

1. Supplemental Appendix 1

Medline (Ovid)

1. exp pregnancy/
2. exp conception/
3. exp gestation/
4. exp childbirth/
5. exp foetus/
6. exp fetus/
7. exp Newborn/
8. pregnan\$.tw.
9. gestation\$.tw.
10. (new adj5 born).tw.
11. labo\$.tw.
12. fetal\$.tw.
13. 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12
14. exp Clinical Trial/
15. exp Cohort Studies/
16. exp Case-control Studies/
17. Prospective Studies/
18. Retrospective Studies/
19. Longitudinal Studies/
20. Follow-up Studies/
21. cohort\$.tw
22. (case\$ adj5 control\$).tw.
23. (longitudinal\$ adj5 stud\$).tw.
24. (follow\$ adj5 stud\$).tw.
25. (retrospective\$ adj5 stud\$).tw.
26. (prospective\$ adj5 stud\$).tw.
27. 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or 23 or 24 or 25 or 26
28. exp Glomerulonephritides, IGA/
29. exp IGA Nephropathy/
30. exp IGA Glomerulonephritis/
31. exp Immunoglobulin A nephropathy/
32. exp Burgers Disease/
33. IGA Glomeruloneph\$.tw.
34. IGA Neph\$.tw.
35. Immunoglobulin A Glumeruloneph\$.tw.
36. Immunoglobulin A Neph\$.tw.
37. Nephropathy, Immunoglobulin A.tw.
38. 28 or 29 or 30 or 31 or 32 or 33 or 34 or 35 or 36 or 37
39. 13 and 27 and 38

EMBASE

- 1.pregnancy

- 2.conception
- 3.gestation
- 4.fetus
- 5.foetus
- 6.labor
- 7.newborn
- 8.new NEAR/5 born
- 9.childbirth
- 10.labour*
- 11.pregnan*
- 12.1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11
- 13.clinical trial
- 14.cohort study
- 15.case control study
- 16.prospective study
- 17.retrospective study
- 18.longitudinal study
- 19.follow up study
- 20.prospective* NEAR/5 stud*
- 21.retrospective* NEAR/5 stud*
- 22.follow* NEAR/5 stud*
- 23.longitudinal* NEAR/5 stud*
- 24.case* NEAR/5 control*
- 25.13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or 23 or 24
- 26.IgA glomerulonephritis
- 27.Immunoglobulin A glomeruloneph*
- 28.IgA nephropathy
- 29.Immunoglobulin A neph*
- 30.Bergers disease
- 31.IgA neph*
- 32.IgA glomeruloneph*
- 33.Glomerulonephritides, IGA
- 34.26 or 27 or 28 or 29 or 30 or 31 or 32 or 33
- 35.12 and 25 and 34

CBM

检索语句：高级检索（不设年限）

(("IgA 肾小球肾炎" OR "Berger 病" OR "IgA 肾病" OR "免疫球蛋白 A 型肾病" OR "肾小球肾炎, IGA") AND ("怀孕" OR "妊娠" OR "分娩" OR "胎儿分娩" OR "妊娠分娩" OR "分娩")) AND ("妊娠"[不加权:扩展] AND "肾小球肾炎,IGA"[不加权:扩展])

supplement table 1. GRADE assessment of the renal outcomes.

| pregnancy on IgAN for IgA nephropathy | | | | | | |
|--|--|--------------------------------------|---------------------------|------------------------------|---------------------------------|----------|
| Patient or population: patients with IgA nephropathy | | | | | | |
| Settings: | | | | | | |
| Intervention: pregnancy on IgAN | | | | | | |
| Outcomes | Illustrative comparative risks* (95% CI) | | Relative effect (95% CI) | No of Participants (studies) | Quality of the evidence (GRADE) | Comments |
| | Assumed risk Control | Corresponding risk Pregnancy on IgAN | | | | |
| pregnancy on IgAN incidence of end-stage kidney disease requiring RRT or doubling of SCr Follow-up: mean 5 years | Study population | | OR 0.90 (0.59 to 1.37) | 1198 (9 studies) | ⊕⊕⊕⊕ very low ^{1,2} | |
| | 125 per 1000 | 114 per 1000 (78 to 164) | | | | |
| | Moderate | | | | | |
| | 97 per 1000 | 88 per 1000 (60 to 128) | | | | |

*The basis for the **assumed risk** (e.g. the median control group risk across studies) is provided in footnotes. The **corresponding risk** (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).

CI: Confidence interval; OR: Odds ratio;

GRADE Working Group grades of evidence
High quality: Further research is very unlikely to change our confidence in the estimate of effect.
Moderate quality: Further research is likely to have an important impact on our confidence in the estimate of effect and may change the estimate.
Low quality: Further research is very likely to have an important impact on our confidence in the estimate of effect and is likely to change the estimate.
Very low quality: We are very uncertain about the estimate.

