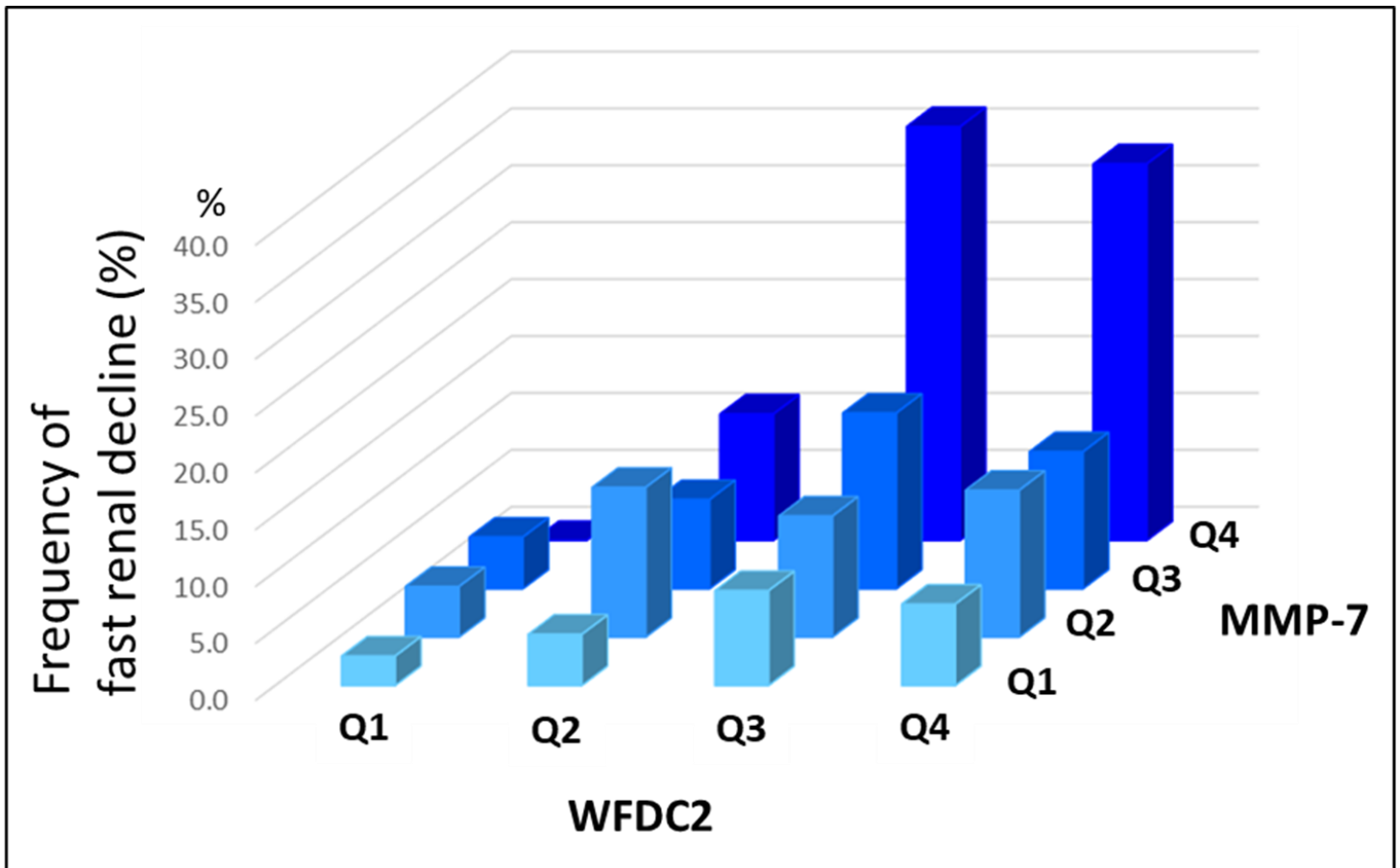


**Supplemental Figure S1.** Frequencies of fast early renal decline (%) according to quartiles of serum WFDC2 and serum MMP-7.



**Supplemental Table S1.** Effect estimates of examined variables at baseline on risk of fast early renal decline in patients with type 2 diabetes during 6-12 years of follow-up. Multivariable logistic regression was used to estimate Odds Ratios of change in predictors (including components of Fibrosis Index, WFDC2 and MMP-7) in the entire cohort and separately in Normoalbuminuria and Albuminuria subgroups.

Variable	Entire cohort (n= 1,181)				Normoalbuminuria (n= 681)		Albuminuria (n= 500)	
	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI
eGFR	1.14	(0.99, 1.30)	<b>1.25</b>	(1.09, 1.45)	<b>1.27</b>	(1.00, 1.62)	<b>1.26</b>	(1.05, 1.51)
Systolic BP	<b>1.36</b>	(1.15, 1.62)	<b>1.39</b>	(1.17, 1.66)	<b>1.37</b>	(1.04, 1.82)	<b>1.42</b>	(1.13, 1.78)
Albuminuria <sup>†</sup>	<b>1.89</b>	(1.26, 2.85)	<b>1.68</b>	(1.11, 2.55)				
HbA <sub>1c</sub>	<b>1.11</b>	(1.00, 1.24)	<b>1.14</b>	(1.02, 1.27)	1.18	(0.96, 1.46)	<b>1.14</b>	(1.00, 1.30)
TNF-R1	<b>1.36</b>	(1.10, 1.68)	1.10	(0.87, 1.38)	1.35	(0.93, 1.95)	0.95	(0.70, 1.29)
KIM-1	<b>1.45</b>	(1.21, 1.75)	<b>1.35</b>	(1.12, 1.64)	1.22	(0.90, 1.65)	<b>1.46</b>	(1.14, 1.88)
EGF/MCP-1	<b>0.62</b>	(0.51, 0.75)	<b>0.68</b>	(0.56, 0.83)	<b>0.57</b>	(0.42, 0.77)	0.78	(0.60, 1.01)
WFDC2			<b>1.44</b>	(1.12, 1.85)	1.17	(0.81, 1.68)	<b>1.72</b>	(1.22, 2.43)
MMP-7			<b>1.36</b>	(1.08, 1.73)	1.24	(0.88, 1.74)	<b>1.52</b>	(1.09, 2.12)

<sup>†</sup> Albuminuria is modeled as a categorical variable (Normoalbuminuria=1, Albuminuria=2).

OR, odds ratio. CI, 95% confidence interval. ORs in bold are statistically significant.

There was no evidence for statistically significant interaction between albuminuria status and the effect of any of the examined baseline variables.

The effects of eGFR and systolic BP on fast renal decline were estimated per 10 ml/min/1.73m<sup>2</sup> increase and per 10 mmHg increase, respectively. The effect of HbA<sub>1c</sub> on fast renal decline was estimated per 1% increase. The effects of plasma TNF-R1, plasma KIM-1, urinary EGF/MCP, WFDC2 and MMP-7 on fast renal decline were estimated per one quartile increase.