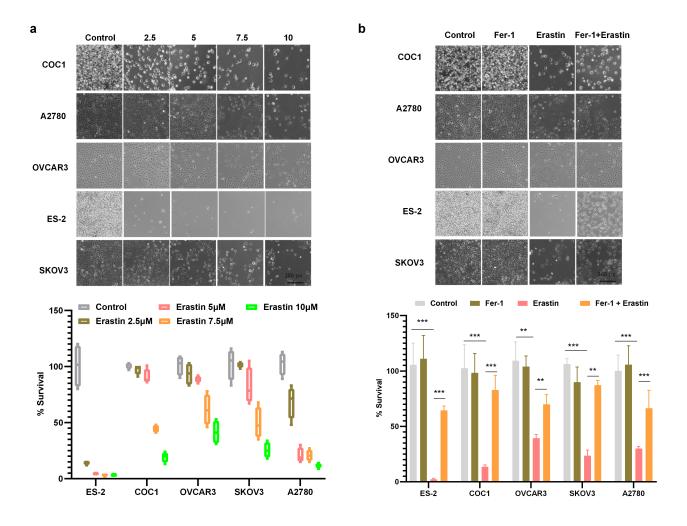
Patient number	Age	Pathological diagnosis	FIGO stage	p53	Experimental Study
1	42	High grade serous carcinoma of ovary and fallopian tube	IIa	Missense mutant	qRT-PCR, IHC
2	70	High grade serous carcinoma of ovary and fallopian tube	IIIc	Missense mutant	qRT-PCR, IHC
3	73	High grade serous carcinoma of ovary and fallopian tube	IIIc	Missense mutant	qRT-PCR, IHC
4	56	High grade serous carcinoma of ovary and fallopian tube	IVB	Nonsense mutant	qRT-PCR, IHC
5	67	High grade serous carcinoma of ovary and fallopian tube	IIIB	Missense mutant	qRT-PCR, IHC
6	50	High grade serous carcinoma of ovary	ΙΑ	Missense mutant	qRT-PCR, IHC
7	54	High grade serous carcinoma of ovary and fallopian tube	IIIc	Missense mutant	qRT-PCR, IHC
8	51	High grade serous carcinoma of ovary	IIB	Wild type	MDA, Fe <sup>2+</sup> , GSH/GSSG
9	58	High grade serous carcinoma of ovary and fallopian tube	IIA	Nonsense mutant	MDA, Fe <sup>2+</sup> , GSH/GSSG
10	58	High grade serous carcinoma of ovary and fallopian tube	IIIC	Missense mutant	MDA, Fe <sup>2+</sup> , GSH/GSSG
11	64	High grade serous carcinoma of ovary and fallopian tube	IIIC	Missense mutant	MDA, Fe <sup>2+</sup> GSH/GSSC
12	47	High grade serous carcinoma of ovary and fallopian tube	IC	Missense mutant	MDA, Fe <sup>2+</sup> , GSH/GSSC
13	58	High grade serous carcinoma of ovary and fallopian tube	IC	Nonsense mutant	MDA, Fe <sup>2+</sup> GSH/GSSC
14	49	High grade serous carcinoma of ovary and fallopian tube	IIIC	Missense mutant	MDA, Fe <sup>2+</sup> GSH/GSSC
15	63	High grade serous carcinoma of ovary and fallopian tube	IV	Missense mutant	PDX

