

Figure S1. Effect of OAA on cell death in cisplatin-exposed TCMK-1 cells. Viability of TCMK-1 cells was analyzed using WST analysis after pretreatment with various concentrations of OAA or OA, followed by stimulation with cisplatin for 21 h (a). Viability of TCMK-1 cells was analyzed using WST analysis after pretreatment of Nec-1, followed by stimulation with cisplatin for 21 h (b). All data are presented as mean ± SD of three independent experiments. *p < 0.05, significantly different from cisplatin-treated group.

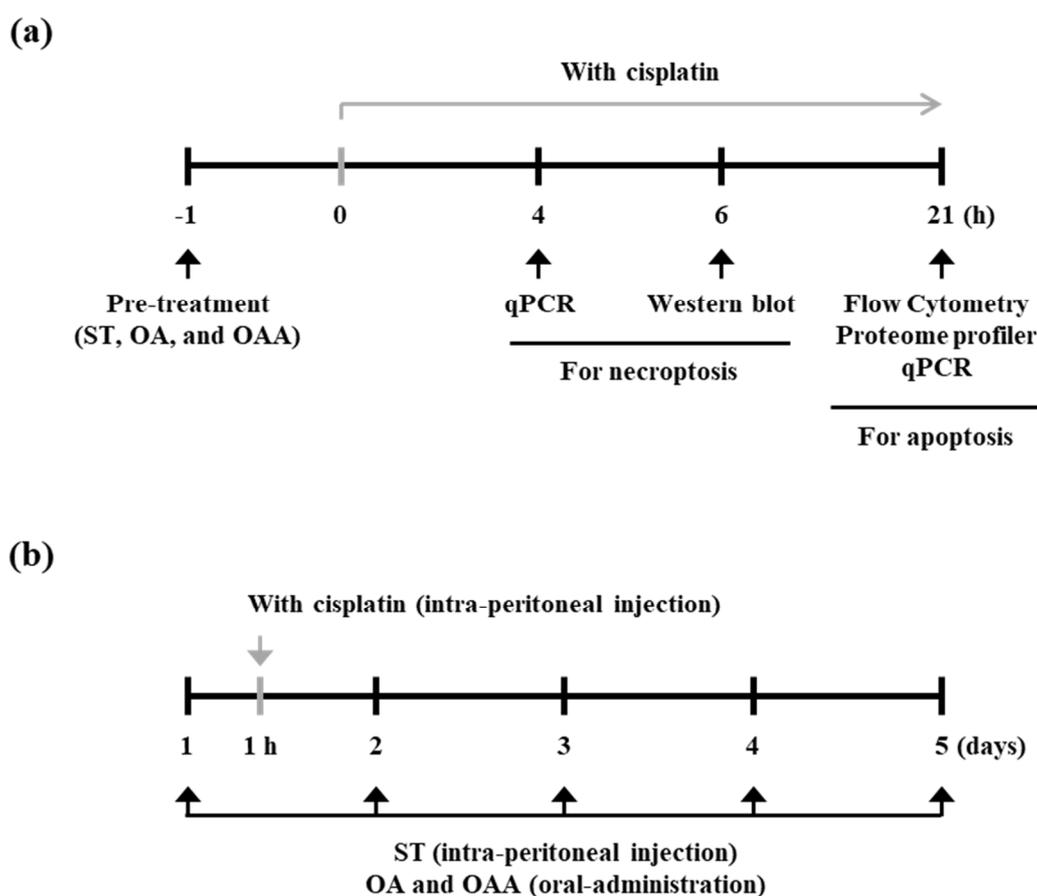


Figure S2. Schematic representation of the experimental design. TCMK-1 cells were treated with ST, OA, and OAA for 1 h and were subsequently stimulated with cisplatin. After 4 h, the cells were harvested for qPCR. After 6 h, the cells were harvested for Western blot. After 21 h, the cells were harvested for apoptosis assay (a). OA and OAA were orally administered once daily for 5 days. ST was intraperitoneally injected once daily for 5 days. Cisplatin was intraperitoneally injected at 1 h after drug administration on the first day (b).

