599459	13	68851492	T	A	0.011635	1.015407
TMAO	rs1222130	10	17041344	A	T	0.386961	0.157561
TMAO	rs1323641	7	156563826	C	T	0.090077	0.408223
TMAO	rs1691716	8	53128610	A	T	0.091895	0.261652
TMAO	rs1741867	2	55064109	T	C	0.341383	0.155799
TMAO	rs2703228	8	5863417	C	G	0.323034	0.216537
TMAO	rs3935570	1	19039958	G	T	0.260675	0.22712
TMAO	rs4846884	1	229153698	A	C	0.156395	0.210836
TMAO	rs692588	15	26804716	A	G	0.030551	2.793966
TMAO	rs7302178	12	26899160	A	G	0.16379	0.237074

SE	Pvalue	Closest.Ge	Sample.Siz	variance	Explain
0.04594	6.74E-06	MRPS9	2075	0.009671	
0.034522	4.72E-06	NRG3	2075	0.009995	
0.095242	1.68E-06	TNC	2075	0.010931	
0.03452	4.02E-06	PPRC1	2075	0.010141	
0.064322	7.30E-06	FSHB	2075	0.0096	
0.250897	1.40E-06	LOC89944	2075	0.011097	
0.050599	1.16E-06	DMXL1	2075	0.011263	
0.034175	8.12E-06	DCDC1	2075	0.009504	
0.186726	7.19E-06	MEX3C	2075	0.009614	
0.042037	4.92E-06	TRAF3IP1	2075	0.009957	
0.038655	8.63E-06	CLEC1A	2075	0.009449	
0.033436	5.03E-06	MEX3C	2075	0.009937	
0.102009	7.86E-06	PDCD5	2075	0.009533	
0.036104	9.57E-08	ARSB	2075	0.01353	
0.724486	5.84E-06	TNFSF13E	2075	0.009802	
0.111938	8.99E-08	SLC16A9	2075	0.013587	
0.036118	6.63E-08	CCDC6	2075	0.013863	
0.039627	5.87E-26	CCDC6	2075	0.050784	
0.049769	6.10E-06	LOC64375	2075	0.009763	
0.048046	7.18E-06	CCDC6	2075	0.009615	
0.046042	4.68E-06	LOC44110	2075	0.010002	
0.113868	8.30E-06	FCRL6	2075	0.009484	
0.052136	7.39E-06	RPUSD4	2075	0.009589	
0.037254	2.56E-06	PLCB1	2075	0.010549	
0.054621	7.58E-07	TWISTNB	2075	0.011652	
0.053084	9.62E-06	SRBD1	2075	0.00935	
0.046672	3.00E-07	ARL8B	2075	0.012494	
0.103259	8.93E-06	ZFPM2	2075	0.009418	
0.046236	6.95E-06	SLC35D2	2075	0.009644	
0.033949	8.15E-06	TFAM	2075	0.0095	
0.080297	5.77E-06	WWOX	2075	0.009812	
0.051647	1.41E-06	BTG1	2075	0.011089	
0.046732	4.02E-06	ALDH1B1	2075	0.010139	
0.034719	7.13E-06	UCHL3	2075	0.009621	
0.216489	2.73E-06	DACH1	2075	0.010491	
0.03453	5.04E-06	RSU1	2075	0.009935	
0.086287	2.23E-06	MNX1	2075	0.010672	
0.059005	9.23E-06	PCMTD1	2075	0.009388	
0.035111	9.11E-06	FLJ31438	2075	0.0094	
0.041	1.28E-07	ANGPT2	2075	0.013264	
0.043297	1.56E-07	ALDH4A1	2075	0.013087	
0.046646	6.19E-06	ARV1	2075	0.00975	
0.576651	1.27E-06	GOLGA8C	2075	0.011187	
0.052534	6.40E-06	C12orf11	2075	0.009719	

eTable 3. Mendelian randomization of gut microbiota dependant metabolites and cardiometabolic disease

