

**Supplementary Table 1. The sequences of qPCR primers used in this study.**

miRNA	Sequences	Primer
miR-122-5p	UGGAGUGUGACAAUGGUGUUUG	GCAGTGGAGTGTGACAATG
miR-148a-3p	UCAGUGCACUACAGAACUUUGU	GCAGTCAGTGCAC TACAGA
miR-99a-5p	AACCCGUAGAUCCGAUCUUGUG	CAGAACCCGTAGATCCGA
miR-423-5p	CUGACCUAUGAAUJUGACAGCC	CAGCTGACCTATGAATTGACA
miR-192-5p	UGAGGUAGUAGAUUGUAUAGUU	GCCGTGAGGTAGTAGATTGTATAGTT
miR-151a-3p	CUAGACUGAAGCUCCUUGAGG	GCTAGACTGAAGCTCCTTG
let-7f-5p	UAGCUUAUCAGACUGAUGUUGA	GCGTAGCTTATCAGACTGATGTTGA
miR-21-5p	UGAGGUAGUAGGUUGUAUGGUU	TGAGGTAGTAGGTTGTATGGTT
let-7c-5p	AACCCGUAGAUCCGAACUUGUG	CAGAACCCGTAGATCCGA
miR-100-5p	UUCACAGUGGCUAAGUUCUGC	GCAGTTCACAGTGGCTAAG
miR-27b-3p	UUUGUUCGUUCGGCUCGCGUGA	AGTTTGTTCGTTGGCTC
miR-375-3p	UGUAACAGCAACUCCAUGUGGA	TGTAACAGCAACTCCATGTGG
miR-16-2-3p	AAUGGAUUUUUGGAGCAGG	GCAATGGATTGGAGCAGG
miR-194-5p	UCCCUGAGACCCUAACUUGUGA	TCCCTGAGACCCTAACTTGTGA
miR-186-5p	UUCAAGUAUUUCAGGAUAGGU	GCGCAGTTCAAGTAATTCA
miR-1246	AGUUCUUCAGUGGCAAGCUUUA	AGTTCTTCAGTGGCAAGCTTTA
miR-125b-5p	UGGAUUUUUGGAUCAGGGGA	GTGGATTTGGATCAGGGGA
miR-26b-5p	UGAGGGGCAGAGAGCGAGACUUU	CAGTGAGGGGCAGAGAG
miR-22-5p	CCAAUAUUACUGUGCUGCUUUA	CGCAGCCAATATTACTGTG
miR-1-3p	CAAAGAAUUCUCCUUUGGGCU	CGCAGCAAAGAATTCTCCT
miR-19b-3p	UGGAAUGUAAGAAGUAUGUAU	CGGTGGAATGTAAAGAAGTATGTA
miR-1290	UGUGCAAAUCCAUGCAAAACUGA	GCTGCAAATCCATGCAAAACTGA

Universal anti-sense was used for reverse primer.

**Supplementary Table 2. Spearman correlation analysis investigating the association between exosomal miRNAs and clinical indicators in the NGT and GDM group separately.**

	miR-423-5p		miR-122-5p		miR-148a-3p		miR-192-5p		miR-99a-5p	
	r	P	r	P	r	P	r	P	r	P
<b>NGT group</b>										
Age	0.05	0.63	0.14	0.16	-0.07	0.49	0.03	0.78	0.00	1.00
Prepregnancy-BMI	0.03	0.79	-0.09	0.40	-0.02	0.88	-0.01	0.94	-0.02	0.86
BMI at OGTT	-0.05	0.66	-0.07	0.53	-0.03	0.80	-0.03	0.77	-0.04	0.75
GWG	-0.13	0.21	0.07	0.50	-0.03	0.81	0.01	0.96	-0.14	0.18
TG	0.04	0.72	0.05	0.64	0.01	0.94	-0.01	0.91	-0.04	0.67
CHOL	0.02	0.81	0.17	0.09	0.05	0.60	0.08	0.45	-0.01	0.90
HDL	0.08	0.41	0.04	0.73	0.11	0.29	0.11	0.26	0.19	0.06
LDL	0.05	0.62	0.14	0.16	0.08	0.41	0.07	0.49	-0.02	0.85
FPG	0.09	0.35	0.09	0.36	0.06	0.57	0.06	0.58	-0.01	0.95
1h-PG	-0.15	0.14	0.01	0.95	-0.18	0.07	-0.04	0.69	-0.04	0.71
2h-PG	-0.27	0.01	-0.07	0.47	<b>-0.29</b>	<b>&lt;0.01</b>	<b>-0.22</b>	<b>0.02</b>	-0.06	0.53
HbA1c	-0.02	0.82	-0.08	0.40	-0.08	0.41	-0.05	0.64	-0.07	0.47
Birth weight	-0.06	0.55	-0.06	0.60	-0.07	0.48	0.03	0.76	-0.06	0.60
<b>GDM group</b>										
Age	-0.06	0.58	0.07	0.47	0.01	0.94	-0.06	0.56	0.07	0.46
Prepregnancy-BMI	-0.03	0.75	-0.18	0.08	-0.19	0.08	-0.15	0.15	-0.06	0.58
BMI at OGTT	-0.04	0.73	-0.20	0.09	<b>-0.24</b>	<b>0.04</b>	-0.11	0.37	-0.11	0.37
GWG	0.02	0.87	-0.01	0.94	-0.08	0.46	-0.03	0.77	-0.05	0.62
TG	-0.01	0.89	-0.06	0.59	0.09	0.40	0.03	0.80	-0.02	0.88
CHOL	0.04	0.67	0.04	0.67	0.08	0.40	0.08	0.42	0.19	0.06
HDL	0.08	0.42	-0.04	0.68	0.07	0.51	0.05	0.63	0.08	0.45
LDL	-0.02	0.84	0.02	0.87	0.03	0.75	0.02	0.88	0.12	0.23
FPG	0.16	0.10	0.10	0.31	0.06	0.58	0.01	0.89	0.16	0.11
1h-PG	0.10	0.31	0.10	0.30	0.02	0.86	0.04	0.72	0.01	0.95
2h-PG	0.07	0.50	0.11	0.25	-0.05	0.63	-0.04	0.67	-0.09	0.39
HbA1c	0.09	0.38	-0.10	0.33	0.02	0.84	-0.01	0.89	-0.02	0.81
Birth weight	-0.16	0.13	0.06	0.60	-0.12	0.27	-0.02	0.86	0.05	0.64

