**Supplemental Material**

**Long-term Outcomes in Patients with Very-Early Onset Autosomal Dominant Polycystic Kidney Disease**

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**Supplemental Table Headings**

**Supplemental Table 1**. Median time to events for included very-early onset (VEO) and non-VEO patients with autosomal dominant polycystic kidney disease. htTKV, height-corrected total kidney volume; eGFR, estimated glomerular filtration rate. N/A = the median estimate could not be calculated because the failure probability never exceeded 0.5. Hazard ratios and p-values are for unadjusted Cox proportional hazards analysis comparing VEO to non-VEO.

**Supplemental Table 1**

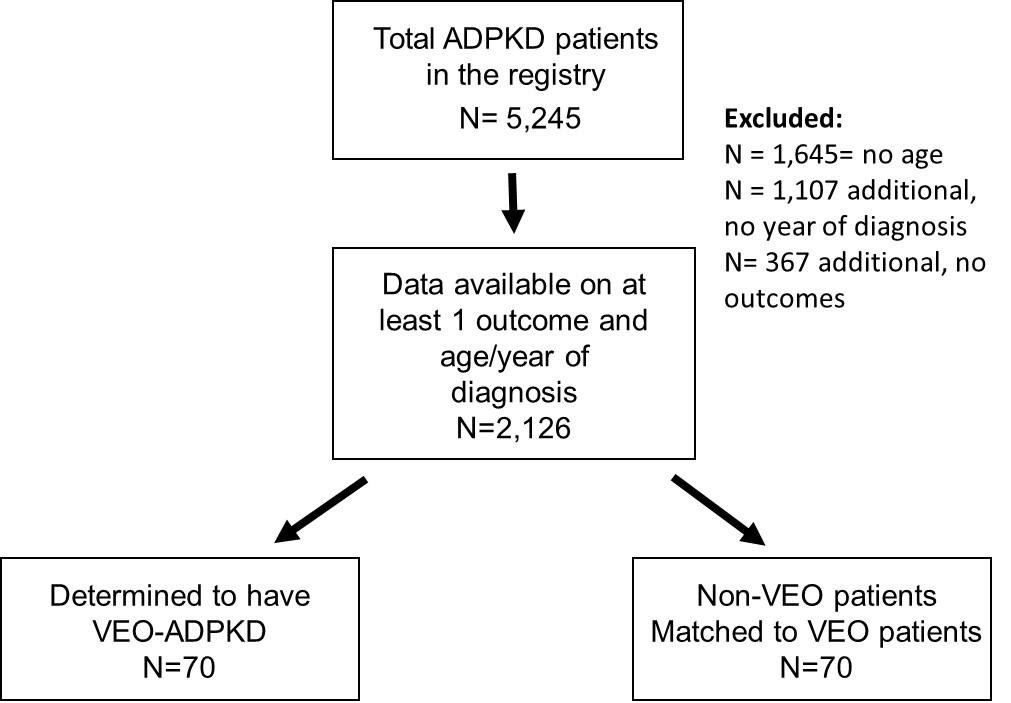
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| --- | --- | --- | --- | --- | --- | --- |
| Event | **N (%) VEO** | **Median Age VEO** | **N (%) Non-VEO** | **Median Age Non-VEO** | **Hazard Ratio (95% CI)** | **P-Value** |
| **htTKV >300 mL/m** | 15 (63%) | 15 | 16 (48%) | 21 | 4.00 (1.83-8.74) | <0.001 |
| **30% decline in eGFR** | 19 (38%) | 26 | 10 (20%) | N/A | 1.23 (0.50-3.10) | 0.65 |

**Supplemental Figure Legends**

**Supplemental Figure 1.** Patient selection diagram for inclusion in the study.

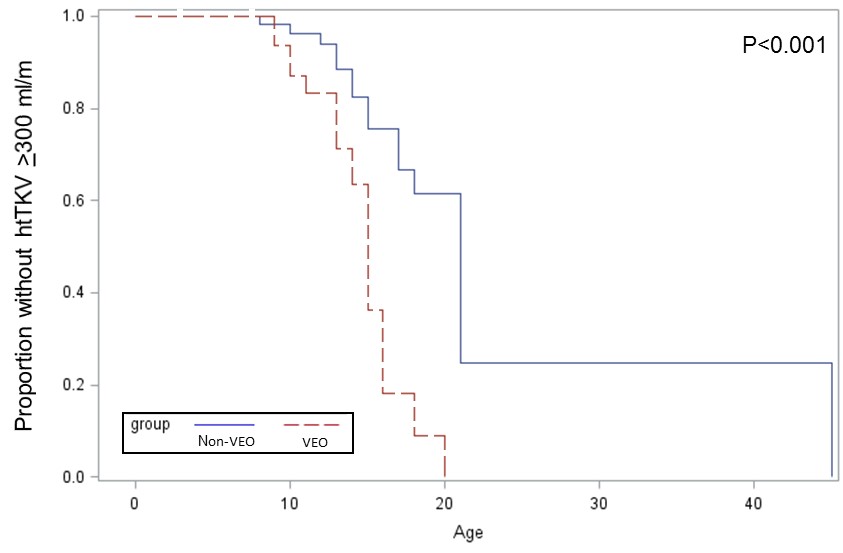
**Supplemental Figure 2.** Kaplan-Meier curve of height-adjusted total kidney volume (htTKV) > 300 mL/m**)** (**panel A**) and 30% decline in estimated glomerular filtration rate (eGFR) (**panel B**). VEO patients were more likely to progress to htTKV >300 mL/m, but not to have a 30% decline in eGFR.

**Supplemental Figure 1.**



**Supplemental Figure 2.**

**A**

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**B**

