

Supplemental Table 2: Clinico-serological dissociation

Supplemental Table 2: Clinical-serological association													
S No	Age/Gender	Baseline			Anti-PLA2R (RU/ml)		Last follow-up			Albumin (g/dl)	Creatinine (mg/dl)	Time (mon)	Comment
		Proteinuria (g/day)	Albumin (g/dl)	Creatinine (mg/dl)	Baseline	6 mon	12 mon	Proteinuria (g/day)					
01	29/Male	7.2	2.6	1.1	29.6	<14	<14	4.099	3.7	1.3	18	Patient had PR at 6,12 mon and relapsed at 15 mon, with anti-PLA2R positive	
02	40/Male	33.35	1.64	1.7	82.52	<14	<14	10.65	3.03	4.67	18	Patient had history of CAM intake, resulting in worsening kidney functions and CKD-stage V	
03	43/Male	11.9	2.3	2	95.51	NA	<14	10.24	2.3	1.6	18	Moderate arteriosclerosis developed in the 2 nd biopsy compared to the first	
04	45/Female	13.293	1.7	1.29	1051	139	<14	4.677	3.2	1.92	12	Proteinuria has decreased by 50%, and serum albumin levels have nearly doubled. However, the increase in serum creatinine during therapy, partially attributed to the intensification of anti-proteinuric treatment and chronicity on repeat biopsy.	

PLA2R- M-Type Phospholipase A2 receptor, NA- not available, CAM- Complementary and alternative medicines