

Supplementary Table 1. Performance of Clinical and Laboratory Evaluation for Detecting Active CD in the Terminal Ileum, Based on Selected Abdominal USCD Parameters

USCD parameter	Test	Sensitivity	Specificity	PPV	NPV	ACC
Thickening	Clinical activity	40.6 (25.5–57.7)	81.8 (52.3–94.8)	86.7 (62.1–96.3)	32.1 (17.9–50.7)	51.2 (36.7–65.4)
	Calprotectin	66.7 (47.8–81.4)	50.0 (23.7–76.3)	78.3 (58.1–90.3)	35.7 (16.3–61.2)	62.2 (46.1–75.9)
	CRP	42.3 (25.5–61.1)	75.0 (40.9–92.8)	84.6 (57.7–95.7)	28.6 (13.8–49.9)	50.0 (34.1–65.9)
Stricture	Clinical activity	50.0 (28.0–72.0)	74.1 (55.3–86.8)	53.3 (30.1–75.2)	71.4 (52.9–84.7)	65.1 (50.2–77.6)
	Calprotectin	71.4 (45.3–88.3)	43.5 (25.6–63.2)	43.5 (25.6–63.2)	71.4 (45.3–88.3)	54.1 (38.4–68.9)
	CRP	42.3 (25.5–61.1)	75.0 (40.9–92.8)	84.6 (57.8–95.7)	28.6 (13.8–49.9)	50.0 (34.1–65.9)
Hyperemia	Clinical activity	50.0 (29.0–70.9)	76.0 (56.6–88.5)	60.0 (35.7–80.2)	67.9 (49.3–82.1)	65.1 (50.2–77.6)
	Calprotectin	55.8 (36.0–78.4)	35.0 (18.1–56.7)	43.5 (25.6–63.2)	50.0 (26.8–73.2)	45.9 (31.0–61.6)
	CRP	87.5 (52.9–97.8)	70.0 (48.1–85.4)	53.8 (29.1–76.8)	93.3 (70.2–98.8)	75.0 (56.6–87.3)

Parentheses show lower-upper 95% CI. Abdominal ultrasonography with color Doppler (USCD) used as a criterion standard. PPV, positive predictive value; NPV, negative predictive value; ACC, accuracy.

Supplementary Table 2. Critical Analysis of Clinical and Laboratory Evaluation for Detecting Active CD in the Terminal Ileum Based on Magnetic Resonance Enterography Findings

Test	Sensitivity	Specificity	PPV	NPV	ACC
Clinical activity	45.5 (29.8–62.0)	100.0 (72.2–100.0)	100.0 (79.6–100.0)	35.7 (20.7–54.2)	58.1 (43.3–71.6)
Calprotectin	65.5 (47.3–80.1)	50.0 (21.5–78.5)	82.6 (62.8–93.0)	28.6 (11.7–54.6)	62.2 (46.1–75.9)
CRP	34.6 (19.4–53.8)	50.0 (21.5–78.5)	69.2 (42.4–87.3)	19.0 (7.7–40.0)	38.2 (23.9–54.9)

Parentheses show lower-upper 95% CI. Magnetic resonance enterography used as a criterion standard. PPV, positive predictive value; NPV, negative predictive value; ACC, accuracy.

Supplementary Table 3. Performance of Clinical and Laboratory Evaluation for Detecting Active CD in the Terminal Ileum, Based on Selected Enterography by Magnetic Resonance Parameters

MRE parameter	Test	Sensitivity	Specificity	PPV	NPV	ACC
Thickening	Clinical activity	45.5 (29.8–62.0)	100.0 (72.2–100.0)	100.0 (79.6–100.0)	35.7 (20.7–54.2)	58.1 (43.3–71.6)
	Calprotectin	65.5 (47.3–80.1)	50.0 (21.5–78.5)	82.6 (62.9–93.0)	28.6 (11.7–54.6)	62.2 (46.1–75.9)
	CRP	34.6 (19.4–53.8)	50.0 (21.5–78.5)	69.2 (42.4–87.3)	19.1 (7.7–40.0)	38.2 (23.9–55.0)
Stricture	Clinical activity	50.0 (29.9–70.1)	78.3 (58.1–90.3)	66.7 (41.7–84.8)	64.3 (45.8–79.3)	65.1 (50.2–77.6)
	Calprotectin	66.7 (43.7–83.7)	42.1 (23.1–63.7)	52.2 (33.0–70.8)	57.1 (32.6–78.6)	54.1 (38.4–69.0)
	CRP	43.8 (23.1–66.8)	66.7 (43.7–83.7)	53.8 (29.1–76.8)	57.1 (36.5–75.5)	55.9 (39.4–71.1)
Hyperemia	Clinical activity	50.0 (30.7–69.3)	81.0 (60.0–92.3)	73.3 (48.0–89.1)	60.7 (42.4–76.4)	65.1 (50.2–77.6)
	Calprotectin	65.0 (43.3–81.9)	41.2 (21.6–64.0)	56.5 (36.8–74.4)	50.0 (26.8–73.2)	54.1 (38.4–69.0)
	CRP	50.0 (29.0–71.0)	75.0 (50.5–89.8)	69.2 (42.4–87.3)	57.1 (36.5–75.5)	61.8 (45.0–76.1)

Parentheses show lower-upper 95% CI. Magnetic resonance enterography (MRE) used as a criterion standard. PPV, positive predictive value; NPV, negative predictive value; ACC, accuracy.