**Supplementary Table 3. Risk estimates for GDM based on single miRNA levels in prediction set.**

miRNAs	Model 1			Model 2			Model 3		
	OR	95% CI	P value	OR	95% CI	P value	OR	95% CI	P value
miR-423-5p	0.65	0.31-1.38	0.591	0.62	0.28-1.37	0.235	0.63	0.28-1.41	0.259
miR-122-5p	0.58	0.34-0.97	0.041	0.49	0.26-0.92	0.026	0.33	0.14-0.79	0.012
miR-148a-3p	0.12	0.03-0.44	0.001	0.10	0.02-0.39	0.001	0.10	0.02-0.41	0.001
miR-192-5p	0.13	0.04-0.46	0.001	0.10	0.03-0.40	0.001	0.10	0.02-0.40	0.001
miR-99a-5p	0.04	0.006-0.28	0.001	0.02	0.003-0.20	<0.001	0.02	0.002-0.19	<0.001

Logistic regression analysis was used. Model 1 included no adjustment. Model 2 was adjusted for age and BMI at enrollment. Model 3 was adjusted for age, BMI at enrollment, alanine aminotransferase (ALT), and aspartate transaminase (AST). GDM, gestational diabetes mellitus; 95% CI, 95% confidence intervals; OR: odds ratio.

**Supplementary Table 4. Net reclassification improvement for GDM prediction with the addition of miRNAs to base model (clinical parameters).**

base model + miRNAs	Categorical NRI		Continuous NRI	
	Estimate (95% CI)	P	Estimate (95% CI)	P
Overall	0.86 (0.29-1.33)	<0.01	0.95 (0.70-1.64)	<0.01
GDM	0.41 (0.06-0.70)	0.01	0.52 (0.27-0.85)	<0.01
NGT	0.45 (0.12-0.70)	<0.01	0.43 (0.31-0.85)	<0.01

Reclassification of GDM Risk based on net reclassification improvement (NRI).

Separate analyses were performed in the overall, GDM, and NGT cohorts. Base model:

FPG + age + BMI; miRNAs: miR-423-5p + miR-122-5p + miR-148a-3p + miR-192-5p + miR-99a-5p. 95% CI, 95% confidence intervals; GDM, gestational diabetes mellitus; NGT, normal glucose tolerance; FPG, fasting plasma glucose; BMI, pre-pregnancy body mass index.

