	Intractable Disease Consultation Suppor Center	Japan Intractable t Diseases Information Center	Patient Association	Medical Subsidy System	Designated Rare/Intractable Diseases
CPGs (n)	3	12	17	21	36
1	X	X	X	Х	X
2	X	X			
3	Х		Х	Х	Х
4-7		Х	Х	Х	Х
8		Х	Х		Х
9		Х	Х		
10		Х		Х	Х
11-12		Х			Х
13		Х			
14-19			Х	Х	Х
20			Х		Х
21-22			Х		
23-30				Х	Х
31-41					Х
42-55					

## **Table S1.** Five keywords in each CPG (n = 55)

(1) CPG1: CPG for Multiple sclerosis/neuromyelitis optica; (2) Amyloidosis; (3) Spinocerebellar degeneration; (4) Vascular anomalies; (5) Autoinflammatory disease; (6) Pulmonary hypertension; (7) Prion disease; (8) Adrenoleukodystrophy; (9) Subacute sclerosing panencephalitis; (10) Progressive multifocal leukoencephalopathy; (11) Familial hypercholesterolemia; (12) Sarcoidosis; (13) Stevens-Johnson syndrome/toxic epidermal necrolysis; (14) ANCA-associated vasculitis, (15) Cystinosis; (16) Acute encephalopathy in children; (17) Dementia; (18) Pulmonary veno-occlusive disease/pulmonary capillary hemangiomatosis; (19) Chronic thromboembolic pulmonary hypertension; (20) Dystonia; (21) Wilson's disease; (22) Biliary atresia; (23) Vasculitis syndrome; (24) Thrombotic thrombocytopenic purpura; (25) Autoimmune hemorrhaphilia XIII; (26) Feurofibromatosis 1; (27) Diseases targeted for newborn screening; (28) Congenital heart disease in adults; (29) Acquired idiopathic generalized anhidrosis; (30) Idiopathic pulmonary fibrosis, (31) Alport's syndrome; (32) Rapidly progressive glomerulonephritis; (33) Autoimmune hepatitis; (34) Non-IgE-mediated gastrointestinal food allergy; (35) Adult-onset Still's disease; (36) Dermatomyositis/polymyositis; (37) Pseudoxanthoma elasticum; (38) Allied Hirschsprung's disease; (39) Pompe disease; (40) Mucopolysaccharidosis type 2; (41) Pemphigoid; (42) Werner's syndrome; (43) Nephrotic syndrome; (44) Polycystic kidney disease; (45) IgA nephropathy; (46) Inflammatory bowel disease; (47) Vasculitis / vasculopathy; (48) Primary biliary cholangitis; (49) Acquired hemophilia A; (50) Congenital diaphragmatic hernia; (51) Generalized scleroderma; (52) Epilepsy; (53) Giant infantile hepatic hemagioma; (54) Generalized pustular psoriasis; (55) Portal hypertension.

		Cassis et al.* 2000 to 2015 ( <i>n</i> = 55)		The present study 2015 to August 2018 (n = 55)	
Domains		$mean \pm SD$	median	$mean \pm SD$	median
1.	Scope and Purpose	$78\%\pm12\%$	81%	$64\%\pm23\%$	69%
2.	Stakeholder Involvement	$48\%\pm22\%$	44%	$45\%\pm24\%$	42%
3.	Rigor of Development	$48\%\pm20\%$	46%	$38\%\pm27\%$	28%
4.	Clarity of Presentation	$74\%\pm16\%$	78%	$64\%\pm24\%$	69%
5.	Applicability	$39\%\pm15\%$	38%	$31\%\pm22\%$	31%
6.	Editorial Independence	$41\%\pm35\%$	46%	$38\%\pm24\%$	38%

Table S2. Summary of the six domain scores of AGREE II assessment

Each domain score was calculated between 0% and 100%.

\* Data were derived from Cassis et al. report [Cassis L, Cortes-Saladelafont E, Molero-Luis M, et al. Review and evaluation of the methodological quality of the existing guidelines and recommendations for inherited neurometabolic disorders. Orphanet J Rare Dis. 2015;10:164<sup>(50)</sup>].

Domain 3: Rigor of Development	Cassis et al.* 2000 to 2015 (n = 55)		The present study 2015 to August 2018 (n = 55)	
Items	$\text{mean}\pm\text{SD}$	median	$\text{mean}\pm\text{SD}$	median
7. Systematic methods were used to search for evidence.	$4.4\pm2.0$	4.5	$3.9\pm2.4$	5
8. The criteria for selecting the evidence are clearly described.	$3.3\pm2.0$	3	$3.4\pm2.2$	3
9. The strengths and limitations of the body of evidence are clearly described.	$3.7\pm1.8$	3.5	$3.0\pm1.9$	2
10. The methods for formulating the recommendations are clearly described.	$3.7\pm1.9$	3.5	$2.7\pm1.8$	2
11. The health benefits, side effects, and risks have been considered in formulating the recommendations.	$5.4\pm1.2$	6	$3.6\pm1.8$	3
12. There is an explicit link between the recommendations and the supporting evidence.	$5.6\pm1.2$	6	$4.2\pm1.7$	4
13. The guideline has been externally reviewed by experts prior to its publication.	$2.6\pm2.1$	1.5	$2.9\pm1.9$	2
14. A procedure for updating the guideline is provided.	$2.3\pm1.7$	1.5	$2.4\pm2.1$	1

Table S3. Sum	nary of the eight item s	cores in domain 3 (Rigor	of Development	of AGREE II assessment

Each item was rated on a 7-point scale (1: strongly disagree to 7: strongly agree).

\* As the data were not included by Cassis et al. in their report [Cassis L, Cortes-Saladelafont E, Molero-Luis M, et al. Review and evaluation of the methodological quality of the existing guidelines and recommendations for inherited neurometabolic disorders. Orphanet J Rare Dis. 2015;10:164<sup>(50)</sup>], the authors provided the data on demand from us. We thank the authors, who provided us with this information.