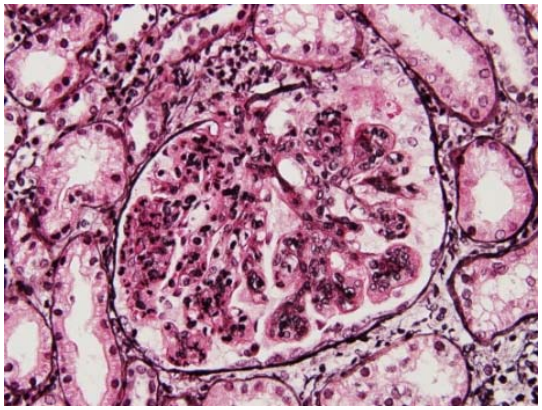
Supplementary Table 1. Pathology findings

Case	1	2 (episode 1)	2 (episode 2)	3	4 (episode 1)	5
LM	Two renal cortical biopsies with 19 glomeruli. All glomeruli show an increase of the mesangial cellularity, accompanied by accentuation of glomerular lobulation. There is endocapillary proliferation. The capillary loops show double contours with intramembranous hyaline deposits. Multiple glomeruli show adhesions to Bowman's capsule. One of the glomeruli shows extracapillary proliferation (crescent). There is some tubulointerstitial inflammation, probably secondary to the glomerular changes.	Renal cortical biopsy with 37 glomeruli, all of which show fibrinoid necrosis of the capillary loops, accompanied by extensive extracapillary proliferations. There is interstitial inflammation with lymphocytes and neutrophil granulocytes. Granulocytes are also found within the tubular lumen. The arterioles show no abnormalities. No interstitial fibrosis or tubular atrophy.	Adequate renal biopsy which 65 glomeruli, of which 52% are globally sclerotic. All glomeruli show a MPGN pattern, characterized by mesangial proliferation and double contours of the capillaries. The capillary basement membrane is thickened. 10% of the glomeruli show extracapillary proliferations. There is no interstitial fibrosis and no tubular atrophy. The arterioles show no abnormalities.	Renal cortical biopsies with 26 glomeruli, of which 18% are globally sclerotic and 42% show segmental sclerosis. All glomeruli show accentuation of lobulation, consistent with a mesangio-capillary pattern. Almost all glomeruli show double contours, and eosinophilic deposits which partly seem to replace the glomerular basement membrane. There is a small amount of interstitial fibrosis and tubular atrophy. No vascular abnormalities.	Renal cortical biopsy with 34 glomeruli. All glomeruli show extensive fibrinoid necrosis, accompanied by fibrocellular extracapillary proliferations. There is an extensive tubulo-interstitial inflammatory infiltrate, presumably secondary to the glomerular changes. Arteries show no abnormalities.	Renal cortical biopsy with 19 glomeruli all of which show mild to moderate mesangiocapillary proliferation with segments of double contoured glomerular basement membrane. 2 glomeruli show segmental glomerulosclerois with adhesion of the capillary tuft to Bowmans capsule. No crescents. In the tubulointerstitium no tubular atrophy (<5%) and only a very mild focal inflammation. No significant arteriosclerosis or arteriolar hyalinosis.
IF	C3c: coarse granular sub-epithelial, partly subendothelial and mesangial (3+). Also deposits in the tubular basement membranes. IgG, IgM, IgA, kappa light chain, lambda light chain and C1q: few deposits, partially sub-endothelial, partially mesangial (1+). C5bC9:	C3c: strong staining (3+), partly linear along the glomerular basement membrane, partly nodular hump-like. Also strong staining of C3c long the tubular basement membrane. IgG, IgA, IgM, C1q, kappa light chain and lambda light chain: no specific staining. C5bC9:	C3c: strong staining (3+) in a linear pattern along the glomerular basement membrane. There is slight staining of IgG (1+), kappa light chain (1+) and lambda light chain (1+). IgA, IgM and C1q negative. C5bC9 shows similar staining as C3c.	C3c: strong staining (3+), in a linear, subepithelial and mesangial pattern. Also positive along the tubular basement membranes. IgM positive (2+) coarsely granular in the mesangial areas. IgG negative. IgA positive (1+) granular, mainly in the mesangial areas.	C3c: strong staining (3+) mesangial and ribbon-like along the glomerular basement membrane. No specific staining for IgA, IgG, IgM, kappa light chain, lambda light chain or C1q. C5bC9 shows overlap with C3c.	C3c: strong (3+) coarse staining in the mesangium and ribbon-like along segments of the basement membrane. No tubular basement staining. No specific staining for IgA, IgG, IgM and C1q.

