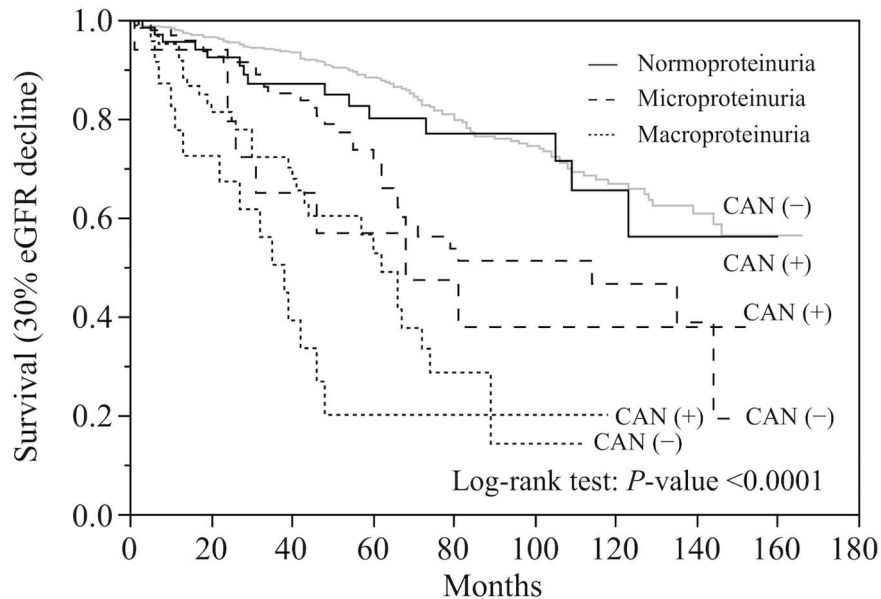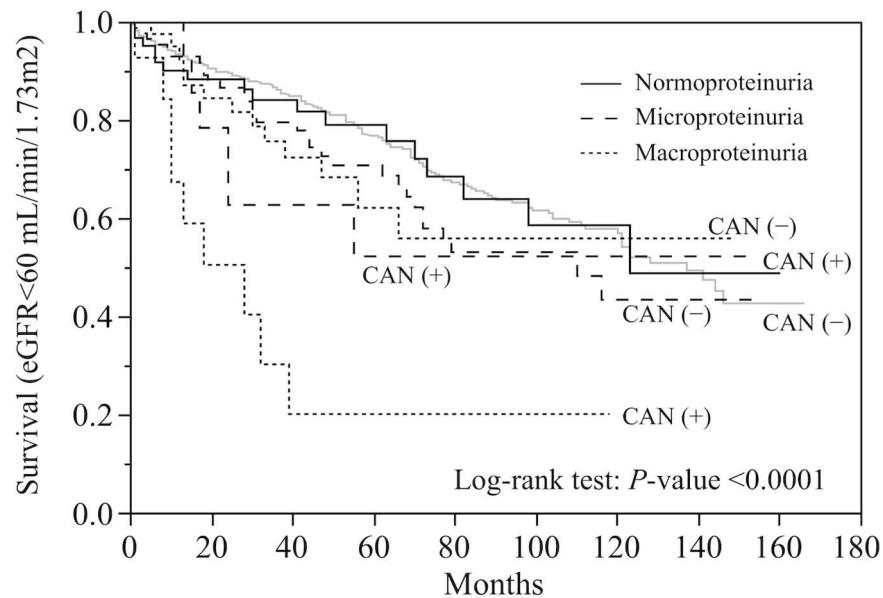**Supplementary materials**