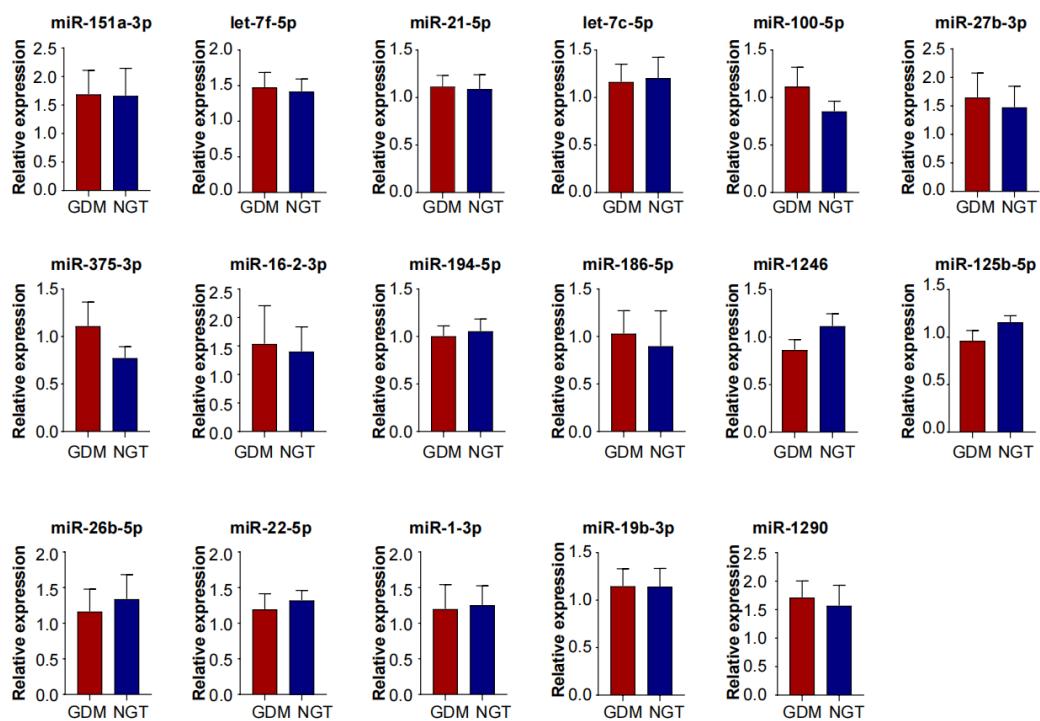
**Supplementary Table 5. The miRNA mimic or inhibitor sequences.**

Mimic/inhibitor	Sequence (5'-3')
has-miR-122-5p mimic (double strand)	UGGAGUGUGACAAUGGUGUUUG ACCUCACACUGUUACCACAAAC
has-miR-122-5p inhibitor (single strand)	ACCUCACACUGUUACCACAAAC
has-miR-148a-3p mimic (double strand)	UCAGUGCACUACAGAACUUUGU ACAAAGUUCUGUAGUGCACUGA
has-miR-148a-3p inhibitor (single strand)	ACAAAGUUCUGUAGUGCACUGA
has-miR-192-5p mimic (double strand)	CUGACCUAUGAAUUGACAGCC GACUGGAUACUUAACUGUCGG
has-miR-192-5p inhibitor (single strand)	GACUGGAUACUUAACUGUCGG
has-miR-423-5p mimic (double strand)	UGAGGGGCAGAGAGCGAGACUUU ACUCCCCGUCUCUCGCUAGAAA
has-miR-423-5p inhibitor (single strand)	ACUCCCCGUCUCUCGCUAGAAA AACCCGUAGAUCCGAUCUUGUG
has-miR-99a-5p mimic (double strand)	UUGGGCAUCUAGGCUAGAACAC
has-miR-99a-5p inhibitor (single strand)	UUGGGCAUCUAGGCUAGAACAC

**Supplementary Table 6. The association of differential expression miRNAs with metabolic regulation reported previously.**

<b>miRNA</b>	<b>Expression</b>	<b>Function and key targets</b>
miR-423-5p (1-4)	Increase	Overexpression inhibits IGF1R and GYS1, interfering with insulin signal transduction and promotes gluconeogenesis and lipid deposition.
miR-122-5p (5-9)	Decrease	Underexpression elevates G6PC3 and FDFT1, leading to hepatic insulin resistance, glycolysis inhibition and glucose uptake reduction.
miR-148a-3p (10-13)	Decrease	Negatively correlated with glucose and HbA1c levels and BMI. Overexpression alleviated high glucose induced diabetic retinopathy by targeting TGFB2 and FGF2
miR-192-5p (14, 15)	Decrease	Underexpression increases blood glucose. Overexpression decreases adipose deposition and triglyceride.
miR-99a-5p (16)	Decrease	Overexpression inhibits NOX4, ameliorating liver metabolic disorders.