<b>Metabolites</b>	<b>Simple</b>		<b>Weighted</b>
<b>Betaine, per 10 unit</b>	<b>OR(95%CI)</b>	<b>P-value</b>	<b>OR(95%CI)</b>
T2DM	0.81(0.50,1.32)	0.401	0.66(0.41,1.06)
AF	1.06(0.73,1.55)	0.761	1.03(0.84,1.27)
CAD	1.32(0.93,1.88)	0.112	1.07(0.76,1.51)
MI	1.27(0.83,1.95)	0.281	1.17(0.79,1.75)
Stroke	0.94(0.53,1.67)	0.826	1.00(0.58,1.75)
CKD	0.68(0.35,1.32)	0.254	0.66(0.33,1.34)
<b>Carnitine, per 10 unit</b>			
T2DM	0.89(0.52,1.52)	0.667	0.84(0.48,1.51)
AF	0.91(0.60,1.39)	0.682	0.91(0.61,1.38)
CAD	0.79(0.59,1.07)	0.134	0.76(0.56,1.04)
MI	0.80(0.57,1.14)	0.215	0.75(0.53,1.04)
Stroke	0.94(0.55,1.60)	0.827	1.14(0.68,1.93)
CKD	0.66(0.38,1.17)	0.162	0.66(0.37,1.17)
<b>Choline, per 10 unit</b>			
T2DM	1.58(0.72,3.46)	0.255	1.54(0.71,3.32)
AF	1.04(0.49,2.20)	0.913	1.48(0.84,2.56)
CAD	1.25(0.83,1.88)	0.286	1.02(0.71,1.45)
MI	1.03(0.65,1.63)	0.9	0.92(0.62,1.38)
Stroke	1.20(0.58,2.48)	0.625	1.03(0.52,2.03)
CKD	0.70(0.30,1.62)	0.402	0.67(0.28,1.58)
<b>TMAO, per 10 unit</b>			
T2DM	1.00(0.51,1.95)	0.999	1.20(0.74,1.95)
AF	0.98(0.59,1.62)	0.932	1.04(0.79,1.36)
CAD	0.91(0.57,1.45)	0.694	0.98(0.61,1.58)
MI	1.19(0.72,1.95)	0.503	1.13(0.68,1.86)
Stroke	1.04(0.48,2.27)	0.91	1.26(0.61,2.59)
CKD	1.15(0.54,2.44)	0.705	1.20(0.55,2.59)

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Weighted	IVW		MI	
	P-value	OR(95%CI)		P-value
	0.086	0.68(0.48,0.95)	0.023	0.86(0.41,1.82)
	0.756	1.09(0.90,1.34)	0.354	1.08(0.90,1.31)
	0.707	1.12(0.88,1.42)	0.379	1.03(0.68,1.57)
	0.426	1.21(0.92,1.60)	0.17	1.20(0.79,1.80)
	0.991	0.95(0.64,1.40)	0.797	1.15(0.63,2.10)
	0.243	0.79(0.45,1.38)	0.404	0.60(0.26,1.39)
	0.567	0.88(0.59,1.32)	0.545	0.79(0.34,1.82)
	0.663	1.05(0.77,1.43)	0.746	0.79(0.47,1.30)
	0.083	0.80(0.64,1.02)	0.072	0.75(0.48,1.17)
	0.084	0.89(0.68,1.15)	0.371	0.71(0.50,1.02)
	0.623	1.07(0.73,1.58)	0.716	1.09(0.55,2.16)
	0.16	0.87(0.58,1.31)	0.501	0.58(0.26,1.34)
	0.277	1.84(1.00,3.42)	0.05	1.19(0.45,3.06)
	0.169	1.13(0.68,1.86)	0.649	1.57(1.05,2.36)
	0.926	1.07(0.81,1.42)	0.618	0.99(0.70,1.38)
	0.702	1.02(0.75,1.40)	0.889	0.90(0.63,1.30)
	0.928	1.09(0.65,1.82)	0.744	0.92(0.42,2.03)
	0.364	0.73(0.35,1.52)	0.407	0.63(0.21,1.82)
	0.458	0.96(0.59,1.57)	0.863	1.27(0.77,2.12)
	0.792	0.99(0.79,1.26)	0.961	1.05(0.81,1.35)
	0.942	1.00(0.70,1.43)	0.986	1.05(0.55,2.01)
	0.635	1.08(0.73,1.60)	0.708	1.27(0.76,2.16)
	0.532	0.94(0.53,1.65)	0.83	1.23(0.63,2.39)
	0.651	1.08(0.59,1.99)	0.794	1.25(0.49,3.16)



BE	Egger-MR		(inter
	P-value	OR(95%CI)	Beta(95%CI)
	0.697	0.54(0.29,1.01)	0.055
	0.381	1.13(0.89,1.42)	0.323
	0.898	0.91(0.55,1.51)	0.724
	0.382	0.85(0.49,1.49)	0.575
	0.654	1.09(0.51,2.32)	0.82
	0.231	0.42(0.10,1.86)	0.256
	0.578	0.91(0.22,3.71)	0.895
	0.349	0.84(0.36,1.95)	0.692
	0.204	0.68(0.36,1.30)	0.244
	0.066	0.58(0.29,1.19)	0.139
	0.791	1.42(0.50,4.10)	0.509
	0.201	0.64(0.19,2.18)	0.48
	0.731	0.81(0.17,3.82)	0.788
	0.028	1.88(0.95,3.74)	0.071
	0.944	0.94(0.59,1.51)	0.797
	0.58	0.87(0.52,1.46)	0.605
	0.846	0.75(0.30,1.82)	0.519
	0.387	0.32(0.02,4.62)	0.405
	0.345	1.51(0.80,2.83)	0.2
	0.722	1.06(0.79,1.42)	0.708
	0.871	2.05(0.61,6.89)	0.245
	0.359	1.11(0.29,4.26)	0.879
	0.541	1.31(0.45,3.78)	0.62
	0.652	1.11(0.11,11.70)	0.931

cept)
P-value
0.423
0.679
0.376
0.158
0.671
0.375
0.964
0.579
0.587
0.217
0.571
0.608
0.254
0.059
0.486
0.451
0.31
0.53
0.054
0.483
0.226
0.965
0.466
0.984

eTable 4. Mendelian randomization of gut microbiota dependant metabolites and cardiometabolic traits

