**Online Suppl. Figure E1.** Patients presenting for allergy diagnosis due to suspected food allergy or anaphylaxis of unknown origin at the Allergy Unit of the Department of Dermatology were routinely serologically screened for nonobvious food allergies that were independent from other allergy tests as part of regular medical care. In the case of suspected alpha-gal syndrome, prick-to-prick tests using raw and cooked muscular meat and kidney from pork and beef were performed as advanced diagnoses to determine the individual´s sensitivity to the alpha-gal epitope. This testing was combined with an intradermal testing with gelatin-derived colloid (Gelafundin 4%, B. Braun Melsungen, Germany). Histamine was used as a positive control, and the diluent was used as a negative control. Reactions producing wheals with a diameter of >3 mm on the prick-to-prick test and wheals with a diameter of >5 mm on the intradermal test were considered positive results. Further optional diagnostic oral challenge tests with pork and beef were performed as previously described. A diagnosis of alpha-gal syndrome was made if there was an allergic reaction after consumption of mammalian meat or entrails and/or administration of alpha-gal-containing drugs (e.g., cetuximab, gelatin colloids) was reported in the patient’s history, alpha-gal sIgE was detectable with the ImmunoCAP assay and type I sensitization to the alpha-gal epitope was confirmed in skin testing.

**Online Suppl. Figure E2.** Alpha-gal sIgE levels in allergy patients depending on the time since the tick bites according to the questionnaire.

**Online Suppl. Figure E3.** Visualization of the course of alpha-gal sIgE and tIgE levels in two selected patients with alpha-gal syndrome after tick bites.

**Online Suppl. Figure E4.** Proportion of positive prick-to-prick testing with mammalian kidney/ meat and intradermal testing with gelatin in patients with no tolerance of mammalian meat in their medical history (patients with alpha-gal syndrome) in comparison to allergy patients with tolerance of mammalian meat (silent type I sensitization to alpha-gal).