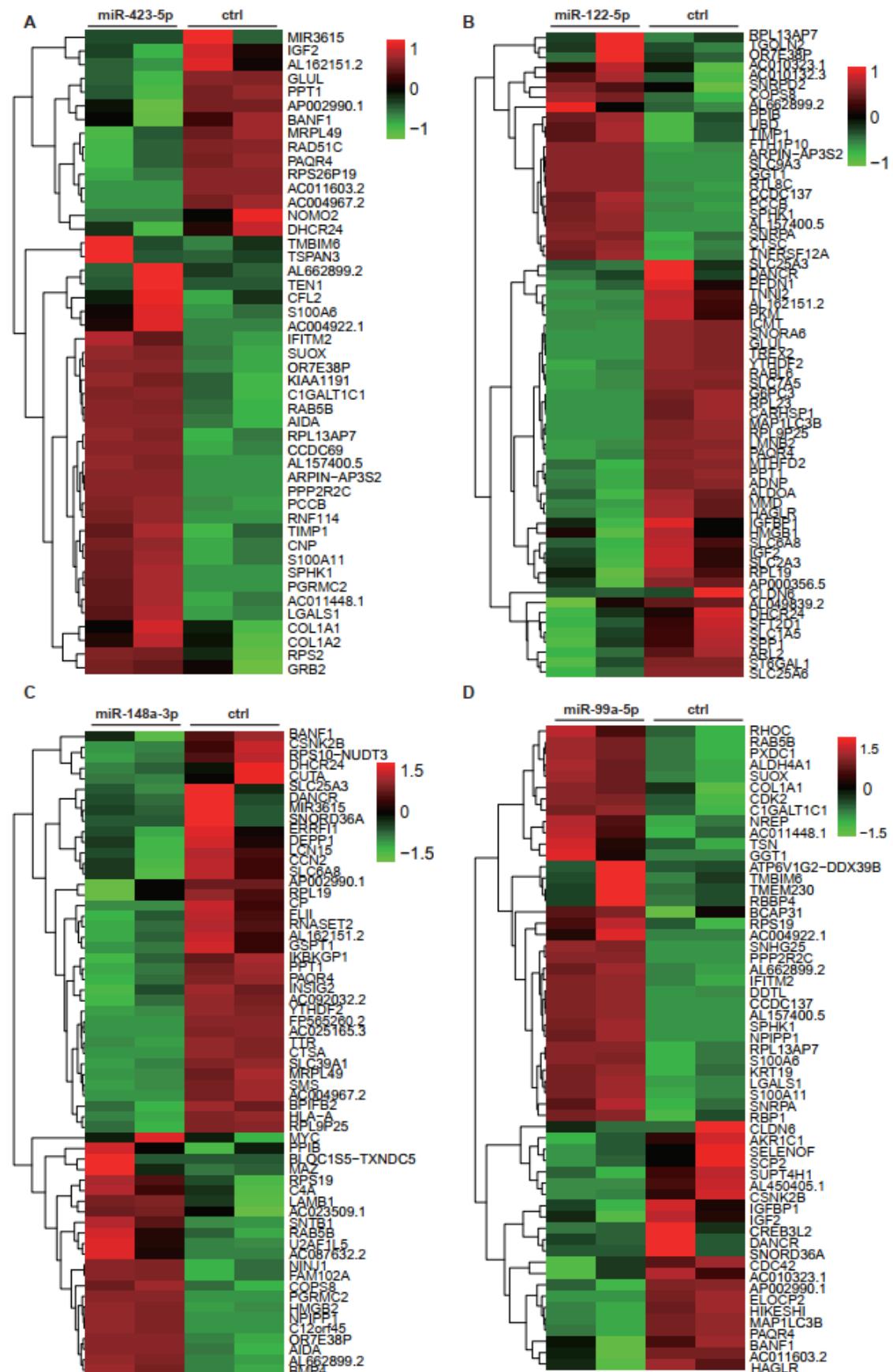
## Supplementary Figure 1



**Supplementary Figure 1. The qRT-PCR validation results of miRNAs that were inconsistent with the results of small RNA sequencing data.**

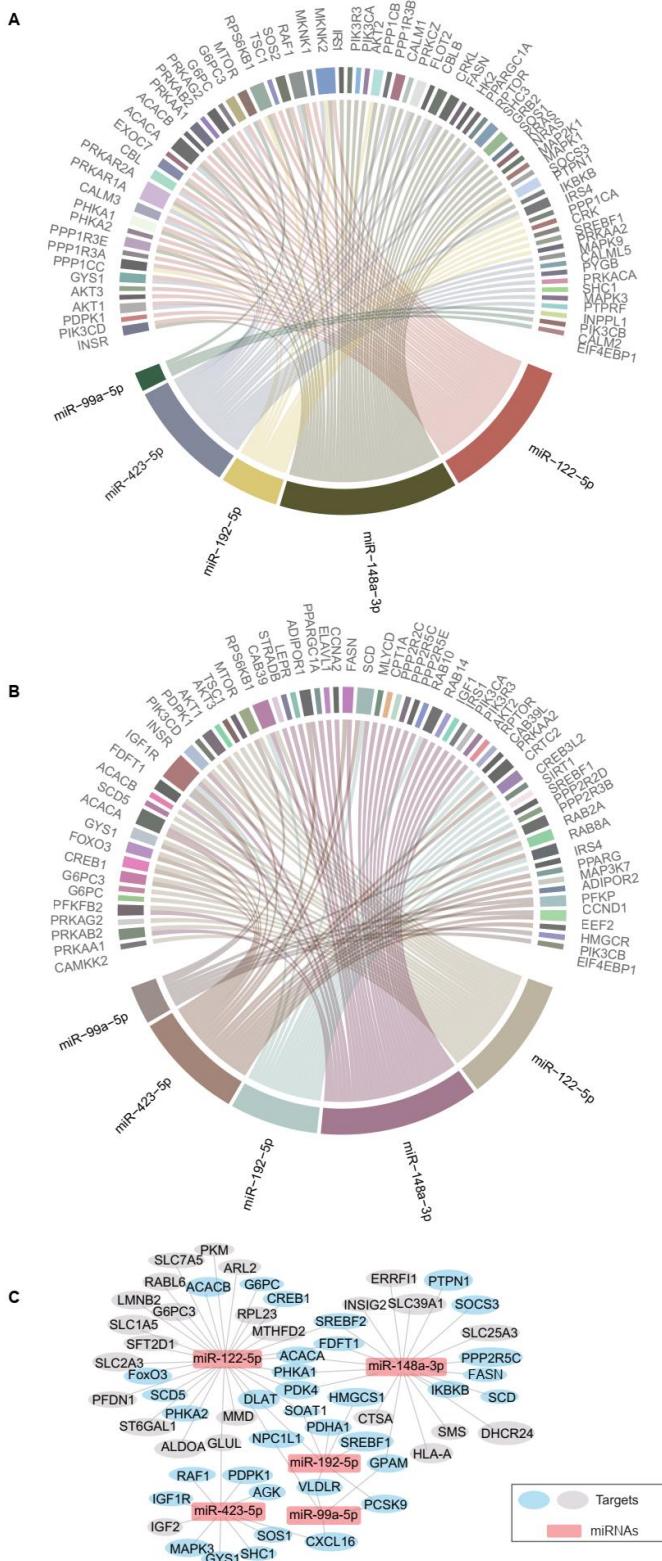
In dysregulated exosomal miRNAs identified as differential expressed miRNA in the Small RNA next-generation sequencing data, 17 miRNAs of them did not show significant difference between GDM and NGT groups in the validation set.