Metabolites	Simple		Weighted	
	Beta±SE	P-value	Beta±SE	P-value
<b>Betaine, per 10 unit</b>				
Fasting Glucose	0.06±0.08	0.474	0.05±0.08	0.496
Fasting Insulin	0.13±0.09	0.151	0.12±0.09	0.206
HbA1C1	0.08±0.08	0.321	0.03±0.08	0.734
HOMA_B	0.14±0.08	0.06	0.14±0.08	0.066
HOMA_IR	0.13±0.09	0.15	0.13±0.09	0.167
Proinsulin	-0.01±0.16	0.945	0.03±0.16	0.844
Two hr Glucose	0.12±0.43	0.783	0.12±0.42	0.777
BMI	0.03±0.07	0.637	0.09±0.06	0.157
Body fat %	0.07±0.10	0.496	0.01±0.10	0.882
eGFRcrea_DM	0.01±0.08	0.987	-0.05±0.08	0.586
eGFRcrea_overall	0.01±0.02	0.654	0.03±0.02	0.228
eGFRcys_overall	-0.02±0.05	0.68	-0.06±0.04	0.18
WHRadjBMI	-0.10±0.09	0.279	-0.10±0.09	0.303
HDL	0.12±0.12	0.312	0.12±0.12	0.302
LDL	0.07±0.13	0.604	0.10±0.13	0.431
Leptin	-0.02±0.10	0.882	-0.01±0.11	0.894
Resting Heat Rate	0.52±0.66	0.432	-0.18±0.44	0.676
TC	-0.07±0.13	0.587	-0.05±0.13	0.701
TG	-0.08±0.11	0.474	-0.08±0.11	0.462
<b>Carnitine, per 10 unit</b>				
Fasting Glucose	-0.03±0.08	0.678	-0.02±0.08	0.819
Fasting Insulin	-0.09±0.08	0.244	-0.03±0.08	0.702
HbA1C1	0.02±0.07	0.767	0.02±0.07	0.822
HOMA_B	0.04±0.07	0.549	0.06±0.07	0.364
HOMA_IR	-0.06±0.09	0.482	0.00±0.09	0.998
Proinsulin	0.26±0.15	0.08	0.26±0.14	0.077
Two hr Glucose	0.22±0.39	0.571	0.36±0.40	0.374
BMI	-0.04±0.07	0.581	-0.01±0.07	0.863
Body fat %	-0.04±0.12	0.776	0.06±0.12	0.591
eGFRcrea_DM	-0.04±0.07	0.52	-0.05±0.07	0.509
eGFRcrea_overall	-0.01±0.02	0.709	0.01±0.02	0.417
eGFRcys_overall	0.02±0.04	0.69	0.01±0.04	0.831
WHRadjBMI	0.01±0.09	0.967	-0.04±0.09	0.674
HDL	-0.05±0.10	0.598	-0.02±0.10	0.849
LDL	-0.04±0.10	0.719	-0.05±0.10	0.62
Leptin	0.04±0.10	0.702	0.00±0.10	0.984
Resting Heat Rate	0.34±0.67	0.613	0.09±0.64	0.889
TC	-0.11±0.10	0.277	-0.13±0.10	0.208
TG	-0.16±0.09	0.077	-0.17±0.10	0.073
<b>Choline, per 10 unit</b>				
Fasting Glucose	0.13±0.10	0.192	0.14±0.11	0.205
Fasting Insulin	-0.09±0.10	0.411	0.04±0.10	0.698
HbA1C1	0.03±0.09	0.751	0.06±0.09	0.501
HOMA_B	-0.09±0.09	0.284	-0.04±0.08	0.656
HOMA_IR	0.05±0.11	0.616	0.06±0.11	0.591
Proinsulin	-0.17±0.20	0.383	-0.18±0.20	0.383
Two hr Glucose	0.65±0.52	0.209	0.33±0.50	0.505

