Supplemental material

Table 1. Criteria set employed for electrodiagnosis of GBS subtypes on the basis of a single test.[1-3]

AIDP	AMAN	AMSAN	UNEXCITABLE	EQUIVOCAL
At least one of the following in at least two nerves: ‣ MCV <70% LLN ‣ DML>130 % ULN ‣ dCMAP duration >120% ULN ‣ pCMAP/dCMAP duration ratio >130% ‣ F-response latency>120% ULN Or one of the above in one nerve, plus: ‣ Absent F waves in two nerves with dCMAP > 20% LLN ‣ Abnormal ulnar SNAP amplitude and normal sural SNAP amplitude	None of the AIDP features in any nerve (demyelinating features allowed in one nerve if dCMAP <20% LLN) And at least one of the following in each of two nerves: ‣ dCMAP<80% LLN ‣ pCMAP/dCMAP amplitude ratio <0.7 (excluding tibial nerve) ‣ Isolated F wave absence (or <20% persistence)	‣ Same criteria as AMAN in motor nerves, plus: ‣ SNAP amplitudes < 50% LLN in at least two nerves	‣ Distal CMAP absent in all nerves (or present in only one with distal CMAP <10% LLN)	‣ Abnormal findings not fulfilling specific criteria for other subtypes

Legend: AIDP, acute inflammatory demyelinating polyradiculoneuropathy; AMAN, acute motor axonal neuropathy; AMSAN, acute motor and sensory axonal neuropathy; ULN, upper limit of normal; LLN, lower limit of normal; DML, distal motor latency; MVC, motor conduction velocity; CMAP, compound muscle action potential; dCMAP, distal compound muscle action potential; pCMAP/dCMAP ratio between proximal and distal amplitude compound muscle action potential; SNAP, sensory nerve action potential.

1) Uncini A, Ippoliti L, Shahrizaila N, Sekiguchi Y, Kuwabara S. Optimizing the electrodiagnostic accuracy in Guillain-Barré syndrome subtypes: Criteria sets and sparse linear discriminant analysis. \Clin Neurophysiol 2017;128:1176-83

2) Uncini A, Kuwabara S. The electrodiagnosis of Guillain-Barré syndrome subtypes: where do we stand? Clin Neurophysiol 2018; 29: 2586-93

3) Uncini A, González-Bravo DC, Acosta-Ampudia YY, Ojeda EC, Rodriguez Y, Monsalve DM, et al. Clinical and nerve conduction features in Guillain-Barré syndrome associated with zika virus infection in Cúcuta, Colombia. Eur J Neurol 2018.25:644-50