**Supplementary Figure 2**



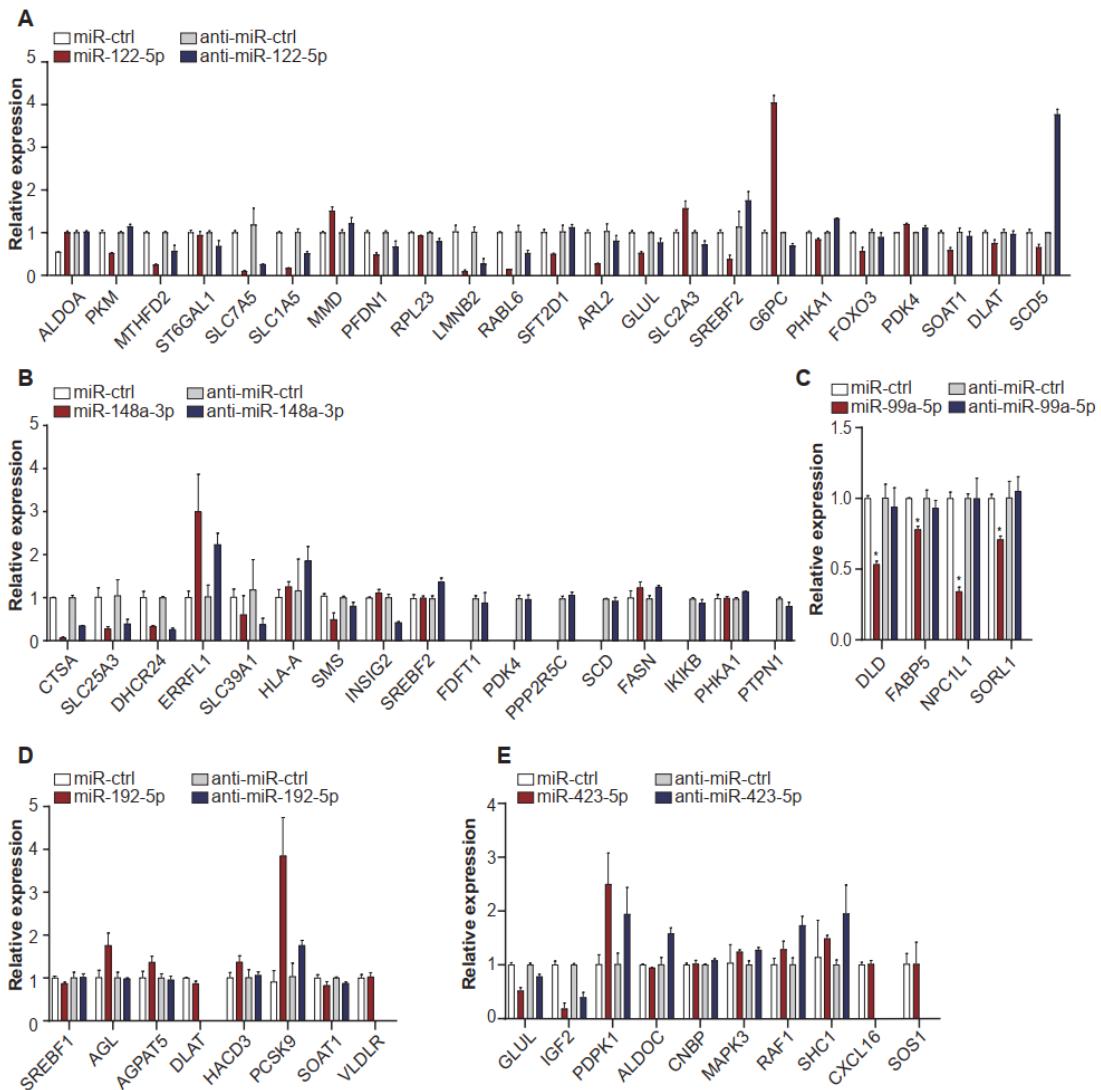
**Supplementary Figure 2. The mRNA expression profile in HepG2 cells using next-generation sequencing after miRNAs transfection.** The mRNA expression profile of miR-423-5p overexpressed HepG2 cells **(A)**, miR-122-5p overexpressed HepG2 cells **(B)**, miR-148a-3p overexpressed HepG2 cells **(C)** and miR-99a-5p overexpressed HepG2 cells **(D)**.