BMI	0.02±0.10	0.863	0.12±0.10	0.238
Body fat %	-0.23±0.15	0.132	-0.23±0.15	0.137
eGFRcrea_DM	0.04±0.11	0.75	0.05±0.12	0.682
eGFRcrea_overall	-0.01±0.03	0.646	-0.03±0.02	0.307
eGFRcys_overall	0.09±0.06	0.123	0.09±0.06	0.132
WHRadjBMI	-0.08±0.11	0.457	-0.08±0.11	0.49
HDL	0.20±0.13	0.127	0.13±0.13	0.324
LDL	0.25±0.15	0.101	0.21±0.15	0.177
Leptin	0.07±0.14	0.62	-0.05±0.14	0.747
Resting Heat Rate	-1.48±0.94	0.115	-1.53±0.86	0.077
TC	0.09±0.15	0.535	0.09±0.15	0.56
TG	0.07±0.12	0.549	0.07±0.13	0.602
<b>TMAO, per 10 unit</b>				
Fasting Glucose	-0.15±0.10	0.13	-0.15±0.10	0.133
Fasting Insulin	0.04±0.11	0.739	-0.02±0.11	0.838
HbA1C1	-0.02±0.07	0.791	-0.02±0.06	0.695
HOMA_B	0.06±0.10	0.516	0.04±0.10	0.699
HOMA_IR	-0.01±0.11	0.941	-0.03±0.11	0.77
Proinsulin	0.04±0.18	0.812	0.01±0.16	0.977
Two hr Glucose	0.51±0.48	0.283	0.49±0.49	0.31
BMI	0.11±0.09	0.197	0.02±0.07	0.757
Body fat %	0.16±0.13	0.228	0.10±0.10	0.325
eGFRcrea_DM	0.11±0.09	0.222	0.12±0.09	0.216
eGFRcrea_overall	-0.01±0.02	0.682	-0.01±0.02	0.488
eGFRcys_overall	0.01±0.05	0.983	0.01±0.05	0.927
WHRadjBMI	-0.06±0.10	0.56	-0.03±0.11	0.761
HDL	-0.01±0.13	0.947	-0.01±0.13	0.964
LDL	0.08±0.13	0.522	0.08±0.13	0.544
Leptin	0.03±0.13	0.838	0.07±0.13	0.623
Resting Heat Rate	0.05±0.92	0.956	-0.31±0.44	0.478
TC	0.06±0.12	0.617	0.06±0.13	0.626
TG	0.01±0.12	0.952	0.01±0.13	0.962

its

IVW		MBE		Egger-MR	
Beta±SE	P-value	Beta±SE	P-value	Beta±SE	P-value
0.06±0.06	0.325	0.05±0.11	0.674	0.08±0.14	0.549
0.10±0.07	0.159	0.18±0.14	0.204	-0.09±0.16	0.551
0.05±0.06	0.43	0.02±0.12	0.877	-0.09±0.14	0.529
0.07±0.06	0.227	0.18±0.11	0.11	-0.12±0.13	0.351
0.09±0.07	0.178	0.18±0.12	0.16	-0.12±0.16	0.445
-0.03±0.11	0.791	0.06±0.23	0.778	0.15±0.26	0.556
0.12±0.32	0.708	0.05±0.82	0.956	-0.17±0.80	0.83
0.02±0.06	0.686	0.07±0.07	0.314	-0.02±0.09	0.815
0.07±0.07	0.312	0.01±0.13	0.972	0.02±0.11	0.864
0.05±0.06	0.367	-0.07±0.10	0.503	0.01±0.15	0.925
0.01±0.02	0.792	0.03±0.03	0.353	0.08±0.06	0.152
-0.04±0.03	0.307	-0.08±0.06	0.207	-0.10±0.09	0.264
-0.05±0.08	0.509	-0.11±0.13	0.402	-0.07±0.17	0.67
0.01±0.10	0.953	0.19±0.15	0.202	0.32±0.22	0.143
0.01±0.12	0.94	0.17±0.19	0.372	0.17±0.28	0.542
-0.08±0.08	0.272	-0.01±0.15	0.966	-0.24±0.17	0.151
-0.11±0.31	0.729	-0.28±0.40	0.477	-0.48±0.37	0.203
-0.01±0.12	0.906	-0.06±0.16	0.734	0.08±0.28	0.765
0.01±0.08	0.934	-0.10±0.17	0.566	-0.11±0.18	0.542
-0.04±0.08	0.608	0.03±0.11	0.785	-0.07±0.25	0.788
-0.02±0.06	0.716	0.12±0.13	0.343	0.16±0.18	0.378
0.01±0.05	0.942	0.01±0.11	0.942	-0.11±0.16	0.508
0.03±0.06	0.527	0.10±0.10	0.306	0.32±0.15	0.034
0.01±0.06	0.879	-0.13±0.16	0.42	0.27±0.18	0.141
0.09±0.11	0.436	0.27±0.19	0.16	0.04±0.31	0.892
0.35±0.29	0.216	0.37±0.56	0.504	0.31±0.85	0.718
-0.06±0.05	0.246	0.01±0.09	0.933	0.05±0.15	0.753
0.01±0.10	0.997	0.18±0.18	0.324	0.49±0.26	0.06
-0.03±0.06	0.636	-0.09±0.10	0.372	-0.17±0.17	0.316
0.01±0.01	0.536	0.02±0.02	0.438	0.06±0.04	0.096
0.01±0.03	0.642	0.02±0.06	0.737	0.03±0.09	0.767
-0.07±0.06	0.294	0.04±0.12	0.743	-0.15±0.18	0.419
-0.01±0.07	0.919	-0.03±0.13	0.81	0.06±0.22	0.78
-0.07±0.08	0.347	-0.05±0.16	0.752	0.04±0.22	0.868
0.03±0.07	0.644	-0.04±0.15	0.78	-0.29±0.21	0.18
-0.15±0.48	0.75	0.14±0.82	0.867	0.25±1.02	0.808
-0.09±0.07	0.242	-0.13±0.14	0.378	0.03±0.22	0.896
-0.17±0.07	0.012	-0.17±0.15	0.241	-0.07±0.20	0.708
0.16±0.09	0.065	0.10±0.11	0.349	0.18±0.19	0.34
-0.06±0.08	0.439	0.06±0.12	0.647	0.06±0.15	0.712
-0.02±0.07	0.818	0.11±0.17	0.526	0.10±0.18	0.588
-0.05±0.06	0.485	-0.03±0.07	0.694	-0.01±0.11	0.961
0.01±0.08	0.974	0.09±0.11	0.452	0.10±0.15	0.497
-0.19±0.18	0.291	-0.16±0.26	0.548	-0.23±0.41	0.576
0.32±0.39	0.415	-0.39±0.74	0.601	-0.35±0.79	0.661