¹ Of 9 studies, 2 were retrospective studies and 5 were prospective studies, and 2 were not mentioned whether retrospective studies or prospective studies
² Total number of events is less than 300

| pregnancy on IgAN for IgA nephropathy | | | | | | |
|--|--|--|--------------------------|------------------------------|-----------------------------------|----------|
| Patient or population: patients with IgA nephropathy | | | | | | |
| Settings: | | | | | | |
| Intervention: pregnancy on IgAN | | | | | | |
| Outcomes | Illustrative comparative risks* (95% CI) | | Relative effect (95% CI) | No of Participants (studies) | Quality of the evidence (GRADE) | Comments |
| | Assumed risk Control | Corresponding risk Pregnancy on IgAN | | | | |
| eGFR/CCr Scale from: 0 to 110 Follow-up: mean 4.75 years | | The mean egfr/ccr in the intervention groups was 3.37 higher (0.86 to 5.88 higher) | | 1177 (10 studies) | ⊕⊕⊕⊕ very low ^{1,2,3} | |

*The basis for the **assumed risk** (e.g. the median control group risk across studies) is provided in footnotes. The **corresponding risk** (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).

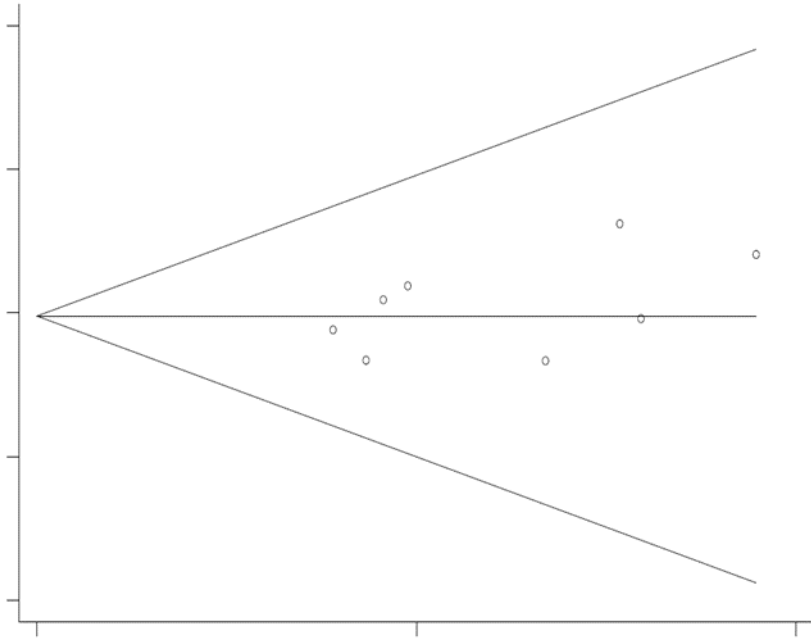
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Very low quality: We are very uncertain about the estimate.

¹ Of 10 studies, 2 were retrospective studies and 6 were prospective studies, and 2 were not mentioned whether retrospective studies or prospective studies
² Total number of events is less than 300
³ Of 10 studies, 5 did not adjust for potential confounding risk factors

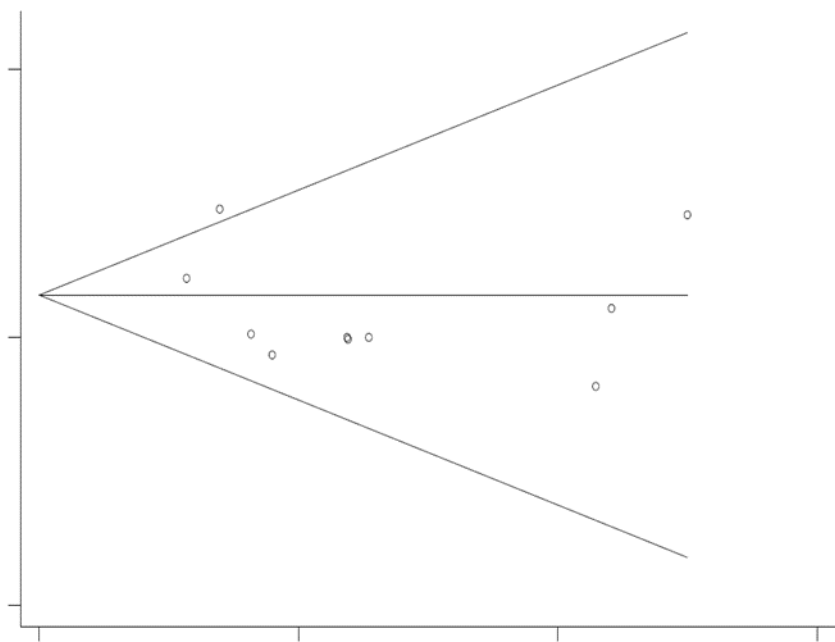
Supplement figure 1.

Begg's funnel plot with pseudo 95% confidence limits



renal outcomes Begg's Test p=0.27

Begg's funnel plot with pseudo 95% confidence limits



eGFR/CCr Begg's Test P=0.86