### Supplementary Figure 3



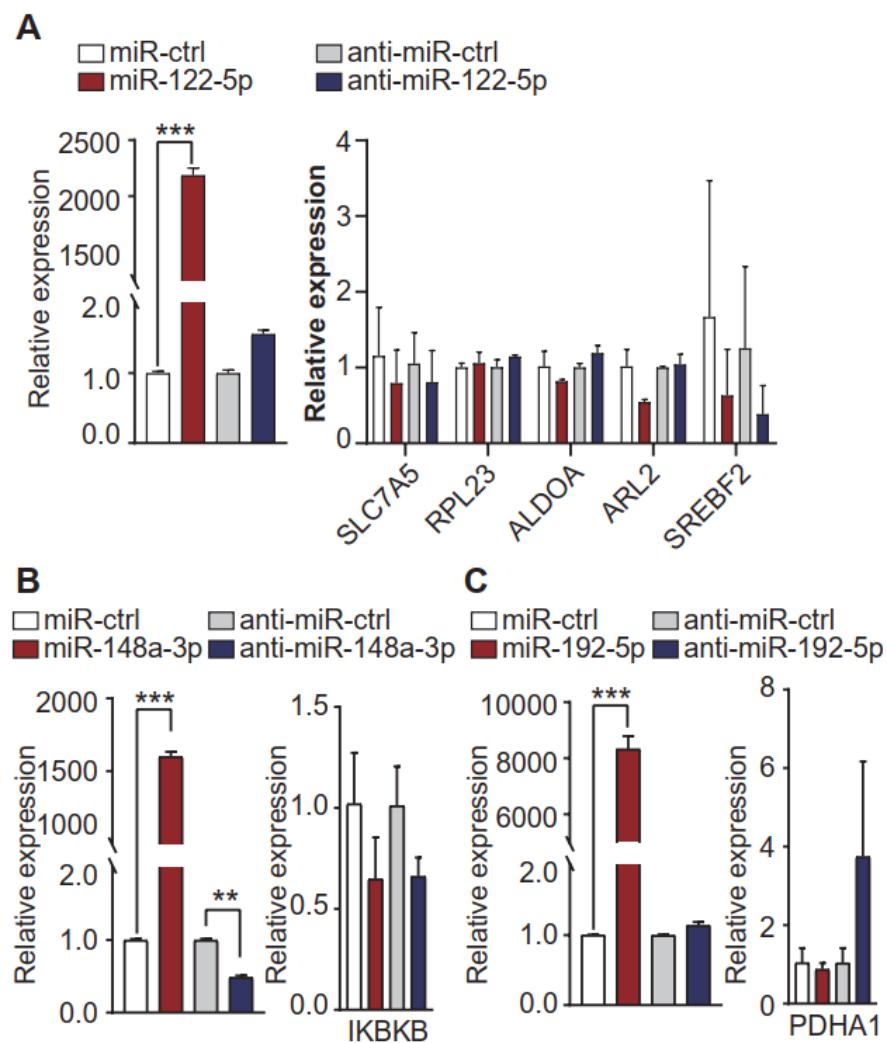
**Supplementary Figure 3.** **(A)** Predicted targets involved in the insulin signaling pathway. **(B)** Predicted targets involved in the AMPK signaling pathway. **(C)** Potential miRNA-mRNA regulatory networks in miRNA overexpressed cells.

## Supplementary Figure 4



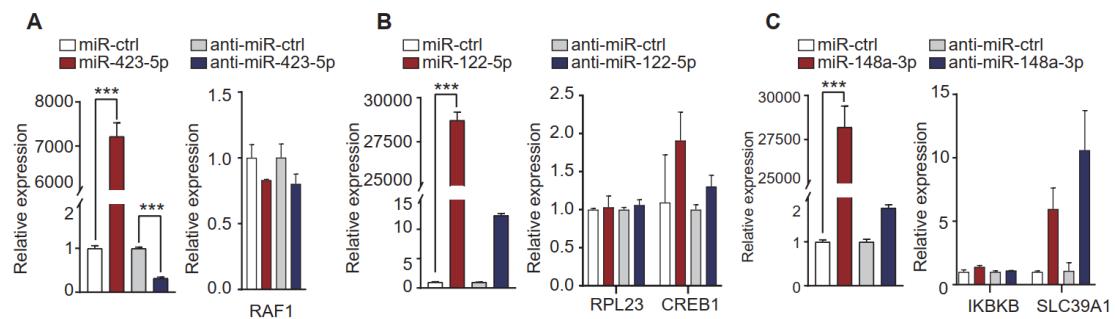
**Supplementary Figure 4. The expression of target genes in cells transfected with mimics or inhibitors of miRNAs.** The functional targets identified in computational prediction and transcriptome sequencing and insulin signal related genes but not respectively reverse related with the levels of miR122-5p (**A**), miR-148a-3p (**B**), miR-99a-5p (**C**), miR-192-5p (**D**), and miR-423-5p (**E**).