0.04±0.08	0.605	0.18±0.17	0.272	0.33±0.15	0.029
-0.28±0.11	0.013	-0.22±0.18	0.228	-0.22±0.24	0.359
0.07±0.09	0.475	0.03±0.17	0.84	0.23±0.36	0.525
-0.02±0.02	0.38	-0.06±0.05	0.205	-0.06±0.04	0.2
0.10±0.05	0.034	0.05±0.11	0.67	-0.03±0.19	0.879
-0.04±0.09	0.683	-0.08±0.14	0.549	-0.01±0.18	0.938
0.10±0.10	0.356	0.29±0.19	0.125	-0.12±0.22	0.597
0.22±0.13	0.094	0.15±0.18	0.42	0.11±0.29	0.704
-0.01±0.13	0.912	-0.01±0.15	0.923	-0.05±0.27	0.863
-1.03±0.87	0.237	-1.53±0.71	0.032	-2.72±1.31	0.037
0.10±0.13	0.433	0.06±0.16	0.737	-0.04±0.29	0.886
0.08±0.11	0.476	0.06±0.15	0.672	0.03±0.24	0.911
-0.02±0.08	0.775	-0.16±0.16	0.296	0.19±0.29	0.515
-0.02±0.08	0.768	0.09±0.21	0.661	-0.41±0.30	0.173
-0.01±0.05	0.866	-0.03±0.05	0.597	-0.02±0.07	0.76
0.02±0.09	0.858	0.07±0.25	0.772	-0.34±0.31	0.271
-0.02±0.08	0.772	0.03±0.26	0.913	-0.30±0.31	0.327
-0.01±0.12	0.936	-0.05±0.21	0.808	-0.17±0.20	0.401
0.31±0.39	0.438	0.50±0.76	0.515	0.20±1.52	0.894
0.06±0.07	0.411	0.01±0.07	0.897	-0.07±0.10	0.52
0.13±0.08	0.112	0.05±0.11	0.648	-0.01±0.12	0.961
0.05±0.09	0.552	0.13±0.10	0.186	0.13±0.34	0.704
-0.02±0.01	0.186	-0.01±0.02	0.49	-0.01±0.02	0.58
-0.01±0.04	0.844	0.01±0.05	0.959	0.25±0.14	0.078
0.01±0.09	0.988	-0.04±0.12	0.76	0.14±0.31	0.638
0.03±0.10	0.744	-0.05±0.22	0.838	0.48±0.37	0.196
0.05±0.11	0.608	0.09±0.18	0.628	-0.15±0.40	0.708
-0.07±0.12	0.535	0.08±0.16	0.621	-0.25±0.45	0.579
-0.14±0.45	0.757	-0.29±0.44	0.499	-0.34±0.57	0.545
0.05±0.10	0.652	0.09±0.18	0.633	-0.08±0.39	0.831
0.05±0.10	0.636	-0.06±0.19	0.766	0.28±0.35	0.423