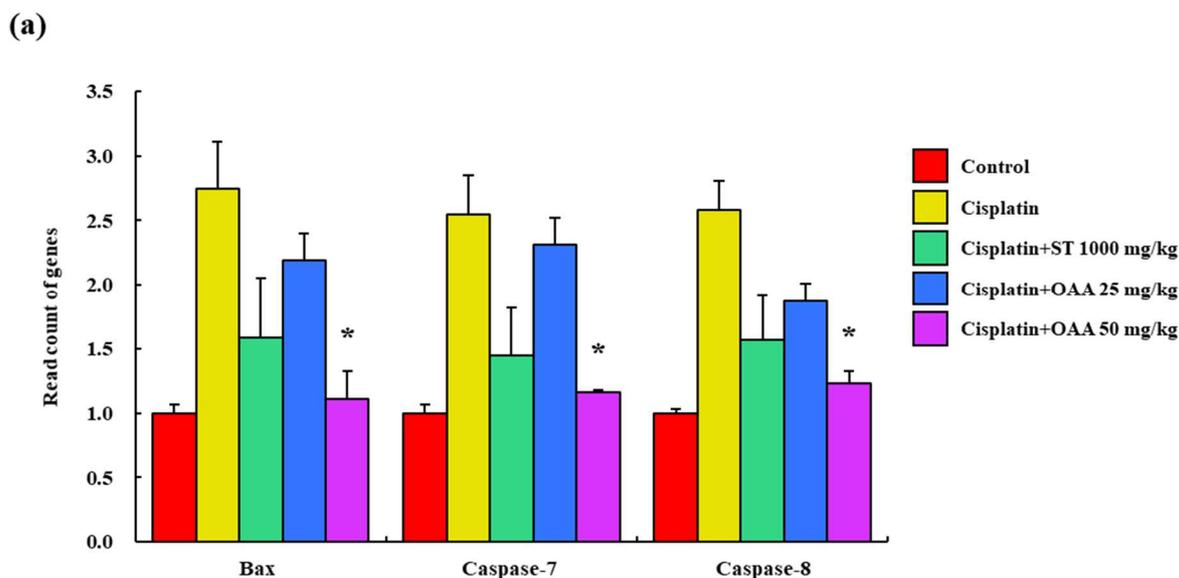


Figure S3. Effect of OAA on apoptosis-related gene expression in a mouse model of cisplatin-induced nephrotoxicity. Read count of apoptosis-related gene, such as *Bax*, *caspase7*, and *caspase8*, in RNA sequencing result. All data are presented as mean \pm SD. * $p < 0.05$, significantly different from the cisplatin-treated group.

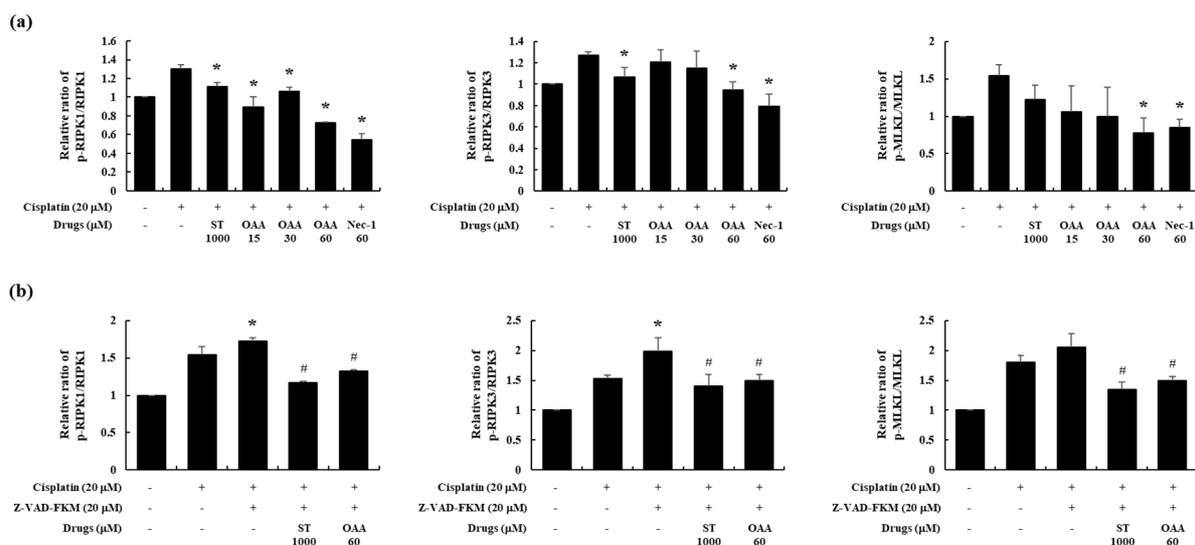


Figure S4. The relative density of the Western blot bands of cisplatin-treated TCMK-1 cells. The Western blot bands were quantified using densitometry. The related ratios of p-RIPK1/RIPK1, p-RIPK3/RIPK3, and p-MLKL/MLKL are indicated in Figure 5b (a) and Figure 5c (b). All data are presented as mean \pm SD of three independent experiments. * $p < 0.05$, significantly different from the cisplatin-treated group. # $p < 0.05$, significantly different from z-VAD-FMK and the cisplatin-treated group.

Table S1. Criteria for histological scores.

Score	Grade	Overview	Glomeruli	Tubules
1	Normal	Normal	Normal	Normal
2	Mild	More or less normal aspect High glomerular cell count	Apoptosis of endothelium cells Inflammatory infiltrate	Little dilation Normal basal membrane No protein cylinders
3	Moderate	Tubular dilation Tubular cell damage	Same as grade 1	Apoptotic cells More pronounced dilation Thickened basal membrane Little tubular protein cylinders Regenerating cells (mitotic activity)
4	Pronounced	Stronger tubular dilation Cell-rich infiltrate Regenerating tubules	Smaller vascular lumina Few erythrocytes	Flat epithelium Partly, complete loss of epithelium Stronger dilation Inflammatory infiltrate Regeneration present More thickened basal membrane
5	Severe	Severe tubular dilation	Same as grade 3 More optical empty space due to glomerular shrinkage	Same as grade 3, but more empty cylinders Peripheral fibrosis