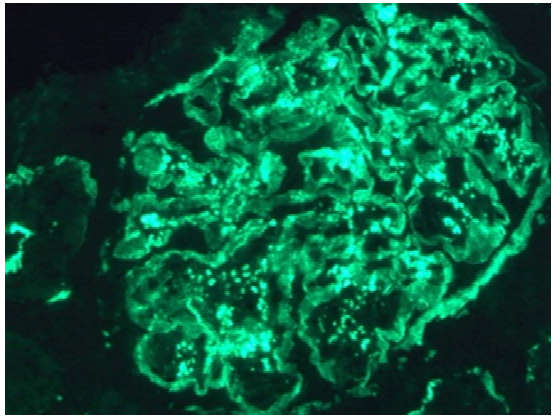
	positive, shows overlap with C3c.	positive, shows overlap with C3c.		Kappa and lambda light chain negative. C1q negative. C5bC9: staining along the capillary basement membrane, Bowman's capsule and along the basement membrane of almost all tubules.		
EM	Dense linear staining within the glomerular basement membrane, also many electron dense humps. No tubuloreticular inclusions in the endothelium. There are also linear dense deposits in Bowman's capsule and along the tubular basement membranes.	Ribbon-like dense deposits along the glomerular basement membranes. Also dense deposits in Bowman's capsule and along the tubular basement membranes.	NA	Ribbon-like dense deposits in the capillary basement membranes, also multiple humps. Also dense deposits in Bowman's capsule and along the tubular basement membranes.	Ribbon-like electron dense staining of the glomerular basement membrane and also of Bowman's capsule. No humps.	Ribbon-like electron dense staining of the glomerular basement membrane and in the mesangium. No tubular basement deposits.

In case 2, electron microscopy was only performed at first presentation and not on the following biopsies. For this case the description of EM findings from the first biopsy (obtained 2 weeks prior to the biopsy described) is given. LM, light microscopy; IF, immune fluorescence; EM, electron microscopy; NA, not available

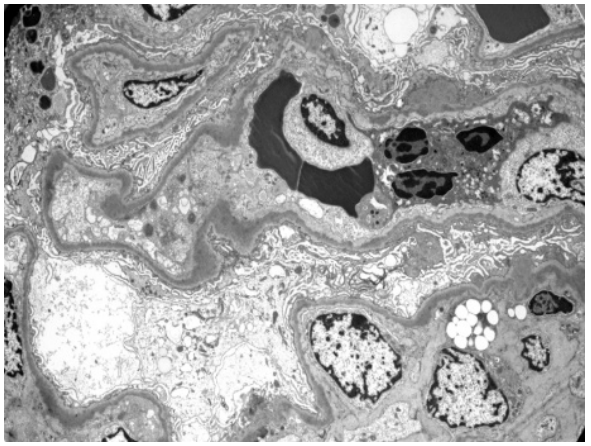
SUPPLEMENTARY FIGURE PATHOLOGY



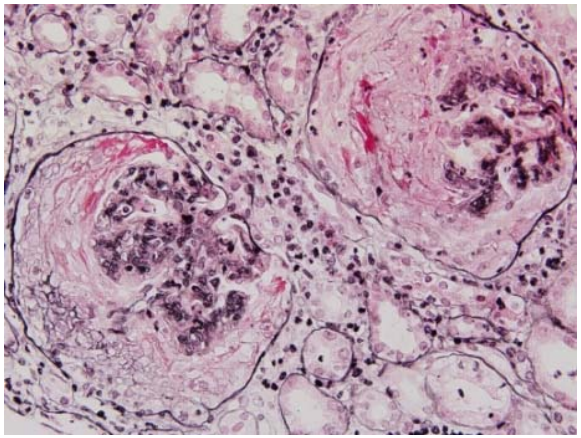
Case 1. Light microscopy (methenamine silver staining)



