Supplementary Information

Guiding ketogenic diet with breath acetone sensors

Andreas T. Güntner1*, Julia F. Kompalla1, Henning Landis1, S. Jonathan Theodore1, Bettina Geidl2, Noriane A. Sievi3, Malcolm Kohler3, Sotiris E. Pratsinis1 and Philipp A. Gerber2*

1 Particle Technology Laboratory, Department of Mechanical and Process Engineering, ETH Zurich, CH-8092 Zurich, Switzerland
2 Department of Endocrinology, Diabetes, and Clinical Nutrition, University Hospital Zurich, CH-8091 Zurich, Switzerland
3 Department of Pulmonology, University Hospital Zurich, CH-8091 Zurich, Switzerland

*corresponding authors: Andreas.Guentner@ptl.mavt.ethz.ch
Philipp.Gerber@usz.ch
Figure S1: Individual (a) breath acetone, capillary blood (b) BOHB and (c) glucose levels of 11 volunteers during a 36-h ketogenic diet. Note that volunteer #1 (green circles) aborted the experiment already after 24 h due to strong nausea. Volunteer #4 (pink crosses) suffered also from nausea after the overnight sleep (approx. at t = 22 h) and took a small dose of dextrose resulting in the observed blood glucose peak at t = 24 h.