Title: *Incidence, Severity and Outcomes of Acute Kidney Injury Associated with Dual Renin-Angiotensin System Blockade*

Supplemental Material

- **Supplemental Table 1**
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- **Supplemental Table 3**

Supplementary Table 1: Dose of study therapy at time of development of acute kidney injury

	Monotherapy	**Combination Therapy**	**P-Value**
Episodes of AKI with data	104	187	
Losartan dose			0.77
None	21 (20.2%)	42 (22.5%)	
50 mg daily	2 (1.9%)	2 (1.1%)	
100 mg daily	81 (77.9%)	143 (76.5%)	
Lisinopril/Placebo dose			0.15
None	34 (32.7%)	63 (33.7%)	
10 mg daily	3 (2.9%)	17 (9.1%)	
20 mg daily	5 (4.8%)	13 (7.0%)	
40 mg daily	62 (59.6%)	94 (50.3%)	

Supplementary Table 2: Change in dose of study medications after episode of AKI

	Monotherapy	Combination Therapy	P-Value
Episodes of AKI with data	104	187	
Losartan			0.22
On no drug prior to and after event	18 (17.3%)	42 (22.5%)	
Drug discontinued or dose reduced	57 (54.8%)	83 (44.4%)	
Dose unchanged or dose increased	29 (27.9%)	62 (33.2%)	
Lisinopril/Placebo dose			0.80
On no drug prior to and after event	32 (30.8%)	63 (33.7)	
Drug discontinued or dose reduced	48 (46.2%)	79 (42.2%)	
Dose unchanged or dose increased	24 (23.1%)	45 (24.1%)	

Supplementary Table 3: Relationship between AKI and development of study endpoints[*]

Endpoint	Patients with AKI	Patients without AKI	Hazard Ratio	95% Confidence Interval	*P*-Value
All Patients					
Death, ESRD or decline in eGFR[†]	67/189 (35.5%)	217/1259 (17.2%)	1.78	1.34-2.36	<0.001
ESRD or decline in eGFR[†]	40/189 (21.2%)	138/1259 (11.0%)	1.25	0.96-1.64	0.10
ESRD	23/203 (11.3%)	47/1245 (3.8%)	2.00	1.20-3.34	0.008
Death	34/210 (16.2%)	89/1238 (7.2%)	1.97	1.31-2.97	<0.001
Monotherapy Arm[§]					
Death, ESRD or decline in eGFR[†]	32/71 (45.1%)	120/653 (18.4%)	2.2	1.5-3.3	<0.001
Combination Therapy Arm[§]					
Death, ESRD or decline in eGFR[†]	35/118 (29.7%)	97/606 (16.0%)	1.5	1.0-2.2	0.54

[*]Time-dependent analysis including AKI events occurring prior to reaching any component of the primary study endpoint, adjusted for treatment group, baseline eGFR and albuminuria; Data presented as number of patients with endpoint/number of patients at risk (%)

[†]Decline in eGFR defined as an fall in eGFR of >30 mL/min/1.73 m^2 if the eGFR was ≥60 mL/min/1.73 m^2 at randomization or a decrease in eGFR of >50% if the eGFR was <60 mL/min/1.73 m^2 at randomization.

[§]*P*-value for interaction of treatment arm x AKI = 0.14