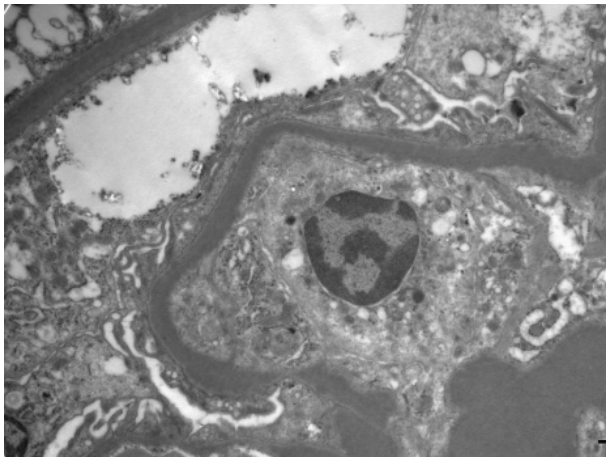
Case 1. Immune fluorescence (C3c)



Case 1. Electron microscopy



Case 2 (episode 1). Light microscopy (methenamine silver staining)



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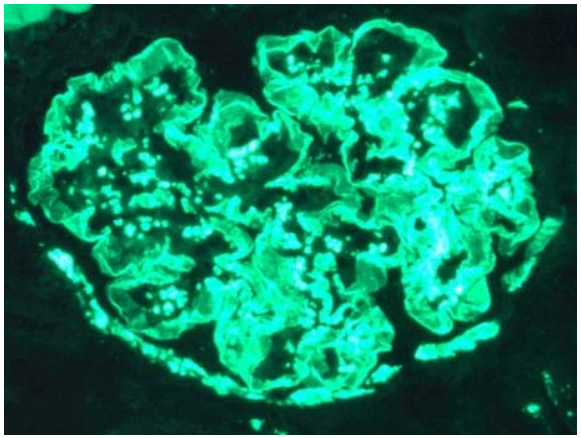
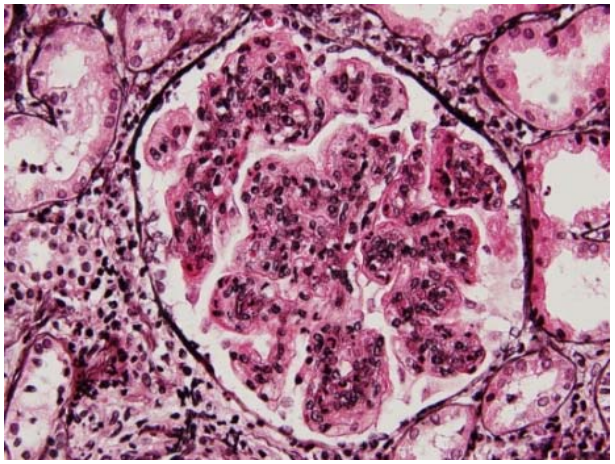
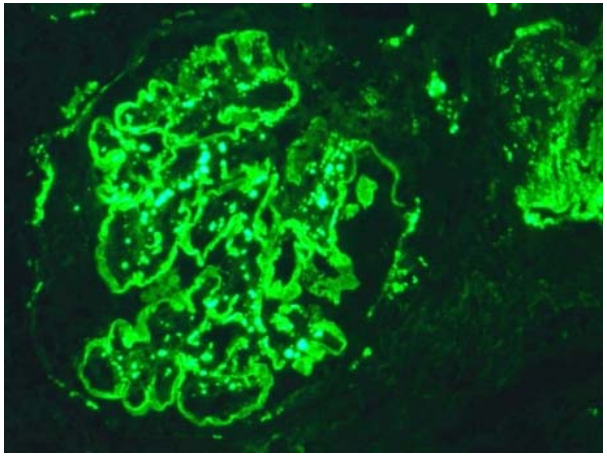


Case 2 (episode 1). Immune fluorescence (C3c)

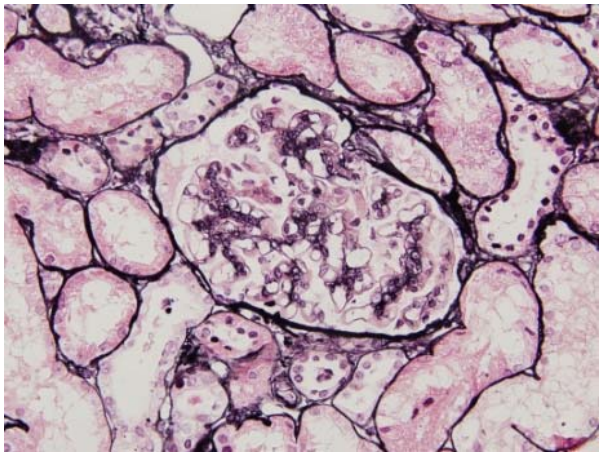


Case 2 (episode 2). Light microscopy (methenamine silver staining)