<b>(intercept)</b>	
<b>Beta(95%CI)</b>	<b>P-value</b>
-0.01(-0.07,0.05)	0.844
0.05(-0.02,0.11)	0.186
0.03(-0.03,0.09)	0.278
0.05(-0.01,0.10)	0.105
0.05(-0.02,0.12)	0.138
-0.05(-0.16,0.07)	0.429
0.07(-0.26,0.39)	0.691
0.02(-0.03,0.07)	0.512
0.02(-0.04,0.08)	0.52
0.01(-0.06,0.07)	0.791
-0.02(-0.04,0.01)	0.151
0.02(-0.02,0.06)	0.425
0.01(-0.07,0.08)	0.878
-0.08(-0.17,0.02)	0.11
-0.04(-0.16,0.08)	0.522
0.04(-0.03,0.12)	0.292
0.31(-0.03,0.65)	0.078
-0.02(-0.14,0.09)	0.7
0.03(-0.05,0.10)	0.475
0.01(-0.12,0.13)	0.909
-0.05(-0.14,0.04)	0.29
0.03(-0.05,0.11)	0.499
-0.08(-0.16,0.00)	0.045
-0.07(-0.17,0.02)	0.133
0.01(-0.15,0.18)	0.876
0.01(-0.42,0.45)	0.954
-0.03(-0.11,0.05)	0.45
-0.14(-0.27,0.00)	0.046
0.04(-0.05,0.13)	0.37
-0.01(-0.03,0.00)	0.123
0.01(-0.05,0.04)	0.882
0.02(-0.07,0.12)	0.629
-0.02(-0.13,0.09)	0.74
-0.03(-0.15,0.09)	0.605
0.09(-0.02,0.20)	0.111
-0.14(-0.76,0.48)	0.654
-0.03(-0.15,0.08)	0.575
-0.03(-0.13,0.08)	0.607
0.01(-0.10,0.09)	0.922
-0.03(-0.11,0.04)	0.365
-0.03(-0.11,0.05)	0.484
-0.01(-0.07,0.05)	0.675
-0.03(-0.11,0.04)	0.41
0.01(-0.18,0.20)	0.918
0.19(-0.19,0.57)	0.329

-0.08(-0.16,-0.01)	0.027
-0.02(-0.13,0.10)	0.771
-0.04(-0.18,0.11)	0.639
0.01(-0.01,0.03)	0.33
0.03(-0.05,0.10)	0.465
-0.01(-0.09,0.08)	0.885
0.06(-0.05,0.16)	0.274
0.03(-0.11,0.17)	0.679
0.01(-0.13,0.15)	0.889
0.66(-0.14,1.47)	0.106
0.04(-0.10,0.18)	0.572
0.01(-0.10,0.13)	0.813
-0.05(-0.17,0.08)	0.451
0.09(-0.04,0.21)	0.182
0.01(-0.04,0.05)	0.787
0.08(-0.05,0.21)	0.23
0.06(-0.07,0.19)	0.349
0.05(-0.05,0.16)	0.322
0.02(-0.62,0.66)	0.944
0.05(-0.01,0.11)	0.114
0.06(-0.01,0.13)	0.113
-0.02(-0.16,0.13)	0.812
0.01(-0.02,0.01)	0.677
-0.06(-0.12,0.01)	0.059
-0.03(-0.17,0.10)	0.627
-0.10(-0.26,0.06)	0.211
0.05(-0.12,0.22)	0.595
0.04(-0.15,0.23)	0.681
0.18(-0.37,0.72)	0.526
0.03(-0.14,0.20)	0.728
-0.05(-0.20,0.10)	0.485



