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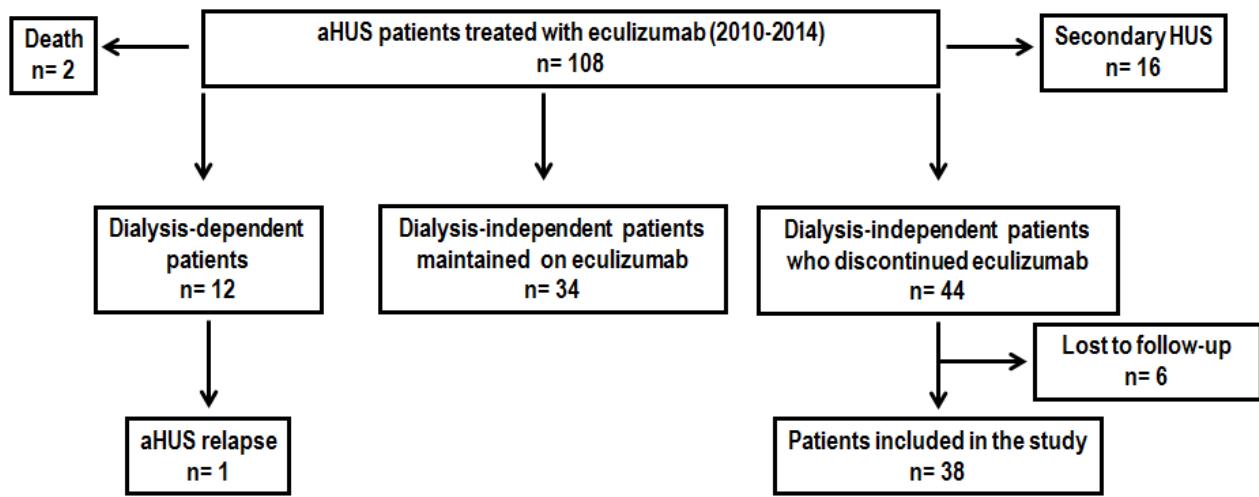
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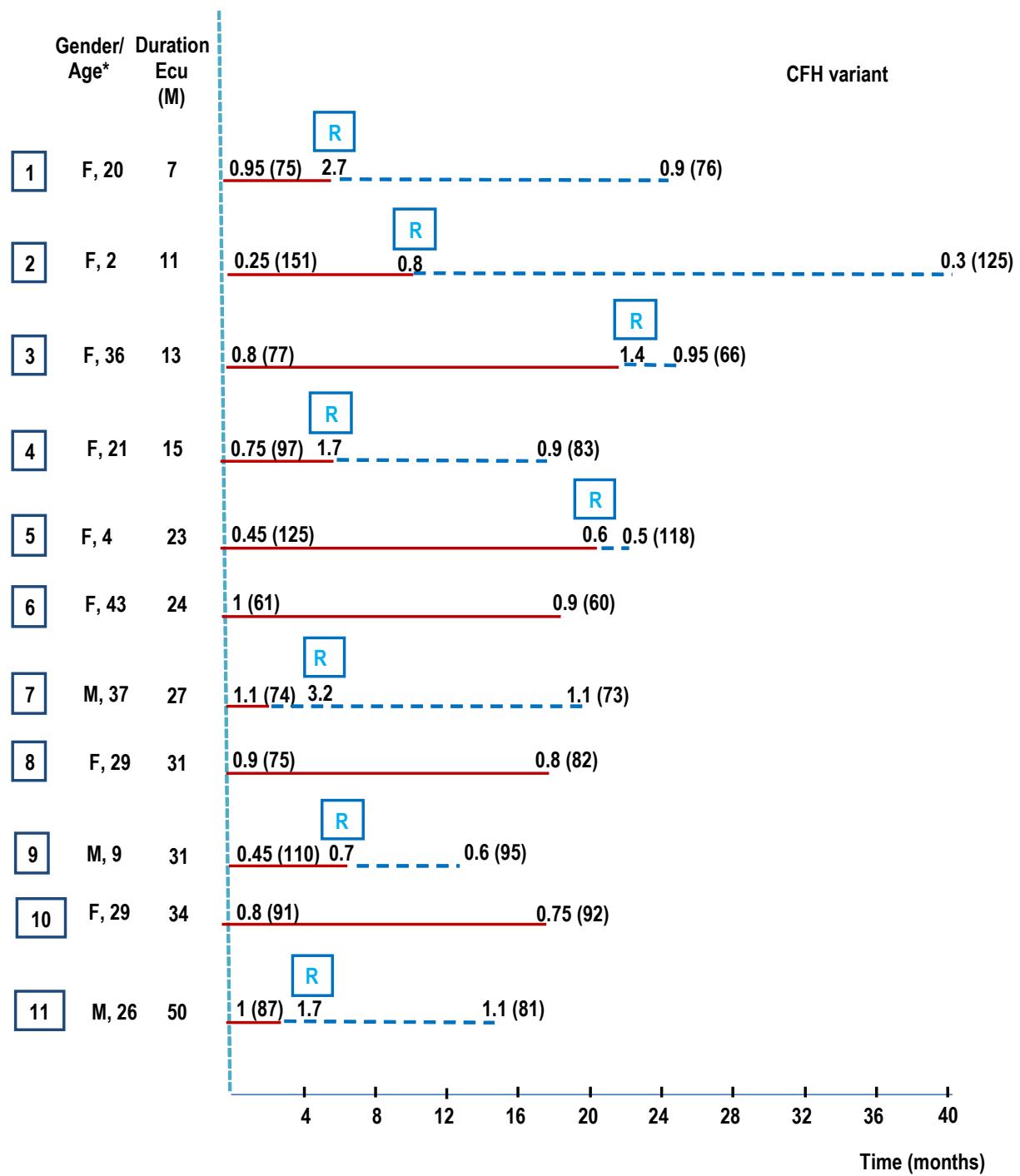
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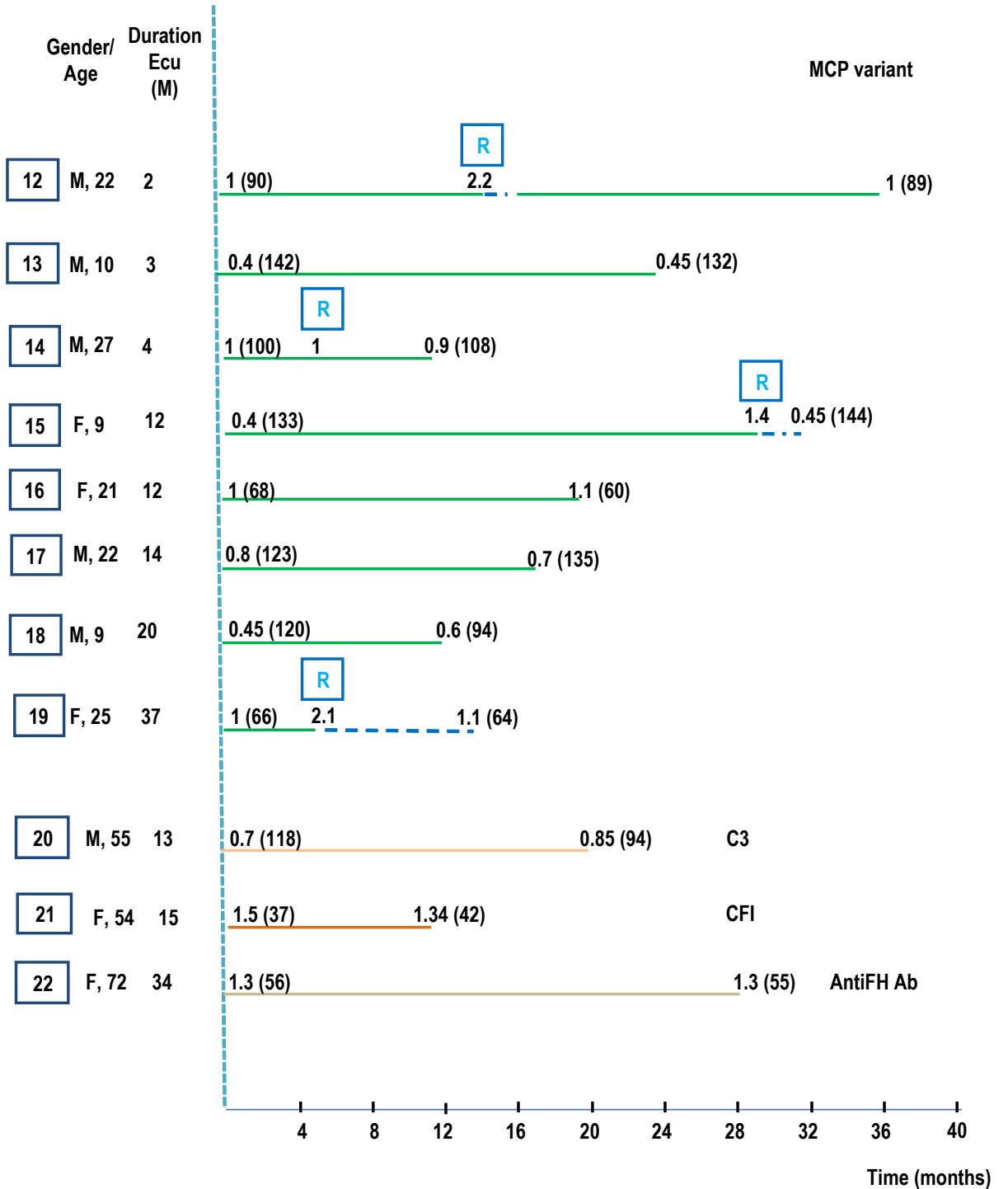
Pt	SCr at relapse (μmol/l)	Diagnostic criteria of relapse	Time to SCr normalization/ return to baseline (days)	Platelet count at relapse (10 ³ /μl)	Time to platelet count normalization (days)	Puria/Curia at relapse (mg/g)	Time to SCr normalization/ return to baseline (days)
