

Supplementary Materials

Supplemental figure 1. Immunohistochemistry staining for uPAR in glomeruli and tubules of renal specimens from normal controls and AAV patients.

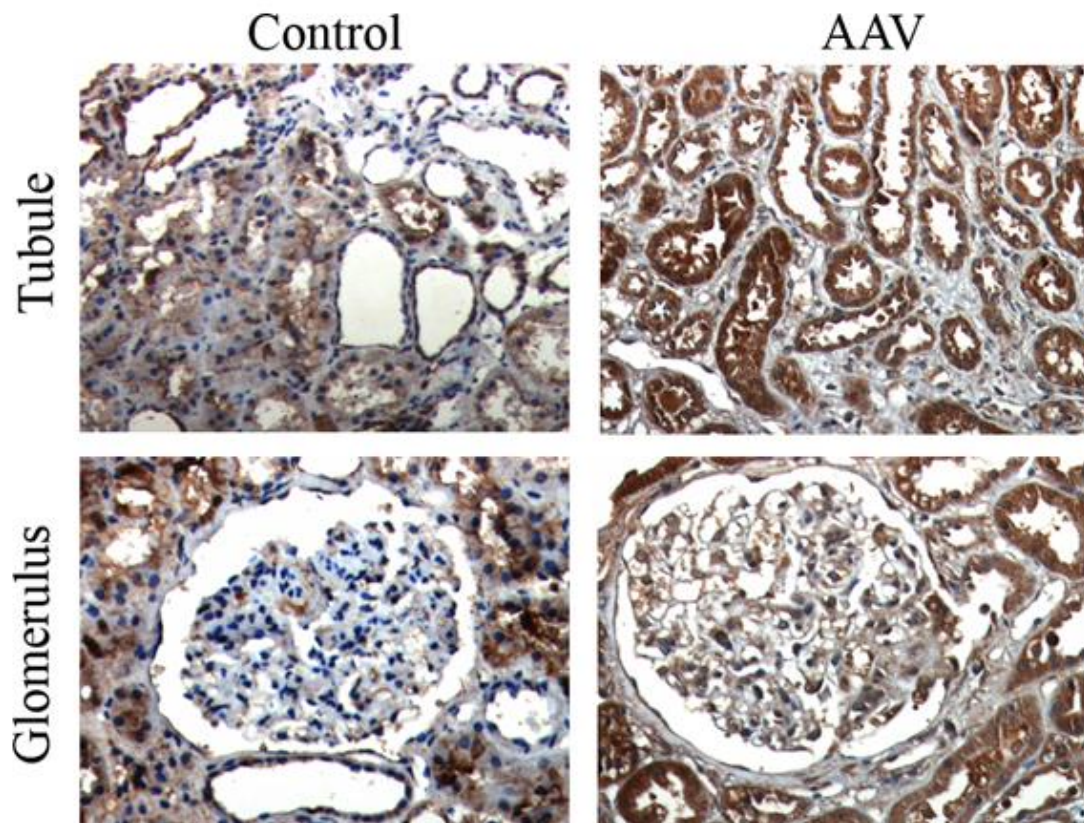
Supplemental figure 2. Analysis of uPAR gene expression in glomeruli of vasculitis patients. The publicly accessible Nephroseq dataset was used for the expression analysis of glomerular uPAR gene. The histogram showed significantly greater of uPAR gene expression in vasculitis patients vs healthy controls (t-test).

Supplemental figure 3. Plasma levels of suPAR in AAV patients with PCT levels below 0.5 ng/mL and normal controls.

Supplemental figure 4. Association between plasma levels of suPAR and prognosis in AAV patients with a follow-up period of 3-51 months. (A) Kaplan-Meier survival curves showed associations with composite outcomes (death or ESRD) according to suPAR status. (B) Kaplan-Meier survival curves showed associations with ESRD according to suPAR status.

Supplemental table 1. Multivariate analysis of composite outcome in AAV patients with a follow-up period of 3-51 months.

