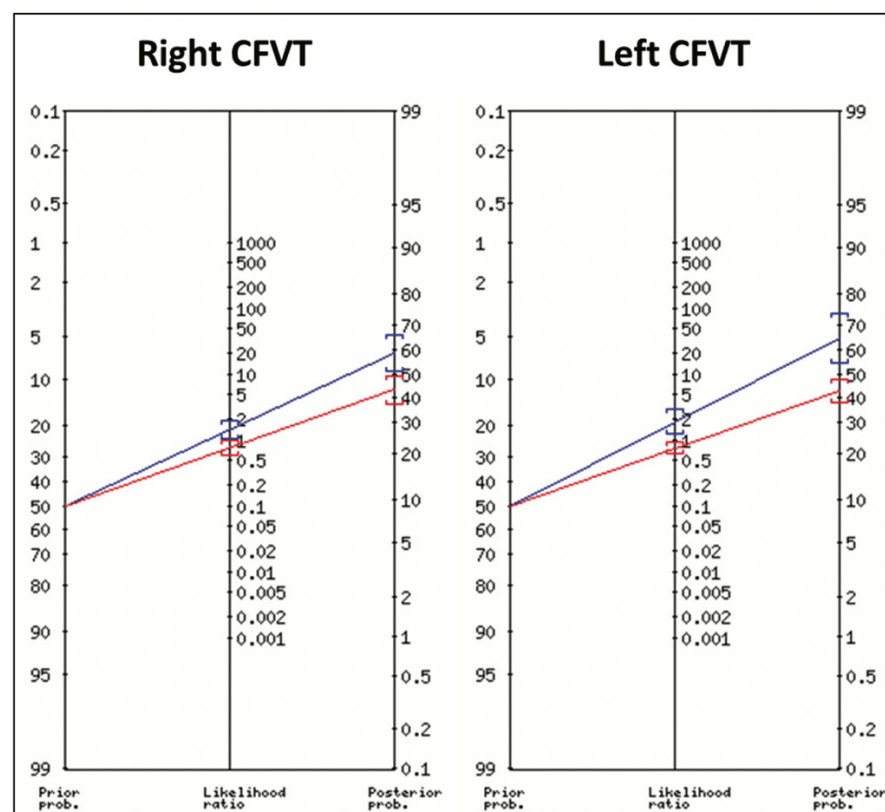


Supplementary Table S1. Venous insufficiency and reflux in the lower limbs.

Variables	Behçet's disease (n=100)	Controls (n=100)	<i>p</i>
Right common iliac vein	14	10	0.384
Left common iliac vein	21	14	0.248
Right common femoral vein	13	18	0.329
Left common femoral vein	23	18	0.399
Right deep femoral vein	2	3	0.677
Left deep femoral vein	5	5	0.593
Right femoral vein	3	3	1.000
Left femoral vein	8	3	0.177
Right popliteal vein	10	7	0.263
Left popliteal vein	7	8	0.587
Right great saphenous vein	20	29	0.150
Left great saphenous vein	19	20	0.886
Right small saphenous vein	9	9	0.605
Left small saphenous vein	10	8	0.529
Right anterior tibial vein	0	0	NA
Left anterior tibial vein	0	0	NA
Right posterior tibial vein	1	2	0.561
Left posterior tibial vein	2	0	0.218
Right fibular vein	1	2	0.561
Left fibular vein	2	0	0.155
Right perforating veins	5	5	1.000
Left perforating veins	8	5	0.390

NA: not applicable.

**Supplementary Fig. S1.** Fagan's nomogram for the impact of CFVT in post-test probability for the diagnosis of Behçet's disease.

95% CI: 95% confidence interval; BD: Behçet's disease; CFVT: common femoral vein thickness.

In the right CFVT, a positive test increased the probability of diagnosing BD from 50.0% (*i.e.*, prevalence of BD in the study) to 59.0% (95% CI: 51.0-67.0%), while a negative test reduced the chance of diagnosing BD to 43.0% (95% CI: 37.0-49.0%). In left CFVT, a positive test increased the probability of a diagnosis of BD from 50% to 65.0% (95% CI: 55.0-74.0%), while a negative test reduced the chance of a diagnosis of BD to 43.0% (95% CI: 38.0-47.0%).

Supplementary Table S2. Correlations between common femoral vein thickness and continuous variables in patients with Behçet's disease.

Variables	Right common femoral vein, mm	Left common femoral vein, mm
CRP, mg/L	Rho = 0.129; $p = 0.329$	Rho = 0.230; $p = 0.079$
ESR, mm	Rho = 0.192; $p = 0.084$	Rho = 0.168; $p = 0.130$
Creatinine, mg/dL	Rho = -0.136; $p = 0.220$	Rho = -0.234; $p = 0.033$
Physician's VAS	Rho = 0.079; $p = 0.560$	Rho = -0.005; $p = 0.969$
BR-BDCAFs	Rho = -0.089; $p = 0.557$	Rho = 0.153; $p = 0.309$
Daily prednisone dose, mg	Rho = 0.279; $p = 0.186$	Rho = 0.264; $p = 0.213$
Age at study, years	Rho = 0.168; $p = 0.094$	Rho = 0.113; $p = 0.264$
Time since diagnosis	Rho = 0.102; $p = 0.310$	Rho = -0.045; $p = 0.655$
Number of vascular events	Rho = 0.475; $p = 0.030$	Rho = 0.429; $p = 0.052$

The analyses were performed by the Spearman's correlation coefficient.

BR-BDCAFs: Brazilian version of the short form of the Behçet's Disease Current Activity Form; CRP: C-reactive protein; ESR: erythrocyte sedimentation rate; VAS: visual analogic scale.

Supplementary Table S3. The impact of therapy on common femoral vein thickness in Behçet's disease.

Variables	Therapy		<i>p</i>
	<i>Prednisone</i>	<i>No prednisone</i>	
Right CFVT, mm	0.550 (0.450-0.687)	0.600 (0.500-0.700)	0.299
Left CFVT, mm	0.525 (0.450-0.637)	0.550 (0.450-0.650)	0.410
	<i>Immunosuppressants</i>	<i>No immunosuppressants</i>	
Right CFVT, mm	0.550 (0.500-0.687)	0.600 (0.462-0.700)	0.913
Left CFVT, mm	0.550 (0.450-0.650)	0.550 (0.450-0.650)	0.821
	<i>Biological agents</i>	<i>No biological agents</i>	
Right CFVT, mm	0.600 (0.500-0.700)	0.600 (0.500-0.700)	0.851
Left CFVT, mm	0.550 (0.450-0.650)	0.550 (0.450-0.650)	0.935

Results are presented as median and interquartile range; the Mann-Whitney test was used to analyse differences between groups.

CFVT: common femoral vein thickness.