Supplemental Table 4: Comparison with other cohorts

		Dragon-Durey et al. ²²	Sana et al. ²⁸	Sinha e <i>t al</i> . ⁶	Lee et al.24	Geerdink et al.23	Noris et al. ²⁵	Abarrategui- Garrido et al. ¹⁹	Hofer et al.15	Moore et al.9	UK and Ireland
# Patients		45 (38 children)	4 children	138 children	15 children	6 children	8 (6 children)	7 children	25 children	13 children	17 children
Age (years)		Median 8.5 (children only)	Mean 6	Mean 8.4	Mean 8	1-7 years at onset in 83.3%	N/A	Mean 5.2	Mean 7.9	Median 8	Median 8
% Male		66% (children only)	N/A	72.5%	27%	50%	50%	N/A	N/A	46%	65%
Gastrointestinal symptoms		84% (diarrhoea 53%)	25%	Diarrhoea 9.4%	Diarrhoea 13%	83%	14.3%	N/A	87%	N/A	75% (diarrhoea 50%)
Extra-renal manifestations		50% hepatitis 23% pancreatitis 23.5% seizures	N/A	57.3% hepatic 40.6% seizures	7% hepatitis 7% pancreatitis 7% CNS	N/A	14.3% CNS	N/A	11% CNS 58% other	N/A	19% seizures 13% hepatitis 6% pancreatitis
Concomitant rare genetic variants		0/26	0	N/A	0/15	2/6 (33%): <i>CFI,</i> C3	2/8 (25%): CFH x2	0/7	1/8 (12.5%): <i>CFI</i>	5/13 (38%): CFH, CFI, CD46, C3 x2	7/17 (41%): CFH, CFI x4, CD46, C3
Complement	Low C3	58%	50%	62%	67%	N/A	43%	57%	41%	27%	24%
analysis	Low C4	0	N/A	N/A	N/A	N/A	14%	14%	15%	27%	29%
	Low FH	22%	N/A	N/A	N/A	N/A	29%	0	N/A	9%	12%
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Supportive		6 (13% of total): ERF 1 (17%); relapses 2 (33%); TR 1 (17%); CKD 1 (17%)	0	N/A	N/A	2 (33%)	N/A	N/A	N/A	10 (77%)	2 (12% of total): ERF 2 (100%)
PI		6 (13% of total): relapses 5 (83%), TR 1 (17%)	0	N/A	91%	N/A	N/A	N/A	N/A	N/A	n/a
PEX		15 (33% of total): ERF 1 (7%); death 1 (7%); CKD 3 (20%); TR 3 (20%); relapses 6 (40%)	0	105 (76%) in total	69%	N/A	N/A	N/A	N/A	3 (23%)	11 (65% of total): ERF 4 (36%); relapses 5 (45%)
PEX or PI		N/A	0	N/A	N/A	4/6 (67%) (chronic in 3)	7/8 (87.5%)	5/7 (71%)	18/19 (95%)	N/A	n/a
PEX + Corticosteroids		0	0	N/A	N/A	N/A	3/8 (37.5%): remission in 2/3 (67%)	1	N/A	N/A	1
PEX + Immunosuppression		3 (6.7% of total)	4 (100%)	87 (63%) IS	7 (54%) steroids +/- IS	0	3/8 (37.5%)	2 (29%)	0	0	0
Aza	athioprine	0	0	N/A	N/A	n/a	0	1	n/a	n/a	n/a
Steroids + cyclophosphamide		2: no renal sequelae	4 (at relapse in patient treated with rituximab)	49	N/A	n/a	0	0	n/a	n/a	n/a
	eroids + tuximab	0	(rituximab initially in 1)	18	N/A	n/a	0	0	n/a	n/a	n/a
Steroids + MMF		1: no renal sequelae	0	N/A	N/A	n/a	0	0	n/a	n/a	n/a
Eculizumab		0	0	0	0	0	0	0	0	0	4 (24% of total): 100% sustained remission
Maintenance Immunosuppression		N/A	n/a	47 (34%): steroids alone 21; plus azathioprine 8; plus MMF 18	N/A	n/a	N/A	N/A	n/a	n/a	0
		<u> </u>			Long term outcom	es					
Sustained remission		N/A (25% no renal sequelae)	100% after cyclophosphamide	N/A	62% no sequelae	0	12% complete remission	N/A	N/A	N/A	n/a
Relapse		58%	25% (following rituximab in 1)	14 (11.5%); (4 whilst on IS)	31%	50%	37.5%	N/A	N/A	23%	29% overall
ERF		27%	0	32.8%	0	0	63%	43%	N/A	46%	35% overall
CKD (not including ERF)		39%	0	N/A	15%	N/A	N/A	N/A	N/A	N/A	CKD stage 3: 1 (6%)
Death		4 (8.9%)	0	20 (16.4%)	0	1 (16.7%)	0	1 (14.3%)	N/A	0	0
		Deaths: unknown; sudden death post dialysis; pulmonary hypertension; cardiac insufficiency	n/a	Deaths: complications of renal failure 16; sepsis 4	n/a	N/A	n/a	Death: myocarditis	N/A	n/a	n/a
					tcome of transplan						
Recurrence		3 without specific management	n/a	0	n/a	0	1	0	N/A	0	1 early recurrence (CFI mutation) treated with Eculizumab
No recurrence		3 with specific management	n/a	3 with specific management (PEX/IVIG/rituximab)	n/a	0	0	2	N/A	3	4 without specific management (1 graft loss rejection)