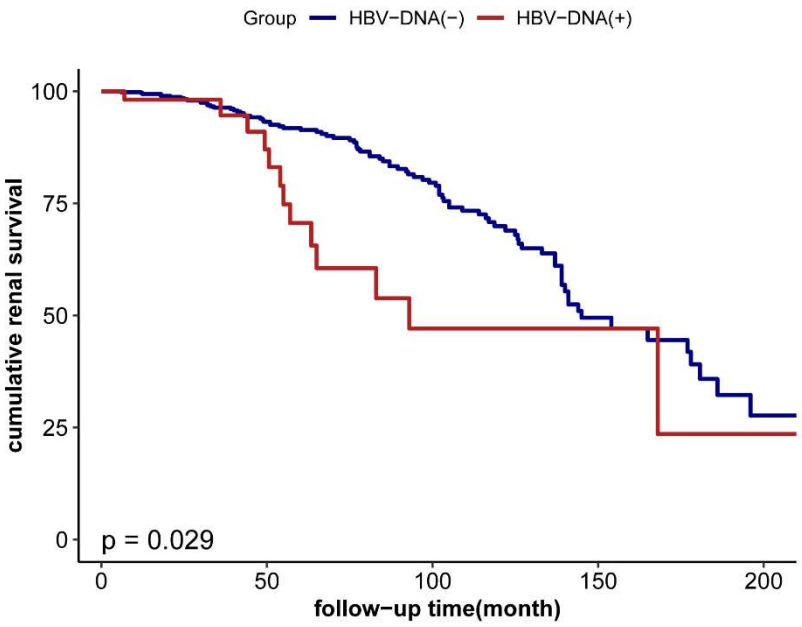
Table S1. Demographics and clinical features of patients after 1:4 propensity score matching

Characteristics	Before matching		*p*	After matching		*p*
	No infection (n = 1405)	Chronic infection (n = 132)		No infection (n = 500)	Chronic infection (n = 125)	
female, n (%)	697 (49.6)	59 (44.7)	0.313	232 (46.4)	57 (45.6)	0.800
age（y）	34.3 ± 12.0	37.1 ± 10.2	0.008	37.3 ± 12.6	36.7 ± 10.0	0.357
BMI（kg/m2）	24.4 ± 4.0	25.1 ± 4.0	0.063	25.0 ± 4.2	24.9 ± 3.9	0.800
SBP（mmHg）	124.4 ± 15.5	124.4 ± 13.5	0.988	124.1 ± 15.2	124.4 ± 13.4	0.749
DBP（mmHg）	78.7 ± 11.3	79.5 ± 10.6	0.477	78.9 ± 11.0	79.4 ± 10.6	0.431
prodromic infection n (%)	467 (33.2)	29 (22)	0.017	112 (22.4)	29 (23.2)	0.763
gross hematuria n (%)	360 (25.6)	21 (15.9)	0.014	91 (18.2)	21 (16.8)	0.560
nephrotic syndrome n(%)	15 (8.5)	106 (7.6)	0.484	42 (8.4)	7 (5.6)	0.083
serum albumin (g/L)	37.7 ± 6.1	36.6 ± 5.7	0.052	36.8 ± 6.1	36.6 ± 5.8	0.588
LDL-C (mmol/L)	2.9 ± 1.2	2.9 ± 1.1	0.891	2.9 ± 1.1	2.9 ± 1.1	0.464
total cholesterol (mmol/L)	5.1 ± 1.7	5.0 ± 1.3	0.437	5.0 ± 1.5	5.0 ± 1.3	0.913
triglycerides (mmol/L)	1.7 (1.1, 2.5)	1.7 (1.1, 2.5)	0.966	1.6 (1.1, 2.3)	1.7 (1.1, 2.5)	0.197
plasma IgA (g/L)	3.1 (2.4, 3.9)	3.1 (2.5, 4.0)	0.537	3.2 (2.5, 3.9)	3.0 (2.5, 3.9)	0.611
C3 (g/L)	1.0 (0.9, 1.2)	0.9 (0.8, 1.1)	< 0.001	1.0 (0.8, 1.1)	0.9 (0.8, 1.1)	0.364
proteinuria (g/24h)	1.3 (0.7, 2.6)	1.3 (0.6, 2.4)	0.723	1.2 (0.6, 2.4)	1.3 (0.6, 2.5)	0.505
ACR (mg/g)	706.5 (330.6, 1454.7)	759.4 (312.4, 1395.8)	0.994	705.8 (352.4, 1428.3)	771.3 (330.3, 1416.3)	0.570
eGFR (mL/min/1.73m2)	84.2 (55.4, 107.0)	80.0 (58.9, 100.5)	0.206	3.0 (2.5, 3.9)	0.611	0.259
serum creatinine (mmol/L)	107.5 ± 57.1	107.5 ± 50.4	0.994	107.5 ± 47.3	107.3 ± 51.2	0.940
Uric Acid	377.1 ± 104.2	384.5 ± 101.8	0.433	382.7 ± 104.3	385.7 ± 101.9	0.646

Abbreviations: ACR:albumin-to-creatinine ratio; URBC:Urine red blood cell count;eGFR: estimated glomerular filtration rate; LDL-C:low-density lipoprotein cholesterol.

Figure S1. Comparison of Kaplan-Meier renal survival curves for IgAN with HBV, presence of replicative HBV, and without replicative HBV



STROBE Statement.

	Item No	Recommendation	Page No
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract	1
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found	2-3
Introduction			
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	3-4
Objectives	3	State specific objectives, including any prespecified hypotheses	4
Methods			
Study design	4	Present key elements of study design early in the paper	4
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	4,
Participants	6	(*a*) Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up	4-5
		(*b*) For matched studies, give matching criteria and number of exposed and unexposed	4, Fig.1
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	6
Data sources/ measurement	8	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group	5
Bias	9	Describe any efforts to address potential sources of bias	7
Study size	10	Explain how the study size was arrived at	NA
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	7
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding	7
		(*b*) Describe any methods used to examine subgroups and interactions	7
		(*c*) Explain how missing data were addressed	7
		(*d*) If applicable, explain how loss to follow-up was addressed	NA
		(*e*) Describe any sensitivity analyses	7
Results			
Participants	13	(a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed	7
		(b) Give reasons for non-participation at each stage	7
		(c) Consider use of a flow diagram	Fig.1
Descriptive data	14	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	8, Table1
		(b) Indicate number of participants with missing data for each variable of interest	Table1
		(c) Summarise follow-up time (eg, average and total amount)	9
Outcome data	15	Report numbers of outcome events or summary measures over time	9

Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included	9,Figure2 Table2
		(b) Report category boundaries when continuous variables were categorized	NA
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	NA
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	9-10 Table3, Figure3
Discussion			
Key results	18	Summarise key results with reference to study objectives	12
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias	15-16
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	12-15
Generalisability	21	Discuss the generalisability (external validity) of the study results	16
Other information			
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based	17