**eTable 5. Association of TMAO SNPs with dietary factors**

Trait	Variant	Chromoso	Position	Eff. allele	beta	pv
Alcohol drinker status	rs12221306	10	17001338	A	0.001111	0.18084
Alcohol drinker status	rs13236413	7	156871065	T	0.000261	0.84497
Alcohol drinker status	rs16917161	8	52966057	A	-0.00101	0.4102
Alcohol drinker status	rs17418675	2	55210605	C	-0.00027	0.74945
Alcohol drinker status	rs2703228	8	5876009	G	-0.00012	0.89206
Alcohol drinker status	rs3935570	1	19167371	T	-2.7296e-0	0.9759
Alcohol drinker status	rs4846884	1	231087075	C	-0.0013	0.25821
Alcohol drinker status	rs692588	15	29005675	G	0.00065	0.80137
Alcohol drinker status	rs7302178	12	27007893	G	-0.00056	0.62041
Fresh fruit intake	rs12221306	10	17001338	A	-0.00192	0.52652
Fresh fruit intake	rs13236413	7	156871065	T	0.00119	0.80743
Fresh fruit intake	rs16917161	8	52966057	A	0.000808	0.85725
Fresh fruit intake	rs17418675	2	55210605	C	0.007372	0.017304
Fresh fruit intake	rs2703228	8	5876009	G	0.004212	0.1787
Fresh fruit intake	rs3935570	1	19167371	T	-0.00089	0.78823
Fresh fruit intake	rs4846884	1	231087075	C	-0.00384	0.35879
Fresh fruit intake	rs692588	15	29005675	G	0.012216	0.19497
Fresh fruit intake	rs7302178	12	27007893	G	0.002047	0.61744
Coffee intake	rs12221306	10	17001338	A	9.9999e-05	0.98147
Coffee intake	rs13236413	7	156871065	T	0.006229	0.37048
Coffee intake	rs16917161	8	52966057	A	0.008875	0.16505
Coffee intake	rs17418675	2	55210605	C	-0.00139	0.7516
Coffee intake	rs2703228	8	5876009	G	-0.00443	0.3202
Coffee intake	rs3935570	1	19167371	T	0.001541	0.74225
Coffee intake	rs4846884	1	231087075	C	0.002702	0.64944
Coffee intake	rs692588	15	29005675	G	0.008896	0.50779
Coffee intake	rs7302178	12	27007893	G	-0.00251	0.66706
Pork intake	rs12221306	10	17001338	A	0.001056	0.47829
Pork intake	rs13236413	7	156871065	T	-0.00188	0.43254
Pork intake	rs16917161	8	52966057	A	-0.00214	0.33378
Pork intake	rs17418675	2	55210605	C	0.002172	0.15298
Pork intake	rs2703228	8	5876009	G	0.000361	0.81443
Pork intake	rs3935570	1	19167371	T	0.001103	0.4959
Pork intake	rs4846884	1	231087075	C	-0.00265	0.19654
Pork intake	rs692588	15	29005675	G	-0.00921	0.047017
Pork intake	rs7302178	12	27007893	G	0.000925	0.64618
Beef intake	rs12221306	10	17001338	A	0.001862	0.27615
Beef intake	rs13236413	7	156871065	T	-0.00085	0.75721
Beef intake	rs16917161	8	52966057	A	-0.00308	0.22507
Beef intake	rs17418675	2	55210605	C	-0.00041	0.81638
Beef intake	rs2703228	8	5876009	G	0.001894	0.2843
Beef intake	rs3935570	1	19167371	T	-0.00194	0.29838
Beef intake	rs4846884	1	231087075	C	-0.00087	0.71228
Beef intake	rs692588	15	29005675	G	-0.00244	0.6469
Beef intake	rs7302178	12	27007893	G	-0.00133	0.56486
Oily fish intake	rs12221306	10	17001338	A	-0.00122	0.51273
Oily fish intake	rs13236413	7	156871065	T	0.001709	0.56971
Oily fish intake	rs16917161	8	52966057	A	0.000837	0.76253

Oily fish intake	rs17418675	2	55210605	C	0.000129	0.94591
Oily fish intake	rs2703228	8	5876009	G	-0.00084	0.66485
Oily fish intake	rs3935570	1	19167371	T	-0.00083	0.68289
Oily fish intake	rs4846884	1	231087075	C	0.000447	0.86231
Oily fish intake	rs692588	15	29005675	G	0.003859	0.50686
Oily fish intake	rs7302178	12	27007893	G	0.001844	0.46576

Data were extracted from UK Biobank GWAS summary statistics. (<http://geneatlas.roslin.ed.ac.uk>)

<b>MAF</b>	<b>HWE</b>	<b>imp. score</b>
0.360158	0.4742	0.998839
0.100145	0.6929	0.977149
0.119265	0.2535	0.9881
0.335543	0.9451	0.993896
0.319607	0.1747	0.985174
0.267939	0.2443	0.995124
0.141117	0.3794	0.998045
0.025893	0.9715	0.914204
0.14919	0.8129	0.989623
0.360158	0.4742	0.998839
0.100145	0.6929	0.977149
0.119265	0.2535	0.9881
0.335543	0.9451	0.993896
0.319607	0.1747	0.985174
0.267939	0.2443	0.995124
0.141117	0.3794	0.998045
0.025893	0.9715	0.914204
0.14919	0.8129	0.989623
0.360158	0.4742	0.998839
0.100145	0.6929	0.977149
0.119265	0.2535	0.9881
0.335543	0.9451	0.993896
0.319607	0.1747	0.985174
0.267939	0.2443	0.995124
0.141117	0.3794	0.998045
0.025893	0.9715	0.914204
0.14919	0.8129	0.989623
0.360158	0.4742	0.998839
0.100145	0.6929	0.977149
0.119265	0.2535	0.9881
0.335543	0.9451	0.993896
0.319607	0.1747	0.985174
0.267939	0.2443	0.995124
0.141117	0.3794	0.998045
0.025893	0.9715	0.914204
0.14919	0.8129	0.989623
0.360158	0.4742	0.998839
0.100145	0.6929	0.977149
0.119265	0.2535	0.9881

0.335543	0.9451	0.993896
0.319607	0.1747	0.985174
0.267939	0.2443	0.995124
0.141117	0.3794	0.998045
0.025893	0.9715	0.914204
0.14919	0.8129	0.989623