### Supplementary Figure 5



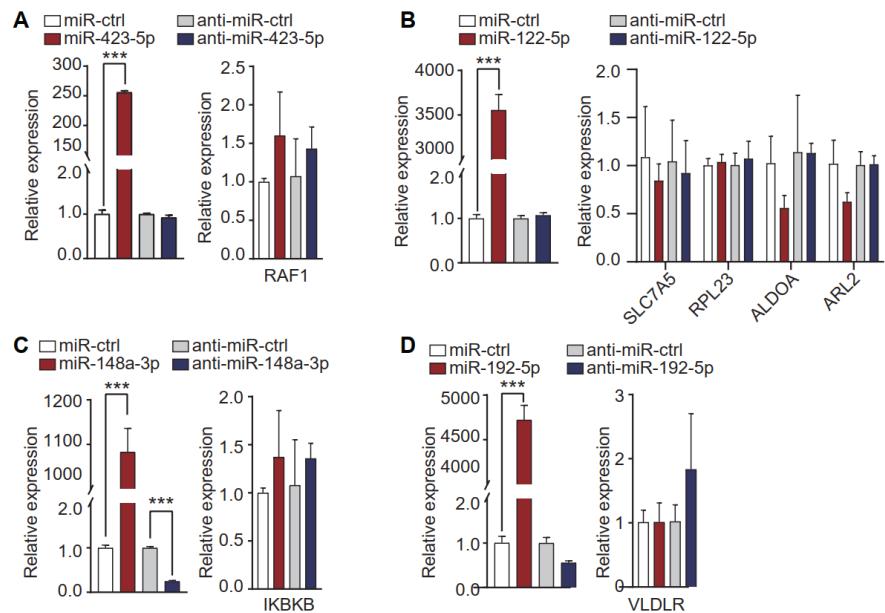
**Supplementary Figure 5. The expression of target genes in C2C12 cells transfected with mimics or inhibitors of miRNAs. (A-C)** Transfection efficiencies (left) and expression of target genes (right) of miRNAs, miR-122-5p (A), miR-148a-3p (B), and miR-192-5p (C).

## Supplementary Figure 6



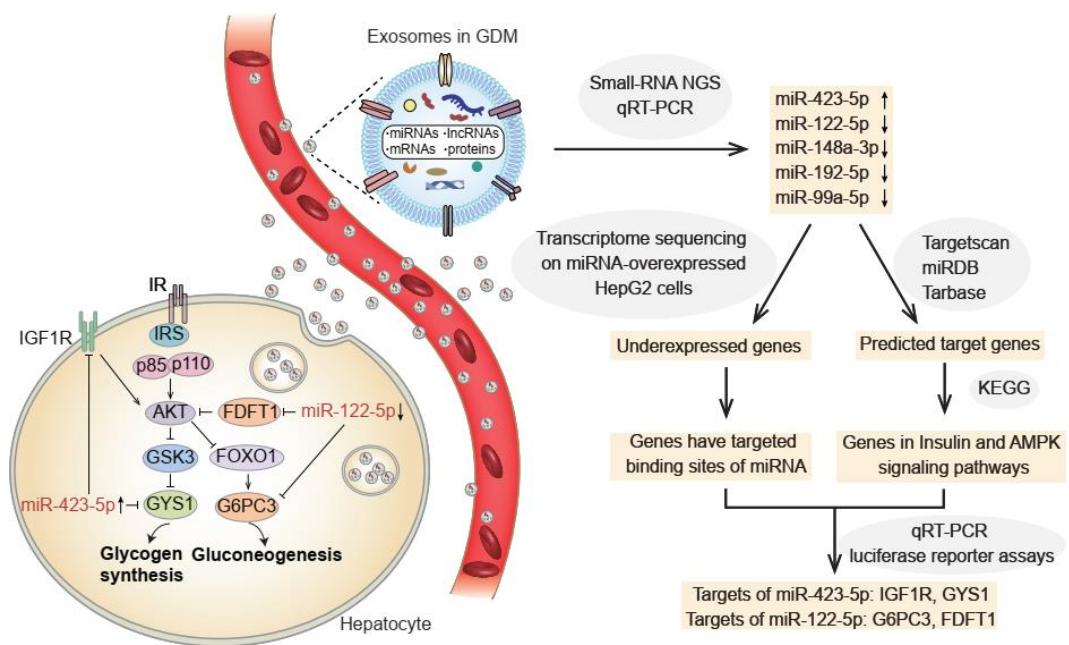
**Supplementary Figure 6. The expression of target genes in MIN6 cells transfected with mimics or inhibitors of miRNAs.** (A-C) Transfection efficiencies (left) and expression of target genes (right) of miRNAs, miR-423-5p (A), miR-122-5p (B), and miR-148a-3p (C).