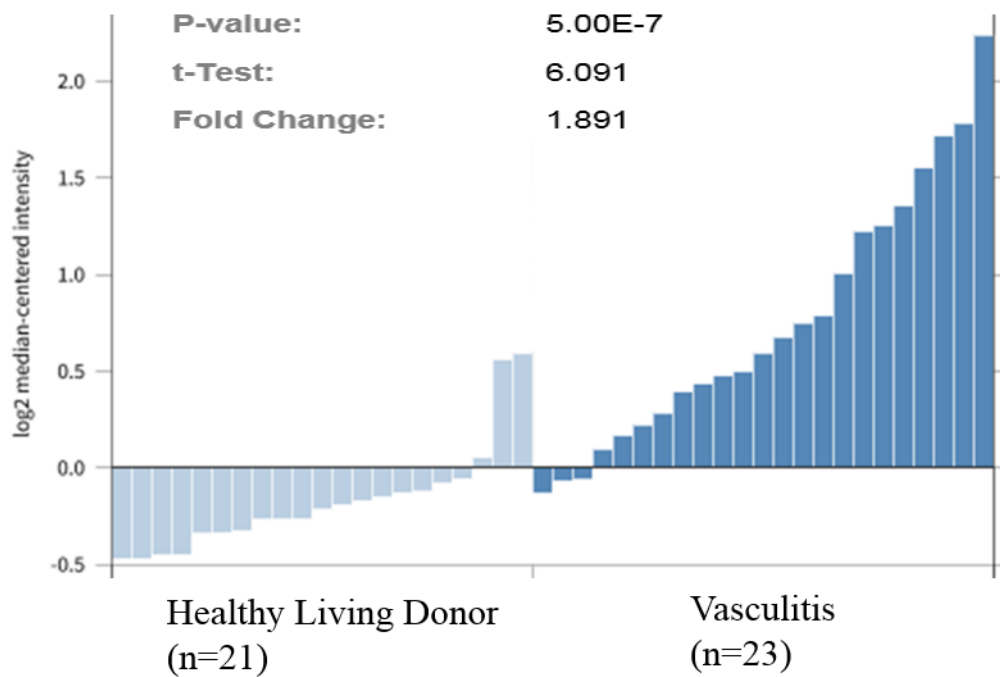
Supplemental figure 1



Immunohistochemistry staining for uPAR in glomeruli and tubules of renal specimens from normal controls and AAV patients.

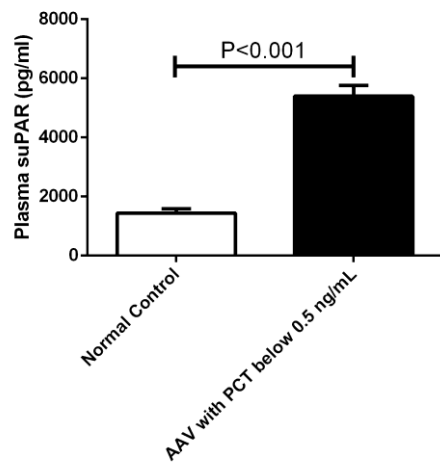
Supplemental figure 2

uRAR expression in Ju CKD glom
Vasculitis vs. Healthy Living Donor



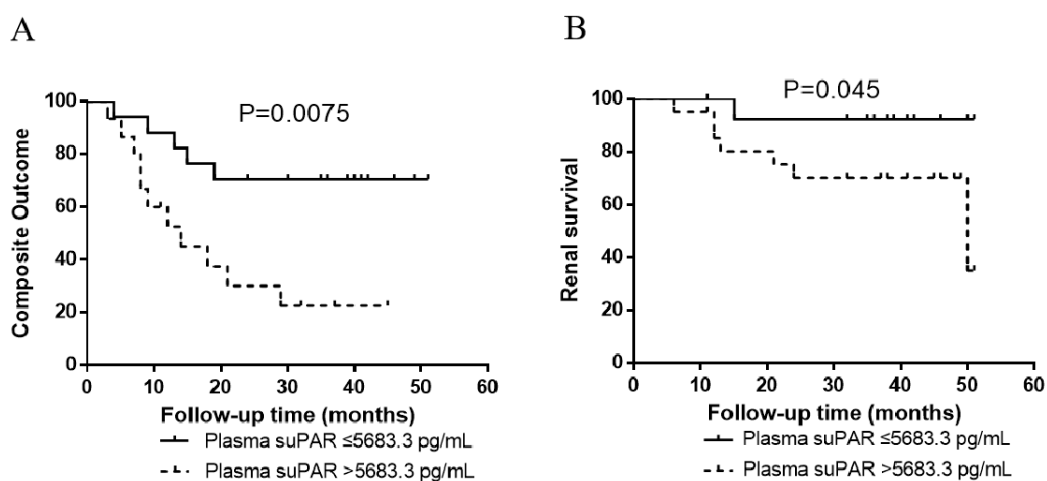
Analysis of uPAR gene expression in glomeruli of vasculitis patients. The publicly accessible Nephroseq dataset was used for the expression analysis of glomerular uPAR gene. The histogram showed significantly greater of uPAR gene expression in vasculitis patients vs healthy controls (t-test).

Supplemental figure 3



Plasma levels of suPAR in AAV patients with PCT levels below 0.5 ng/mL and normal controls.

Supplemental figure 4



Association between plasma levels of suPAR and prognosis in AAV patients with a follow-up period of 3-51 months. (A) Kaplan-Meier survival curves showed associations with composite outcomes (death or ESRD) according to suPAR status. (B) Kaplan-Meier survival curves showed associations with ESRD according to suPAR status.

Supplemental table 1. Multivariate analysis of composite outcome in AAV patients with a follow-up period of 3-51 months.

| | Univariate | | Multivariate* | | Multivariate† | |
|---|-----------------|---------|-----------------|---------|-----------------|---------|
| | HR (95% CI) | P value | HR (95% CI) | P value | HR (95% CI) | P value |
| Plasma suPAR levels (per 500 pg/mL increase) | 1.07(1.03-1.12) | 0.002 | 1.06(0.97-1.16) | 0.158 | 1.00(0.92-1.10) | 0.935 |
| Age, yr§ | 1.10(1.04-1.16) | 0.001 | 1.07(1.02-1.14) | 0.012 | 1.12(1.04-1.20) | 0.002 |
| Gender (male vs. female) | 0.69(0.27-1.80) | 0.453 | 0.64(0.24-1.74) | 0.385 | 0.32(0.09-1.14) | 0.079 |

| | | | | | | |
|---|-----------------|-------|---|---|-----------------|-------|
| Initial serum creatinine (per mg/dl) | 1.16(1.04-1.29) | 0.010 | - | - | 1.43(1.11-1.84) | 0.006 |
| Urinary protein (per g/24 h) | 0.91(0.61-1.34) | 0.624 | - | - | 1.98(0.61-1.57) | 0.934 |