#### Supplementary Table 1: Description of Ovarian Cancer Tissue Samples

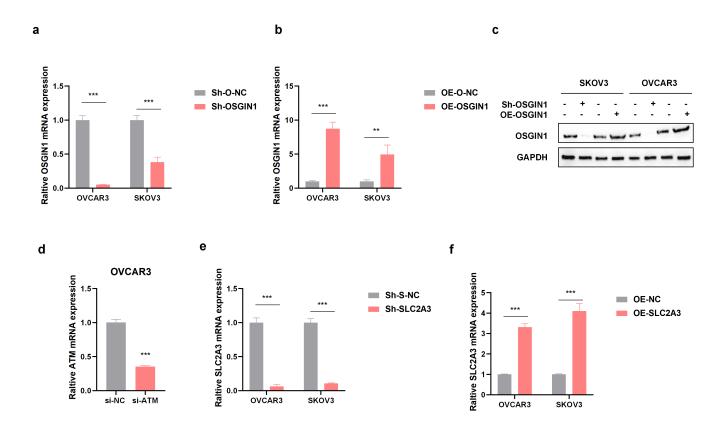
Patient /block	Age (years)	<b>Reason for surgery</b>	Ovary diseases	Experimental Study	
number					
1	53	Fibroids	No	qRT-PCR, IHC	
2	61	Cervical intraepithelial neoplasia III	No	qRT-PCR, IHC	
3	60	Fibroids	No	qRT-PCR, IHC	
4	58	Cervical intraepithelial neoplasia III	No	qRT-PCR, IHC	
5	56	Fibroids	No	qRT-PCR, IHC	
6	54	Fibroids	No	qRT-PCR, IHC	
7	56	Fibroids	No	qRT-PCR, IHC	
8	57	Fibroids	No	MDA, Fe <sup>2+</sup> , GSH/GSSG	
9	61	Fibroids	No	MDA, Fe <sup>2+</sup> , GSH/GSSG	
10	59	Cervical intraepithelial neoplasia III	No	MDA, Fe <sup>2+</sup> , GSH/GSSG	
11	56	Cervical intraepithelial neoplasia III	No	MDA, Fe <sup>2+</sup> , GSH/GSSG	
12	67	Cervical intraepithelial neoplasia III	No	MDA, Fe <sup>2+</sup> , GSH/GSSG	
13	66	Cervical intraepithelial neoplasia II	No	MDA, Fe <sup>2+</sup> , GSH/GSSG	
14	55	Cervical squamous cell carcinoma stage IA2	No	MDA, Fe <sup>2+</sup> , GSH/GSSG	

#### Supplementary Table 2: Clinical Profile of Patients Donating Normal Ovaries

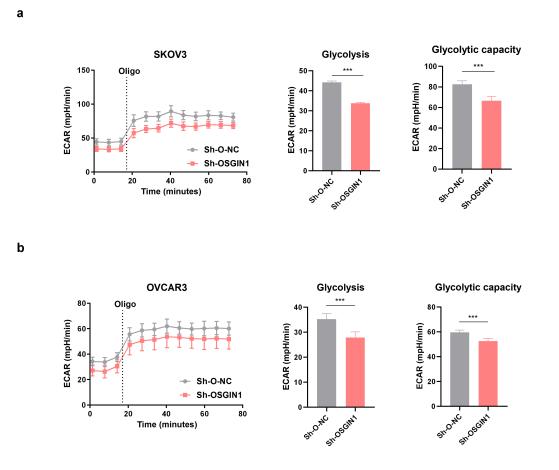
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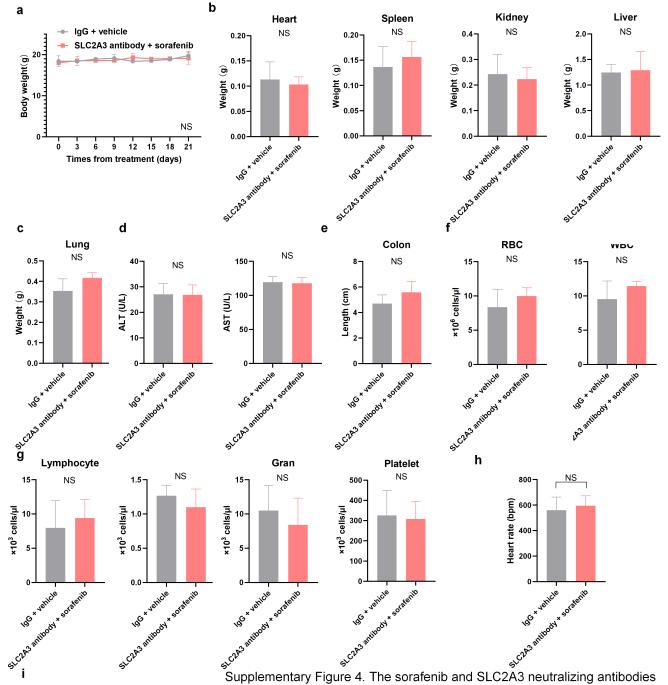
Supplementary Figure 1. Ferroptosis was occurred in erastin-treated ovarian cancer cells. a The effect of different concentrations (0, 2.5, 7.5, 10  $\mu$ M) of erastin on cell viability as determined by CCK8 assay. b The viability of ES-2, COC1, OVCAR3, SKOV3 and A2780 cells treated with DMSO (control), erastin (10  $\mu$ M), alone or in combination with fer-1(10  $\mu$ M) were analyzed with the CCK8 assay. Each experiment was repeated three times. The p values in a-b were determined by two-way ANOVA with multiple comparisons. \*p < 0.05; \*\*p < 0.01 and \*\*\*p < 0.001.

