Table S1. The most common clinical symptoms in patients with cystic fibrosis.

Fetal and neonatal	Infancy and post-infancy	Childhood and adulthood
- calcifications in the fetal peritoneal cavity - dilation of the small fetal intestine - meconium ileus detected by ultrasound examination; early cystic fibrosis sign in 20% of newborns; complications: meconium peritonitis, gangrene, intestinal necrosis - pancreatic insufficiency: malabsorption, fatty stools, poor weight gain, growth retardation - prolonged intrahepatic cholestasis	- weight loss - recurrent pneumonia, bronchiolitis - chronic cough - pulmonary exacerbations - early-onset asthma - chronic sinusitis - chronic respiratory tract infections, including those caused by *Pseudomonas aeruginosa* or *Staphylococcus aureus* - chest X-ray abnormalities - recurrent atelectasis, hyperinflation - very salty sweat - dehydration with hypokalemia, hyponatremia, and hypochloremia alkalosis (Bartter 's purported syndrome) - collapse during heatwaves - foul-smelling, fatty, bulky stools - symptoms of malabsorption syndrome - prolapse of the rectal mucosa - symptoms of vitamin deficiencies, especially fat-soluble vitamins - hypoprothrombinemia - hypoproteinemia and edema	- chronic rhinosinusitis - recurrent lung infections - chronic respiratory tract infections, including those caused by *Pseudomonas aeruginosa, Staphylococcus aureus, Burkholderia cepacia* complex, *Stenotrophomonas maltophila* or fungal infection - chronic cough - chronic inflammation of the sinuses - nasal polyps - bronchiectasis - hemoptysis - obstructive sleep apnea and nocturnal hypoxemia - clubbing of fingers - gallstones in children - biliary cirrhosis - portal hypertension - esophageal varices - splenomegaly - recurrent pancreatitis - growth and weight deficiency - recurrent swelling of the parotid glands - delayed puberty - male infertility (obstructive azoospermia) - diabetes

The data presented in Table S1 are summarized from the literature cited in the main manuscript [8,12–16].