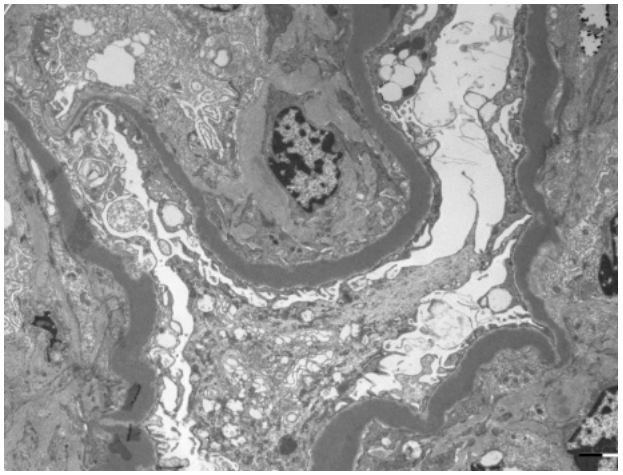
Case 2 (episode 2). Electron microscopy not available



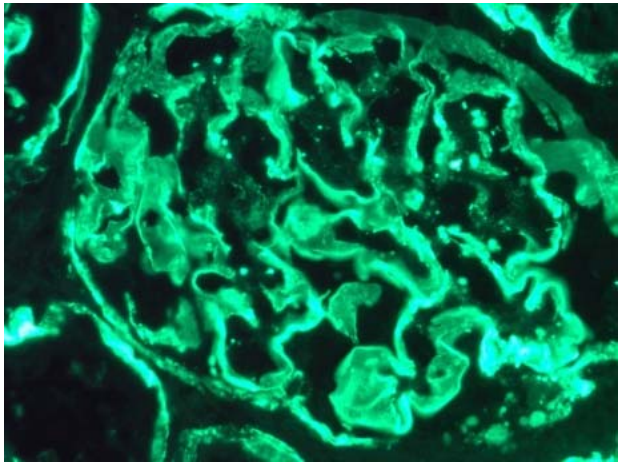
Case 2 (episode 2). Immune fluorescence (C3c)



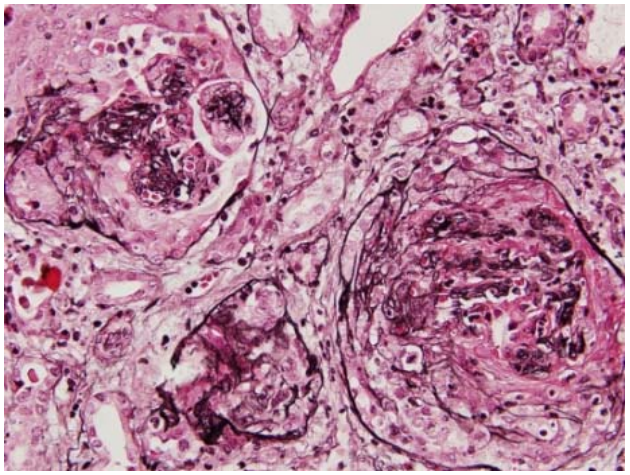
Case 3. Light microscopy (methenamine silver staining)



