Supplementary Material (Results)

RM ANOVA with logarithmic transformation was performed on creatinine values without significant missing data (pre-LT, day 7, day 30, day 90 and day 180 post) and for the whole cohort demonstrated significant rises over the study time period (p<0.001). Given the non-Gaussian distribution of this variable Friedman's test was performed on subgroups and demonstrated significant increases in creatinine (p<0.001) for non-inducted patients receiving BDT or EDT. For inducted patients those receiving BDT had an increase in creatinine (p=0.003) as described in the main body of this article although this was not significant for patients receiving EDT (p=0.446). This may be explained by a subgroup of patients in the ERT-inducted cohort whose creatinine declined over the study period.

Table S1. This table summarizes the number of patients with at least one serum tacrolimus concentration above 10 μ g/L during the first 6 weeks in each cohort.

	BDT, n (%)	ERT, n (%)	p-value
Non-Inducted	25/52 (48)	16/38 (42)	0.67
Inducted	10/31 (32)	5/20 (25)	0.755
Total	35/83 (42)	21/58 (36)	0.239

* BDT = twice-daily tacrolimus, ERT = extended-release tacrolimus

Supplementary Figure 1. Evolution of delta creatinine (presented as mean (SEM)) level post liver transplant (LT) between patients who received de novo twice-daily tacrolimus (BDT) vs once-daily tacrolimus (ERT) in (A) cohort that was not treated with interleukin-2 receptor antagonist and (B) cohort treated with interleukin-2 receptor antagonist.

