

Figure 1: Pathway for vitamin C (ascorbic acid) conversion to oxalic acid.

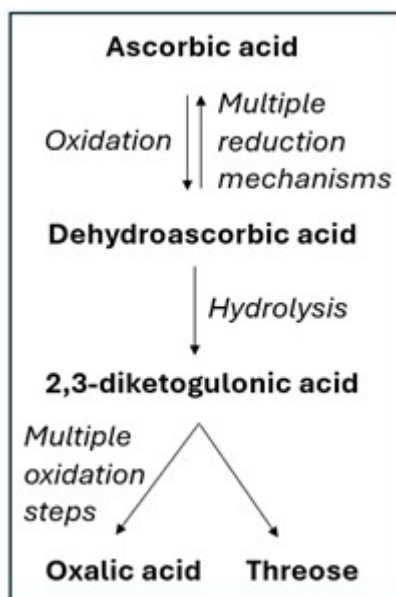


Table 1: Alternate risk factors for renal failure and secondary oxalosis reported in the literature.

Renal failure risk factors	Secondary oxalosis risk factors
Medications causing crystal deposition (e.g., ceftriaxone and amikacin, and other antibiotics, darunavir, triamterene, etc.)	Medications (e.g., methoxyflurane, orlistat, xylitol, topiramate, indinavir and other antivirals, etc.)
Renal transplantation failure (e.g., antibody-mediated rejection, reoccurrence of disease)	Excessive intake (e.g., ethylene glycol, specific foods)
Direct infection of kidneys (e.g. SARS-CoV-2/ACE2 interaction)	Increased absorption (e.g., gastrointestinal diseases, gastrointestinal surgery)
Septic shock/severe burns (e.g., renal hypoperfusion, cytokine storm, vasopressor administration, drug toxicity, mechanical ventilation)	Decreased excretion (e.g., dehydration/diarrhoea, acute and chronic renal failure, chronic haemodialysis)
Chronic diseases (e.g., diabetes, hypertension, auto-immune diseases)	Vitamin deficiencies (e.g., thiamine, pyridoxine)