Supplementary Figure 1. Results of a Kaplan-Meier analysis for a 30% eGFR decline from the baseline.
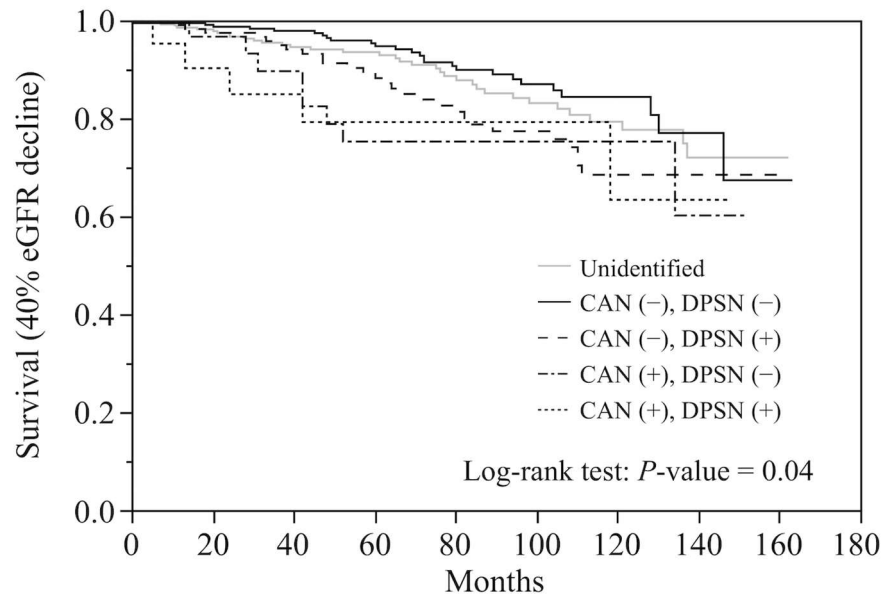

Kaplan-Meier curves demonstrated the survival with a 30% eGFR decline in 827 type 2 diabetes patients stratified by CAN and proteinuria. A 30% eGFR decline from baseline developed in 106 (19.7%) CAN (-) and 15 (20.5%) CAN (+) patients with normoproteinuria, 34 (32.1%) CAN (-) and 8 (47.1%) CAN (+) patients with microproteinuria and 30 (44.1%) CAN (-) and 15 (60.0%) CAN (+) patients with macroproteinuria. Log-rank test: *P*-value <0.0001. CAN: cardiovascular autonomic neuropathy; eGFR: estimated glomerular filtration rate.

Supplementary Figure 2. Results of a Kaplan-Meier analysis for an eGFR <60 mL/min/1.73 m^2.

Kaplan-Meier curves demonstrated the survival with an eGFR <60 mL/min/1.73 m^2 in 721 type 2 diabetes patients stratified by CAN and proteinuria. An eGFR <60 mL/min/1.73 m^2 developed in 150 (30.5%) CAN (-) and 17 (26.6%) CAN (+) patients with normoproteinuria, 31 (34.1%) CAN (-) and 6 (37.5%) CAN (+) patients with microproteinuria and 13 (28.9%) CAN (-) and 9 (64.3%) CAN (+) patients with macroproteinuria. Log-rank test: *P*-value <0.0001. CAN: cardiovascular autonomic neuropathy; eGFR: estimated glomerular filtration rate

Supplementary Figure 3. Results of a Kaplan-Meier analysis for a 40% eGFR decline from the baseline, stratified by CAN and DPSN.

Kaplan-Meier curves demonstrated the survival with a 40% eGFR decline in 821 type 2 diabetes patients stratified by CAN and DPSN. A 40% eGFR decline from baseline developed in 35 (10.6%) unidentified patients, 26 (8.8%) DPSN (-) and 27 (20.1%) DPSN (+) patients with CAN (-), 8 (21.6%) DPSN (-) and 5 (20.8%) DPSN (+) patients with CAN (+). Log-rank test: *P*-value = 0.04. Unidentified: patients who unidentified the presence of DPSN; CAN: cardiovascular autonomic neuropathy; DPSN: diabetic peripheral sensory neuropathy; eGFR: estimated glomerular filtration rate.