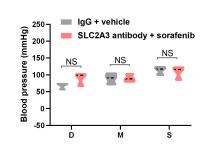


Supplementary Figure 2. Enhancing or reducing the efficiency of knocking down or overexpressing various genes. a-c The knock-down or overexpression efficiency of OSGIN1 was verified through western blot and qRT-PCR analysis. d The knock-down efficiency of ATM was verified through qRT-PCR analysis. e-f The knock-down or overexpression efficiency of SLC2A3 was verified through qRT-PCR analysis. Each experiment was repeated three times. The p values in a-b and e-f were determined by one-way ANOVA with multiple comparisons. Statistical significance in d was determined by a two-tailed unpaired t-test. \*\*p < 0.01



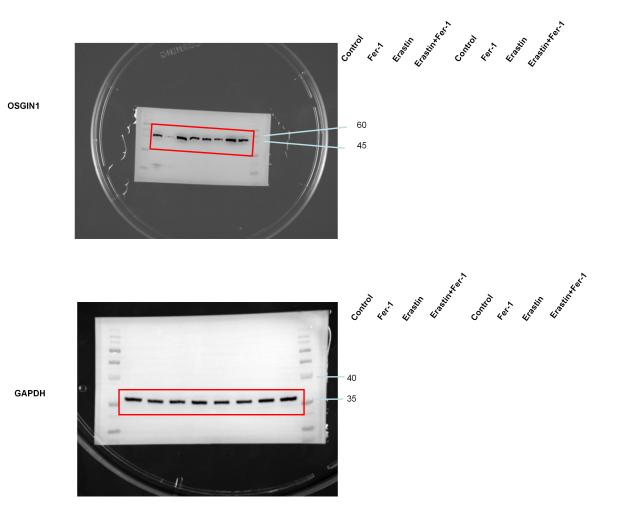
Supplementary Figure 3. ECAR (extracellular acidification rate) results for SKOV3 and OVCAR3 cells transfected with sh-O-NC or sh-OSGIN1 by using Seahorse XF96 analyzer. Glycolysis: ECAR values before the addition of oligomycin; Glycolytic capacity: ECAR values following addition of oligomycin. \*\*\*p < 0.001



