

Table S1. Summary of hypocalcemia and upper gastrointestinal tract-related adverse drug reactions

	Prior cinacalcet use			<i>P</i> -value
	Non-users	Users	Total	
	N = 127 n (%)	N = 190 n (%)	N = 317 n (%)	
Hypocalcemia-related adverse drug reactions	28 (22.0)	31 (16.3)	59 (18.6)	0.199
Corrected calcium decreased	19 (15.0)	18 (9.5)	37 (11.7)	0.136
Blood calcium decreased	4 (3.1)	7 (3.7)	11 (3.5)	0.799
Hypocalcemia	5 (3.9)	6 (3.2)	11 (3.5)	0.710
Upper gastrointestinal tract-related adverse drug reactions	14 (11.0)	27 (14.2)	41 (12.9)	0.407
Nausea	7 (5.5)	9 (4.7)	16 (5.0)	0.757
Vomiting	3 (2.4)	11 (5.8)	14 (4.4)	0.146
Abdominal discomfort	3 (2.4)	7 (3.7)	10 (3.2)	0.509

Abdominal distension	0 (0.0)	2 (1.1)	2 (0.6)	0.246
Decreased appetite	3 (2.4)	5 (2.6)	8 (2.5)	0.881

χ^2 test.

Figure S1 Trends in the mean oral evocalcet dosage from week 0 to week 30 in cinacalcet non-users and users.

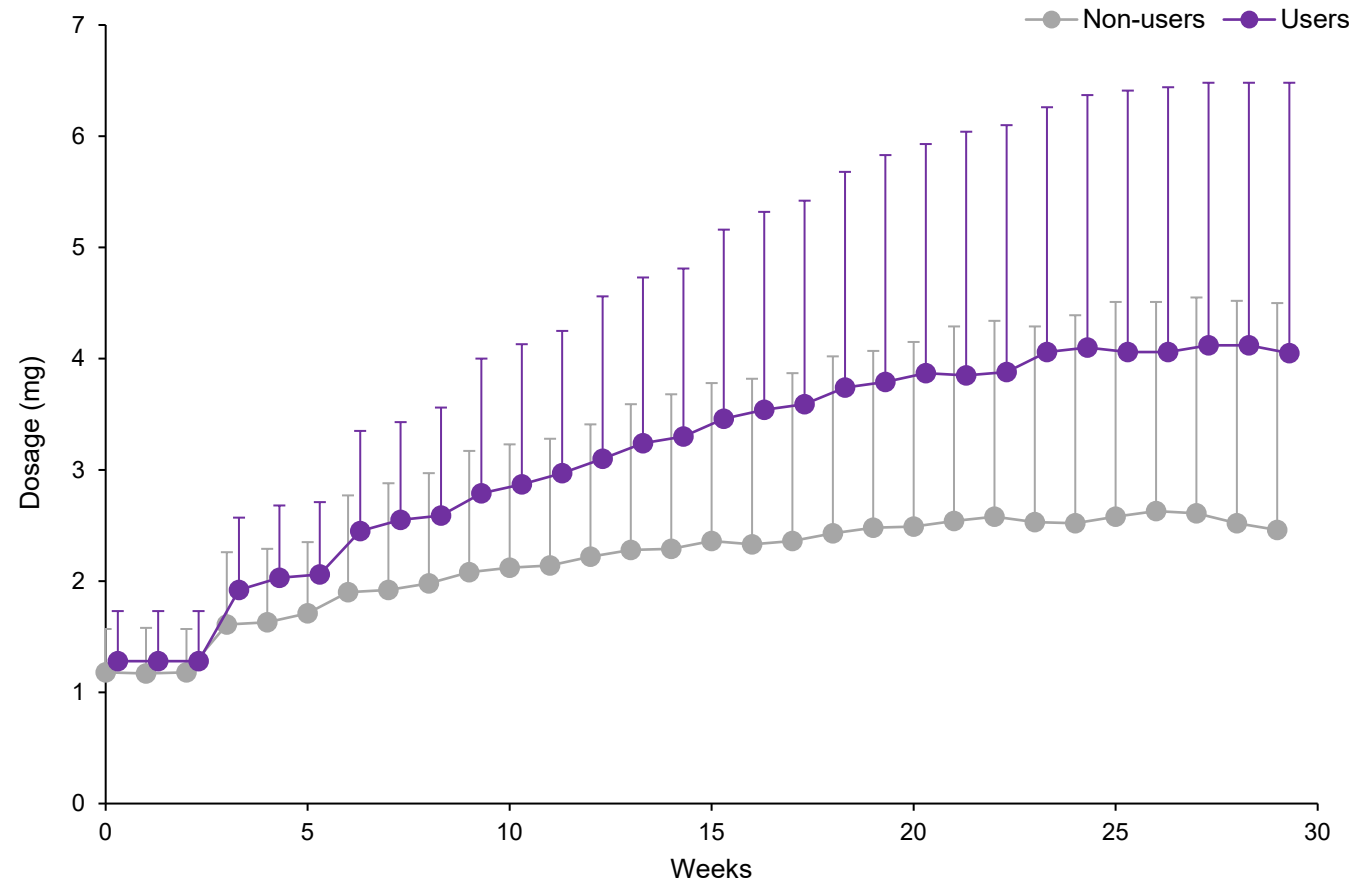
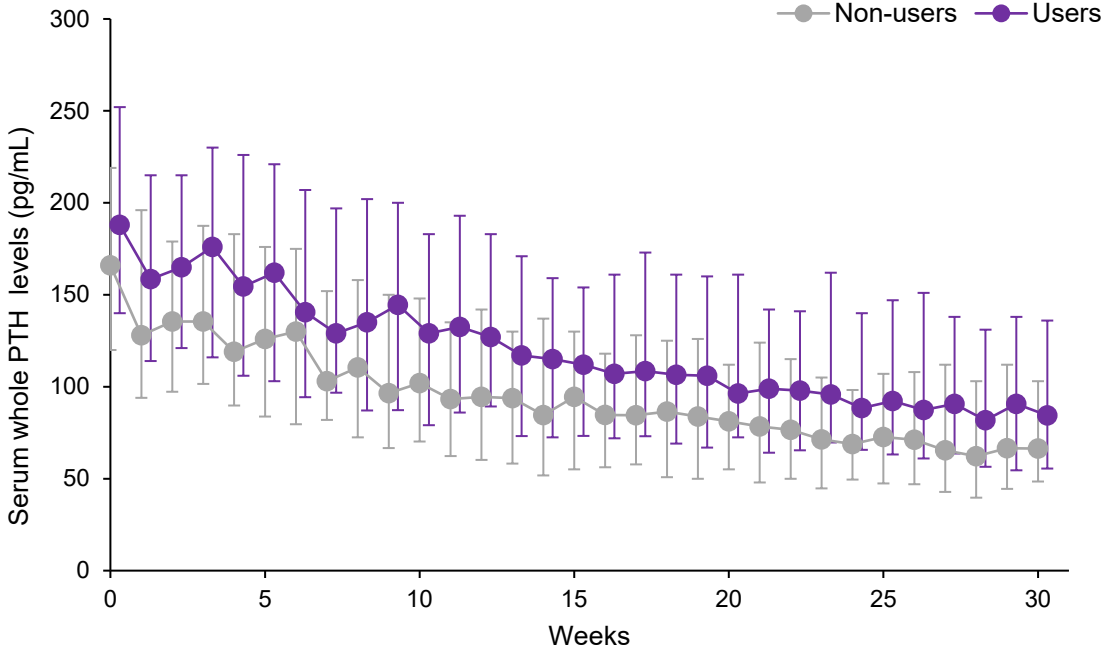