<b>eTable 6. Causal effects of cardiometabolic diseases on gut dependant metabolites</b>				
	<b>TMAO</b>		<b>Choline</b>	
	<b>Beta±SE</b>	<b>P-value</b>	<b>Beta±SE</b>	<b>P-value</b>
<b>Atrial fibrillation</b>				
Simple median	-0.125±0.088	0.157	0.004±0.091	0.964
Weighted median	0.093±0.088	0.295	-0.077±0.088	0.381
IVW	-0.004±0.051	0.942	-0.036±0.057	0.522
MR-Egger	0.022±0.097	0.823	0.043±0.108	0.688
(intercept)	-0.002±0.008	0.757	-0.008±0.009	0.382
<b>Type 2 diabetes</b>				
Simple median	0.045±0.062	0.475	0.049±0.058	0.404
Weighted median	0.202±0.057	<0.0001	0.049±0.054	0.368
IVW	0.13±0.036	<0.0001	0.001±0.036	0.969
MR-Egger	0.233±0.073	0.001	0.102±0.072	0.159
(intercept)	-0.015±0.009	0.103	-0.014±0.009	0.11
<b>Stroke</b>				
Simple median	0.007±0.109	0.95	-0.027±0.124	0.827
Weighted median	0.011±0.099	0.908	-0.125±0.107	0.244
IVW	0.044±0.067	0.51	0.056±0.086	0.515
MR-Egger	0.027±0.116	0.812	-0.066±0.148	0.655
(intercept)	0.002±0.012	0.858	0.016±0.016	0.31
<b>CAD</b>				
Simple median	-0.11±0.102	0.282	0.174±0.102	0.088
Weighted median	0.034±0.1	0.736	-0.064±0.104	0.54
IVW	0.005±0.073	0.944	0.062±0.077	0.42
MR-Egger	-0.089±0.177	0.613	-0.367±0.178	0.039
(intercept)	0.009±0.015	0.557	0.041±0.016	0.008
<b>MI</b>				
Simple median	0.106±0.096	0.272	0.044±0.108	0.685
Weighted median	0.118±0.091	0.193	0.062±0.102	0.545
IVW	0.018±0.068	0.793	0.083±0.076	0.277
MR-Egger	-0.028±0.172	0.87	0.347±0.191	0.069
(intercept)	0.004±0.014	0.771	-0.024±0.016	0.132
<b>CKD</b>				
Simple median	0.866±0.251	0.001	-0.125±0.195	0.522
Weighted median	0.295±0.198	0.137	0.06±0.186	0.746
IVW	0.483±0.168	0.004	0.039±0.144	0.787
MR-Egger	-0.299±0.335	0.372	0.236±0.332	0.476
(intercept)	0.06±0.023	0.009	-0.015±0.023	0.507

<b>Carnitine</b>		<b>Betaine</b>	
<b>Beta±SE</b>	<b>P-value</b>	<b>Beta±SE</b>	<b>P-value</b>
-0.085±0.087	0.329	-0.095±0.089	0.289
0.018±0.088	0.842	-0.103±0.092	0.26
-0.076±0.051	0.14	-0.069±0.054	0.203
-0.029±0.097	0.766	-0.089±0.102	0.386
-0.005±0.008	0.567	0.002±0.008	0.819
0.025±0.057	0.66	-0.187±0.066	0.005
0.023±0.054	0.67	0.05±0.056	0.37
0.054±0.036	0.133	-0.111±0.035	0.002
0.056±0.072	0.435	0.102±0.071	0.154
0±0.009	0.966	-0.03±0.009	0.001
0.134±0.111	0.228	0.052±0.118	0.656
0.075±0.099	0.45	-0.133±0.099	0.178
0.128±0.068	0.059	0.025±0.067	0.707
0.036±0.117	0.761	-0.178±0.116	0.125
0.012±0.012	0.33	0.026±0.012	0.031
0.017±0.099	0.863	-0.042±0.091	0.642
0.029±0.095	0.759	0.04±0.09	0.655
0.024±0.06	0.686	0.039±0.06	0.513
-0.077±0.146	0.596	0.014±0.145	0.921
0.01±0.013	0.444	0.002±0.013	0.852
-0.026±0.092	0.78	-0.099±0.087	0.256
-0.023±0.094	0.805	-0.008±0.087	0.93
0.007±0.059	0.908	-0.004±0.059	0.947
-0.031±0.149	0.836	0.022±0.147	0.879
0.003±0.012	0.783	-0.002±0.012	0.846
0.339±0.2	0.089	-0.073±0.2	0.715
0.427±0.192	0.026	0.075±0.193	0.697
0.257±0.149	0.085	0.085±0.123	0.49
0.951±0.296	0.001	0.078±0.279	0.779
-0.054±0.021	0.009	0.001±0.019	0.979