## Supplementary Figure 7



**Supplementary Figure 7. The expression of target genes in 3T3-L1 cells transfected with mimics or inhibitors of miRNAs. (A-D)** Transfection efficiencies (left) and expression of target genes (right) of miRNAs, miR-423-5p (A), miR-122-5p (B), miR-148a-3p (C), and miR-192-5p (D).

## Supplementary Figure 8



**Supplementary Figure 8.** Schematic presentation of the research process and the mechanisms of miR-423-5p and miR-122-5p regulated metabolism.

## Reference

1. Ansarullah, Jain C, Far FF, Homberg S, Wißmiller K, von Hahn FG, et al. Inceptor counteracts insulin signalling in  $\beta$ -cells to control glycaemia. *Nature*. 2021;590(7845):326-31.
2. Fernández AM, Kim JK, Yakar S, Dupont J, Hernandez-Sanchez C, Castle AL, et al. Functional inactivation of the IGF-I and insulin receptors in skeletal muscle causes type 2 diabetes. *Genes Dev*. 2001;15(15):1926-34.
3. Xirouchaki CE, Mangiafico SP, Bate K, Ruan Z, Huang AM, Tedjosiswoyo BW, et al. Impaired glucose metabolism and exercise capacity with muscle-specific glycogen synthase 1 (gys1) deletion in adult mice. *Mol Metab*. 2016;5(3):221-32.
4. Yang W, Wang J, Chen J, Meng Y, Chen L, et al. NFE2 Induces miR-423-5p to Promote Gluconeogenesis and Hyperglycemia by Repressing the Hepatic FAM3A-ATP-Akt Pathway. *Diabetes*. 2017;66(7):1819-32.
5. Yang YM, Seo SY, Kim TH, Kim SG. Decrease of microRNA-122 causes hepatic insulin resistance by inducing protein tyrosine phosphatase 1B, which is reversed by licorice flavonoid. *Hepatology*. 2012;56(6):2209-20.
6. Carreras-Badosa G, Bonmatí A, Ortega FJ, Mercader JM, Guindo-Martínez M, Torrents D, et al. Altered Circulating miRNA Expression Profile in Pregestational and Gestational Obesity. *J Clin Endocrinol Metab*. 2015;100(11):E1446-56.
7. Rui L. Energy metabolism in the liver. *Compr Physiol*. 2014;4(1):177-97.
8. Masih D, Tripathi JK, Rakhra G, Vats A, Verma SK, Jha PK, et al. Deciphering Biochemical and Molecular Signatures Associated with Obesity in Context of Metabolic Health. *Genes (Basel)*. 2021;12(2).
9. Roberts GAG, Tunster SJ. Characterising the dynamics of placental glycogen stores in the mouse. *Placenta*. 2020;99:131-40.
10. Shah KB, Chernausek SD, Teague AM, Bard DE, Tryggestad JB. Maternal diabetes alters microRNA expression in fetal exosomes, human umbilical vein endothelial cells and placenta. *Pediatr Res*. 2021;89(5):1157-63.
11. Mononen N, Lyytikäinen LP, Seppälä I, Mishra PP, Juonala M, Waldenberger M, et al. Whole blood microRNA levels associate with glycemic status and correlate with target mRNAs in pathways important to type 2 diabetes. *Sci Rep*. 2019;9(1):8887.
12. Sharma NK, Varma V, Ma L, Hasstedt SJ, Das SK. Obesity Associated Modulation of miRNA and Co-Regulated Target Transcripts in Human Adipose Tissue of Non-Diabetic Subjects. *Microrna*. 2015;4(3):194-204.
13. Wang J, Yao Y, Wang K, Li J, Chu T, Shen H. MicroRNA-148a-3p alleviates high glucose-induced diabetic retinopathy by targeting TGFB2 and FGF2. *Acta Diabetol*. 2020;57(12):1435-43.
14. Liu XL, Cao HX, Wang BC, Xin FZ, Zhang RN, Zhou D, et al. miR-192-5p regulates lipid synthesis in non-alcoholic fatty liver disease through SCD-1. *World J Gastroenterol*. 2017;23(46):8140-51.
15. Cai H, Jiang Z, Yang X, Lin J, Cai Q, Li X. Circular RNA HIPK3 contributes to hyperglycemia and insulin homeostasis by sponging miR-192-5p and upregulating transcription factor forkhead box O1. *Endocr J*. 2020;67(4):397-408.

16. Li P, Fan C, Cai Y, Fang S, Zeng Y, Zhang Y, et al. Transplantation of brown adipose tissue up-regulates miR-99a to ameliorate liver metabolic disorders in diabetic mice by targeting NOX4. *Adipocyte*. 2020;9(1):57-67.