Supplementary Table 1

Systolic and diastolic blood pressures, as well as serum total protein, serum albumin, and urinary protein levels were strongly correlated.

	SysBP	DiaBP
SysBP	1	
DiaBP	0.5369*	1

	ТР	Alb	Tcho	UAIb
ТР	1			
Alb	0.7847*	1		
Tcho	-0.2996*	-0.2928*	1	
UAIb	-0.5780*	-0.6478*	0.2966*	1

Supplementary Table 2

Japanese classification of diabetic nephropathy 2014

CKD heat map Category

	A1	A2	A3
eGFR			
>=30	Stage 1	Stage 2	Stage 3
eGFR <30		Stage 4	

	A1	A2	A3
G1	Green	Yellow	Orange
G2	GIGGII	Tenow	Orange
G3a	Yellow	Orange	
G3b	Orange		
G4		Red	
G5			

Supplementary Table 3 The incidence of events in each group.

	Kidney	ESKD	Death	CVD
Increasing	2.2	0.2	1.7	1.1
Control	7.4	0.3	0.7	1.4
Decreasing	25.8	3.0	2.9	3.1
Total	12.8	1.5	2.0	2.0

Supplementary Table 3

The incidence of events in each group.

The data were shown by the number of events /100person • year. Kidney, composite kidney event; ESKD, end-stage kidney disease; Death; death by all cause, CVD, cardiovascular disease.

Supplementary Table 4A Baseline clinical characteristics stratified by eGFR declining speed.

	Conti dev (n	rol (tw vision) =147)	'0-	D	ecreas (n=23	sing 0)		Dec. Vs Cont		
	median	25	75	median	25	75	median	25	75	Р
Age (years old)	58	51	64.3	60	50	67	59	51	66	
Gender (Male)	71.4%			71.7%			71.6%			
BMI	23	21.5	25.6	23	21.2	25.5	23.0	21.2	25.6	
SysBP (mmHg)	138	126	150	148	138	162	142	132	160	<0.01
DiaBP (mmHg)	78	70	86	80	72	90	80	70	88	<0.05
Hb (g/dL)	13.1	11.4	14.6	11.6	10	13.2	12.2	10.5	13.9	<0.01
eGFR (mL/min/1.73 m²/year)	51.7	34.7	68.6	47.3	35	66	49.1	35.0	66.4	
UA (mg/dL)	6.5	5.6	7.5	6.5	5.7	7.6	6.5	5.6	7.6	
TP (g/dL)	6.9	6.4	7.3	6	5.4	6.8	6.3	5.6	7.0	<0.01
Alb (g/dL)	3.7	3.1	4.1	3	2.5	3.5	3.2	2.6	3.7	<0.01
HbA1c (%)	7.5	6.5	8.6	7	6	8.9	7.2	6.2	8.8	
Tcho (mg/dL)	193.5	163	228	211	179	256	206	175	244	<0.01
LDL (mg/dL)	125.6	101.8	170. 6	132.6	102	160.4	132	102	162	
TG (mg/dL)	156.5	106	202	153	114	210	154	110	207	
Ualb (g/day)	0.5	0.1	1.2	2	0.9	3.4	1.2	0.5	2.6	<0.01
UOB	17.7%			42.0%			32.7%			<0.01
ACEI	29.4%			33.6%			32.3%			
ARB	41.2%			53.7%			49.8%			
RAS	70.6%			87.2%			82.0%			
ССВ	55.9%			49.7%			51.6%			
Lipid	19.1%			28.2%			25.3%			

Supplementary Table 4B Baseline pathological characteristics stratified by eGFR declining speed.

	Co	ontro devis (n=1	l (two sion) 47)	0-	Decreasing (n=230)						Tot	al		Dec. Vs Cont
	mean	median	25	75	mean	median	25	75		mean	median	25	75	р
Diff	1.94	2	1	3	2.32	3	2	3		2.17	2	1	3	
Nodu	0.26	0	0	1	0.53	1	0	1		0.43	0	0	1	
Double	0.69	0	0	1	1.21	1	0	2		1.00	1	0	2	
Exda	0.33	0	0	1	0.58	1	0	1		0.48	0	0	1	
MesL	0.21	0	0	0	0.48	0	0	1		0.38	0	0	1	
Pola	0.66	1	0	1	0.79	1	1	1		0.74	1	0	1	
GScle	21.09	14.0	5.0	33.3	27.28	24.0	10.0	40.0		24.85	20.0	6.3	39.0	
SScle	2.4	0	0	0	3.80	0.0	0.0	5.6		3.26	0.0	0.0	4.3	
GMega	0.34	0	0	1	0.45	0	0	1		0.41	0	0	1	
IFTA	1.48	1	1	2	2.03	2	1	3		1.82	2	1	3	
ICell	1.12	1	1	1	1.31	1	1	2		1.23	1	1	2	
Hyali	2.12	3	1	3	2.27	2	2	3		2.21	3	1	3	
Athero	1.12	1	1	2	1.31	1	1	2		1.24	1	1	2	

After adjustment using a propensity score matching system with Hb, systolic blood pressure, and urinary levels of albumin, there were no statistical differences between the control and eGFR declining groups

Supplementary material



Histogram shown by mean eGFR declining speed (eGFR slope) within 3 years after kidney biopsy.

The control group was defined as ≥ 0 and $<5 \text{ mL/min/1.73 m}^2/\text{year}$ in mean eGFR declining speed; the eGFR increasing within three years after biopsy group (eGFR increasing group) was defined as $<0 \text{ mL/min/1.73 m}^2/\text{year}$ in mean eGFR declining speed; and the eGFR declining within three years after biopsy group (eGFR declining group) was defined as $\geq 5 \text{ mL/min/1.73 m}^2/\text{year}$ in mean eGFR declining speed.

Japanese classification of diabetic nephropathy 2014



CKD heat map Category













Increasing Control Decreasing

Nodu

100%

80%

60%

40%

20%

0%

Increasing Control Decreasing





The incidence of each pathological finding

Increasing Control Decreasing





Exda



Increasing Control Decreasing





Furuichi K, et al. BMJ Open Diab Res Care 2020; 8:e001157. doi: 10.1136/bmjdrc-2019-001157

Odds ratio to the risk for inclusion in the Decreasing group

