

1. Specify please, if patient is taking ACE/ARB because, as you noted, these are risk factors for acute phosphate nephropathy (APN).

*Patient had no history of recent use of ACE inhibitors or ARB (lines 67-68).*

2. Provide parathyroid hormone and magnesium levels in order to exclude hypoparathyroidism as a cause for APN.

*Serum magnesium (1.6mg/dL) was normal. Parathyroid hormone (PTH) was within acceptable limits for chronic kidney disease patients (205, based on KDIGO) (lines 85-87).*

3. Specify please, why chronic hepatitis (139) is a risk factor for APN.

*Several studies cited liver disease as a risk factor for APN. Tissue necrosis, a regular feature of liver failure, can lead to increased phosphate levels, especially in cases of failed spontaneous recovery from liver disease. Liver dysfunction, such as in cases with portal hypertension, can also possibly increase the permeability of colonic mucosa to sodium phosphate (lines 137-141).*