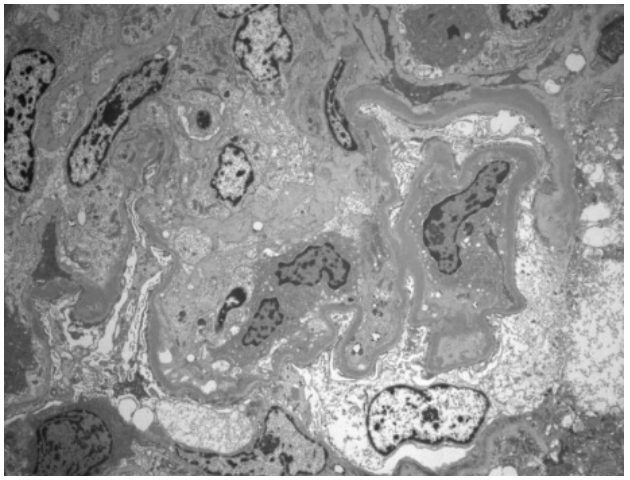
Case 3. Electron microscopy



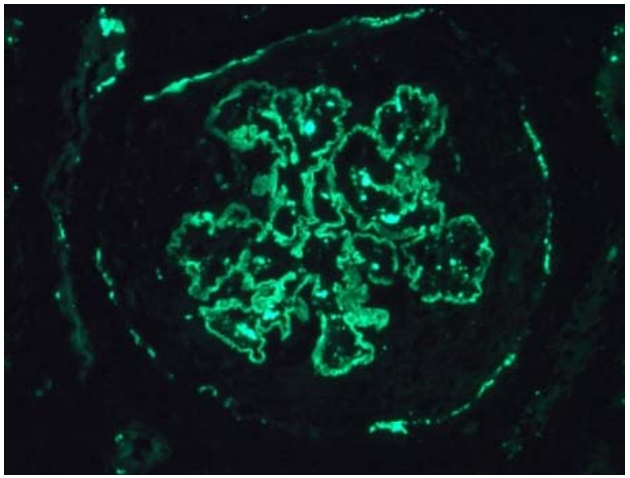
Case 3. Immune fluorescence (C3c)



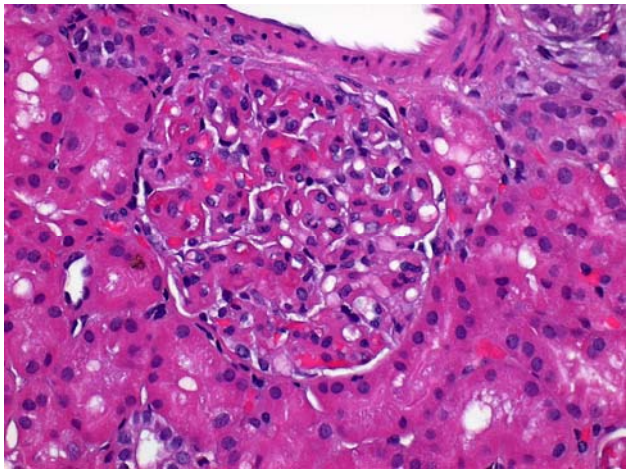
Case 4. Light microscopy (methenamine silver staining)



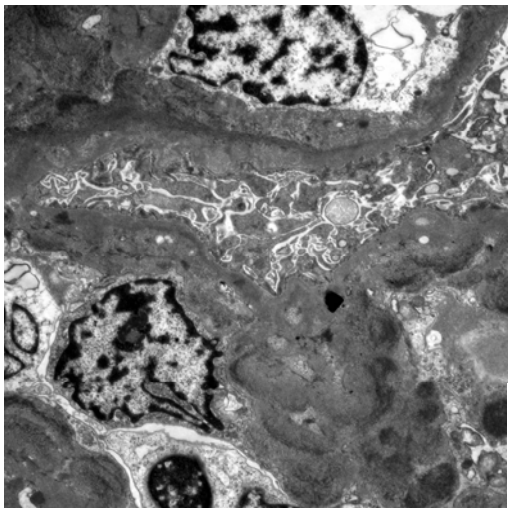
Case 4. Electron microscopy



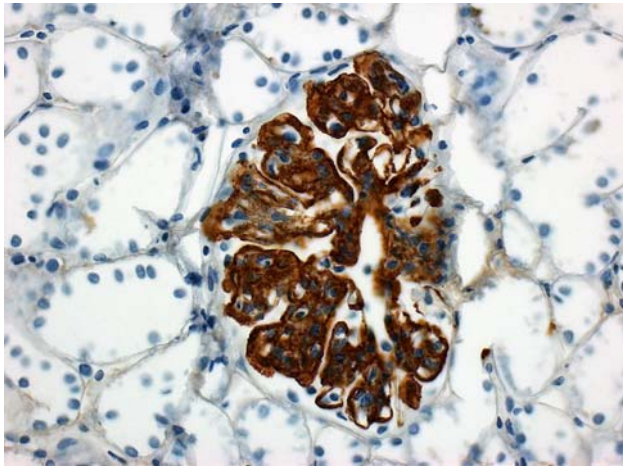
Case 4. Immune fluorescence (C3c)



Case 5. Light microscopy (Hematoxylin and eosin stain)



Case 5. Electron microscopy



Case 5. Immune fluorescence (C3c)