

Supplementary methods:

Renal biopsy processing: Biopsy tissue for light microscopy was fixed in 10% formalin, embedded in paraffin, sectioned (2-3 μm) and stained with hematoxylin-eosin, periodic acid Schiff, Masson's trichrome and methenamine silver. Routine immunofluorescence using fluorescein isothiocyanate-conjugated primary anti-human rabbit polyclonal antibodies against immunoglobulins (Ig)-IgG, IgA, IgM, C1q, C3 and light chains was performed in all cases, while C4d was done in allograft biopsies.

Supplementary references:

- S1. Vankalakunti M, Jha PK, Ravishankar B, Vishwanath S, Rampure S, Sudarshan BH. Microfilariae-associated nephrotic range proteinuria. *Kidney Int* 2011;79(10):1152.
- S2. Sundar S, Venkataramanan K, Verma H, Bhardwaj M, Mahapatra HS. Filariasis, with chyluria and nephrotic range proteinuria. *J Assoc Phys India* 2013;61(7):487–9.
- S3. Klion AD. Filarial infections in travelers and immigrants. *Curr Infect Dis Rep* 2008; 10:50-7.
- S4. Van Velthuysen ML and Florquin S. Glomerulopathy associated with parasitic infections. *Clin Microbiol Rev* 2000; 13: 55–56.
- S5. Basu A, Wali M, Bhattacharya B, Rahman M, Ray Y, Goswami RP. Nephritic syndrome and anasarca in a case of lymphatic filariasis: A rare association. *Asian Pacific Journal of Tropical Disease*. 2016;6(6):486-8.
- S6. Krishnakumar A, Valson AT, Duhli N, Mohapatra A, Tulsidas KS, Varughese S. Catching the worm early: An atypical case of bancroftian filarial nephropathy. *Saudi J Kidney Dis Transpl* 2020; 31:1101-5.
- S7. Pani SP, Hoti SL, Vanamail P, Das LK. Comparison of an immunochromatographic card test with night blood smear examination for detection of *Wuchereria bancrofti* microfilaria carriers. *Natl Med J India* 2004;17(6):304–6.