Appendix 1 (as supplied by the authors): Causes of end-stage renal disease categorized as primary and secondary glomerulonephritis, diabetes and congenital renal disease

Primary Glomerulonephritis
Mesangial proliferative glomerulonephrtits
Minimal lesion glomerulonephritis
Post-streptococcal glomerulonephritis
Rapidly progressive glomerulonephritis
Focal glomerulonephritis
Glomerulonephritis, histologically not examined
Severe nephrotic syndrome with focal sclerosis(pediatric patients)
IgA nephropathy - proven by immunoflorescence
Dense deposit disease - proven by immunoflorescence and/or electron microscopy(MPGN type II)
Membranous nephropathy
Membrano proliferative mesangiocapillary glomerulonephritis (MPGN Type II)
Idiopathic crescentic glomerulonephritis (diffuse proliferative)
Glomerulonephritis, histologically examined

Secondary Glomerulonephritis
Polyarteritis nodosa
Wegener's granulomatosis
Systemic lupus erythematosus
Henoch-Schonlein purpura
Goodpasture's syndrome
Scleroderma

Diabetes
Diabetic nephropathy associated with type 1
Diabetic nephropathy associated with type 2

Congenital Renal Disease
Pyelonephritis/interstitial nephritis associated with neurogenic bladder
Pyelonephritis/interstitial nephritis due to congenital obstructive uropathy with or without vesico-ureteric reflux
Pyelonephritis/interstitial nephritis due to vesico-ureteric reflux without obstruction
Cystic kidney disease, type unspecified
Posterior urethral valves
Congenital renal hypoplasia, specify
Oligomegonephronic hypoplasia
Segmental renal hypoplasia (Ask-Upmark kidney)
Congenital renal dysplasia with or without urinary tract malfunction
Syndrome of agencies of abdominal muscles (Prune Belly syndrome)

Footnote: Genetic and other causes of end-stage renal disease were not analysed and not shown on this list. The classification as shown above is adapted from the Canadian Organ Replacement Register data forms.

Appendix to: Samuel SM, Foster BJ, Hemmelgarn BR, et al. Incidence and causes of end-stage renal disease among Aborginal children and young adults. *CMAJ* 2012; DOI:10.1503/cmaj.120427.