1	2.7	AKI + He + Tp	62	49 000	5	5.7g/l	210
2	0.77	AKI + He + Tp	6	98 000	3	10600	27
3	1.4	AKI + He + Tp	31	110 000	7	52000	31
4	1.7	AKI + He + Tp	8	140 000	6	14 g/l	28
5	0.6	AKI + He + Tp	7	97 000	5	530	8
7	3.2	AKI + He	28	200 000	-	1680	66
9	0.7	AKI + He + KB	29	246 000	-	0	-
11	1.7	AKI + He +KB	14	300 000	-	88	NA
12	2.2	AKI + He + Tp	33	57 000	7	21200	8
14	1	AKI + KB	-	165 000	-	2200	60
15	1.4	AKI + He + Tp	11	7 000	7	NA	NA
19	2.1	AKI + He	44	200 000	-	1500	60

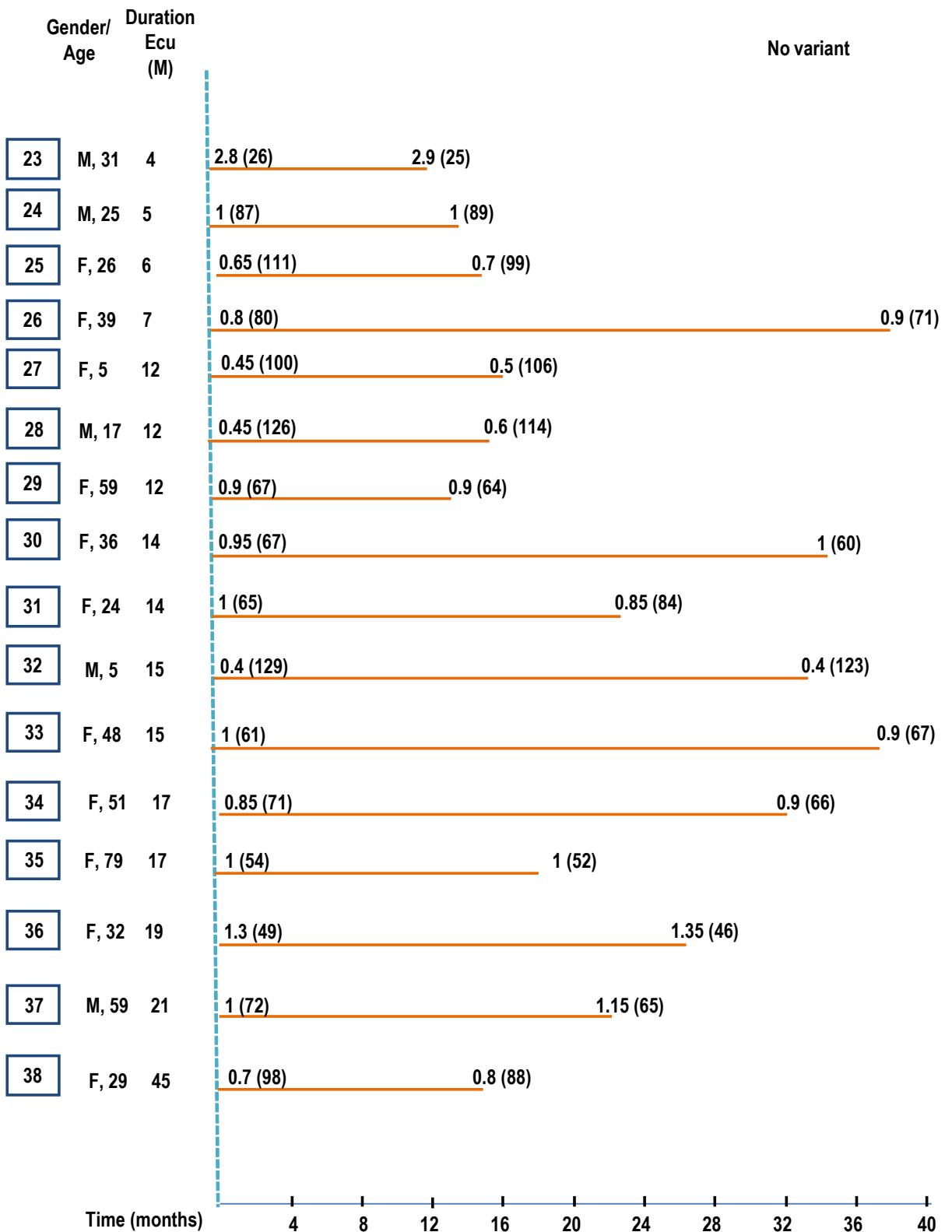
Supplementary table S1: Characteristics of patients at the time of aHUS relapse and after the restart of eculizumab. Abbreviations: SCr, serum creatinine, Puria/Curia, proteinuria to creatininuria ratio. Abbreviations: AKI, acute kidney injury. He, hemolysis. Tp, thrombocytopenia. KB, kidney biopsy. NA, not available.



Supplemental figure 1 : Outcome of 108 aHUS patients treated with eculizumab between 2010 and 2014.

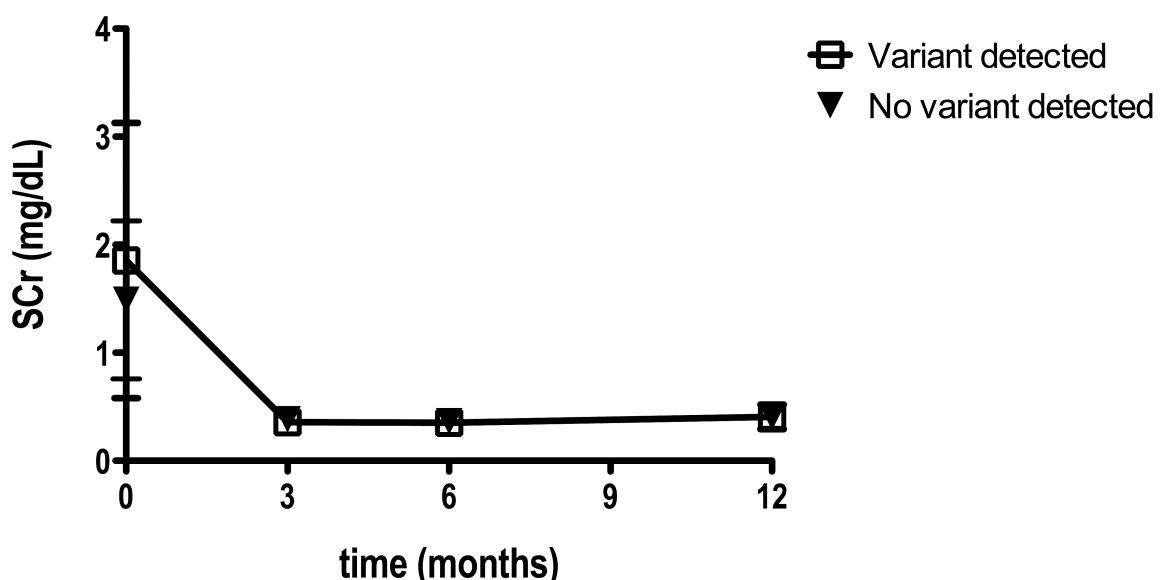
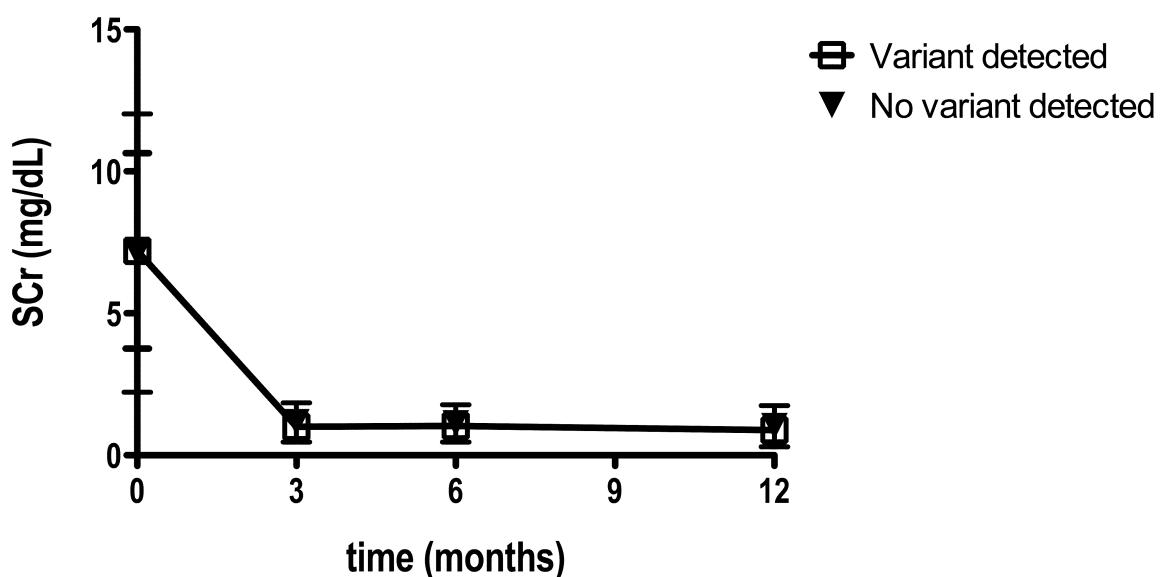






Supplemental figure 2: Outcome of 38 patients with atypical hemolytic uremic syndrome (aHUS) who discontinued eculizumab. Patients are classified based on the presence or absence of complement genes mutations. Serum creatinine values (mg/dL) are shown for each patient above the lines (estimated GFR according to the MDRD or Schwartz formula in brackets). Dotted lines correspond to the period of follow-up after aHUS relapse and eculizumab reintiation.

Abbreviations: F/M, female/male. Ecu, eculizumab. M, months. R, relapse. Anti-FH Ab, anti-factor H antibodies. * age at eculizumab discontinuation.



Supplemental figure 3: Evolution of serum creatinine (SCr) after eculizumab initiation in 28 adults* (upper panel) and 9 children (lower panel) with aHUS and with or without documented complement genes variants. There was no difference in SCr at all time-points in adults and children. * Patient 21 with anti-CFH antibody who received an immunosuppressive treatment combined to eculizumab was excluded from the analysis.