Figure S2 Trends in median serum whole PTH levels (a) and whole-to-intact PTH ratios (b) throughout the study period (week 0 to week 30) in cinacalcet non-users and users. PTH, parathyroid hormone.

a)



b)

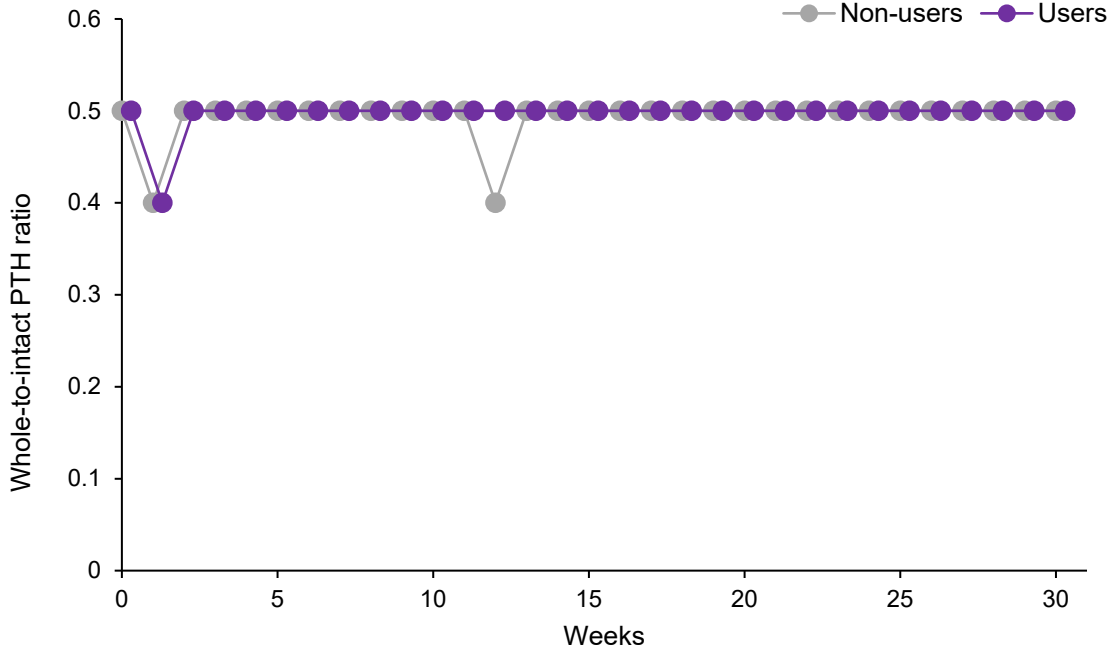
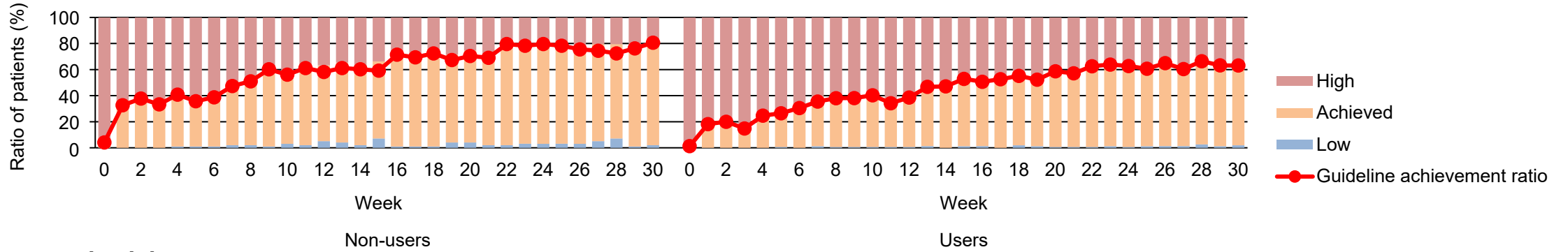
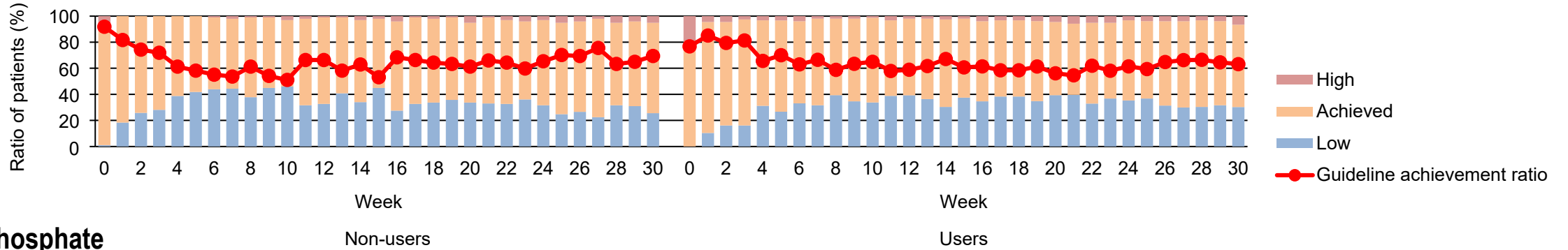


Figure S3 Trends in the proportions of cinacalcet non-users (left) and users (right) with intact PTH, corrected calcium, and phosphate levels above, within, and below the guideline target ranges throughout the 30 weeks of the study period. PTH, parathyroid hormone.

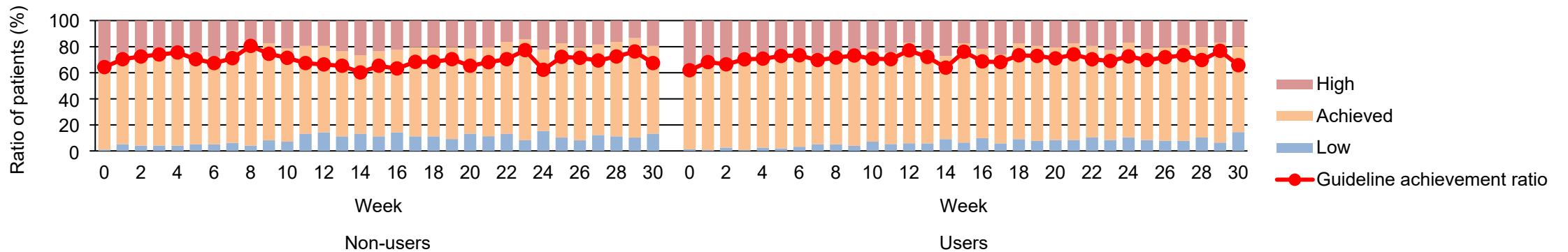
Intact PTH



Corrected calcium



Phosphate



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