## Supplemental legends

**Supplementary Table S1:** Clinical characteristics of ANCA-associated vasculitis cases in 2018, 2019 and 2020

ANCA; anti-neutrophil cytoplasmic antibody; CMV, cytomegalovirus; COPD, chronic obstructive pulmonary disease; CRP, c-reactive protein; CRRT, continuous renal replacement therapy; CT, computed tomography; CYC, cyclophosphamide; ECMO, extracorporeal membrane oxygenation; EGPA, eosinophilic granulomatosis with polyangiitis; ENT, ear nose throat; ESR, erythrocyte sedimentation rate; EUVAS, European Vasculitis Society; FU, follow-up; ICH, intracranial hemorrhage; iv., intravenous; MPO, myeloperoxidase; PBC, primary biliary cholangitis; PR3, proteinase 3; RTX, rituximab; SAB, subarachnoidal bleeding; SARS-CoV-2; severe acute respiratory syndrome coronavirus 2; Tbc, tuberculosis; Tx, treatment;

**Supplementary Table S2:** Radiologic characteristics of computed tomography scans of ANCA-associated vasculitis cases in 2020

Radiologic criteria were adapted according to Mohammad et al. (J Rheumatol 2017 Oct;44(10):1458-1467) 9 of 15 patients showed radiologic findings consistent with pulmonary involvement of vasculitis. 3 of 15 patients had no pulmonary involvement, while no exact evaluation was possible in 3 patients either due to artefacts or additional pulmonary disease.

**Supplementary Figure S3:** 'Heat-map' of incident ANCA-associated vasculitis cases in 2020 referred to our center in Tyrol (Austria).

The incidence of AAV cases per 100.000 inhabitants is visualized for each district (dark red > 4, orange > 3, yellow > 1). The underlying map was provided by 'Land Tirol / tiris' and modified in accordance. The number of inhabitants was provided by 'Statistik Austria, Bevölkerungsregister' dated by 31.12.2019.

ANCA; anti-neutrophil cytoplasmic antibody; AAV, ANCA-associated vasculitis