**Supplementary Table 1.** General clinical and phenotypical characteristics of study participants

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| --- | --- | --- |
| **Variable** | n (236) | Normal range |
| Age (years) | 60.1 ± 10.3 |  |
| Duration of diabetes (years) | 11 (6-18) |  |
| Female sex (n,%) | 126 (53.4%) |  |
| White skin color (n, %) | 203 (86.4%) |  |
| Weight (kg) | 75.7 ± 13.7 |  |
| BMI (kg/m²) | 28.6 ± 4.2 |  |
| Waist circumference (cm) | 100.0 ± 10.5 |  |
| Central obesity (n, %)\* | 198 (83.9%) |  |
| HbA1c (%) | 7.0 (6.3–8.1) | 4.7-6.0 |
| UAE (µg/minute) | 6.4 (3.5 – 33.0) | <30 |
| eGFR (mL/minute per 1.73 m2) | 85 (71.2 – 101.0) | ≥90 |
| Hypertension (n, %) | 208 (88.1%) |  |
| Risk allele on rs7204609 *FTO* SNP (n, %) | 35 (14.8%) |  |
| Diabetes treatment (n, %)  Only Diet  Oral antidiabetic agents  Insulin  Insulin + oral antidiabetic agents | 12 (5.1%)  140 (59.3%)  28 (11.9%)  56 (23.7%) |  |
| ACE inhibitors (n, %) | 131 (55.5%) |  |

**Note:** Data are expressed as mean ± standard deviation, median (25th percentile, 75th percentile) or number of patients with the characteristic (%). \* Elevated waist circumference: ≥94 cm for men and ≥80 cm for women.

**Abbreviations:** BMI, Body mass index; HbA1c, glycated hemoglobin; UAE, urinary albumin excretion; eGFR, estimated glomerular filtration rate; *FTO,* Fat Mass and Obesity Associated; ACE, angiotensin-converting enzyme inhibitors; SNP, single nucleotide polymorphism.

**Supplementary Table 2.** Odds Ratio for the direct effects on chronic kidney disease

|  |  |  |
| --- | --- | --- |
| **Relation** | **Odds ratio (OR)** | **Confidence intervals (CI 95%)** |
| Risk allele onrs7204609 *FTO* SNP→ CKD | 1.124 | 0.981-1.284 |
| HbA1c (%) → CKD | 0.969 | 0.912- 1.031 |
| Blood pressure → CKD | 0.933 | 0.858-1.013 |
| UAE (µg/minute) → CKD | 1.008 | 1.007-1.009 |

**Abbreviations:** *FTO*, fat mass and obesity-associated; SNP, single nucleotide polymorphism; CKD, chronic kidney disease; HbA1c, glycated hemoglobin; UAE, urinary albumin excretion.

All variables were considered continuous, except for the presence of the risk allele of the rs7204609 polymorphism of the *FTO* gene (C allele) and for the presence of chronic kidney disease.