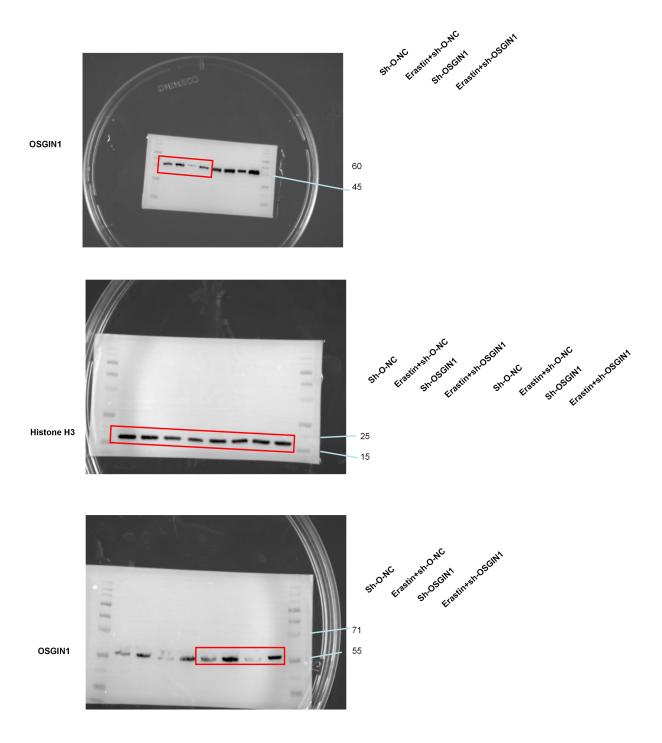


×10<sup>3</sup> cells/µl

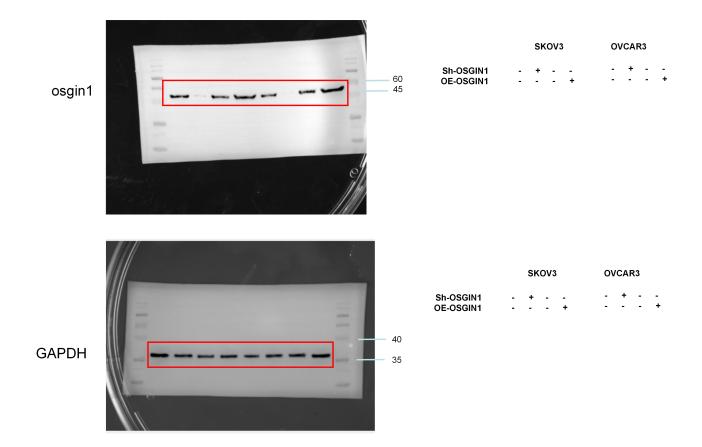
Supplementary Figure 4. The sorafenib and SLC2A3 neutralizing antibodies in combination has a good safety profile in NOD-SCID-IL2Ryc-/- mice. The sorafenib was administered at a dose of 30 mg/kg body weight via oral gavage once daily until day 21. Additionally, the SLC2A3-neutralizing antibody was administered once daily via intraperitoneal injection at a dose of 100 µg per mouse until day 21. And then euthanized for toxicity studies (n = 3). a Body weight change. b-c Heart, liver, spleen, lung, and kidney weights. d Serum concentrations of AST and ALT. e Colon length. f-g Whole blood counts of red blood cells (RBCs), white blood cells (WBCs), platelets, lymphocytes, monocytes and gran using a Mindray whole-cell blood analyzer. h Heart rate was measured 1 day after the final treatment. Bpm, beats per minute. i Blood pressure of mice was measured 1 day after the final treatment. D, M, and S represent diastolic, mean, and systolic blood pressure, respectively. The data are presented as the means  $\pm$  SEMs and were analyzed by unpaired Student' s t test. NS, P > 0.05.



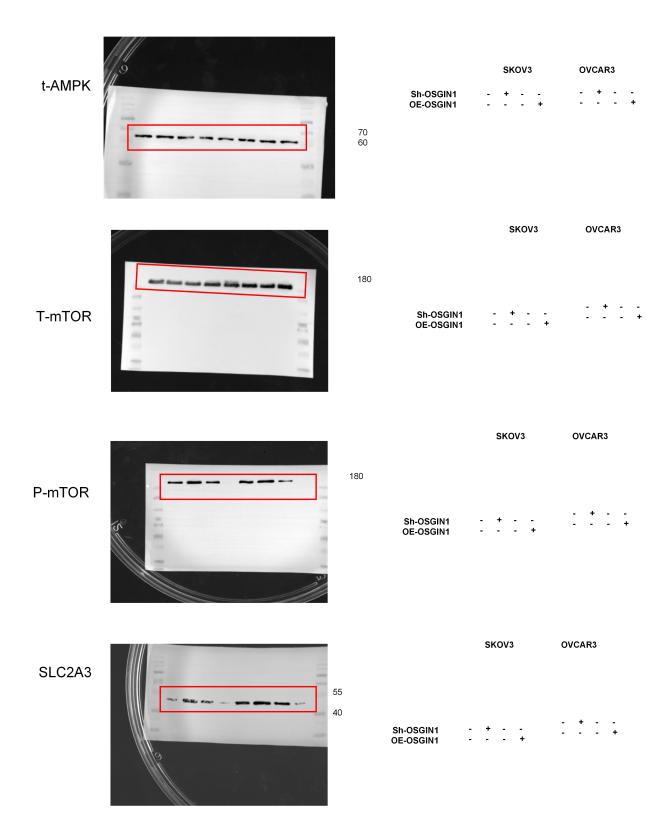
Supplementary Figure 5. Full-size blots of Figure 2d.



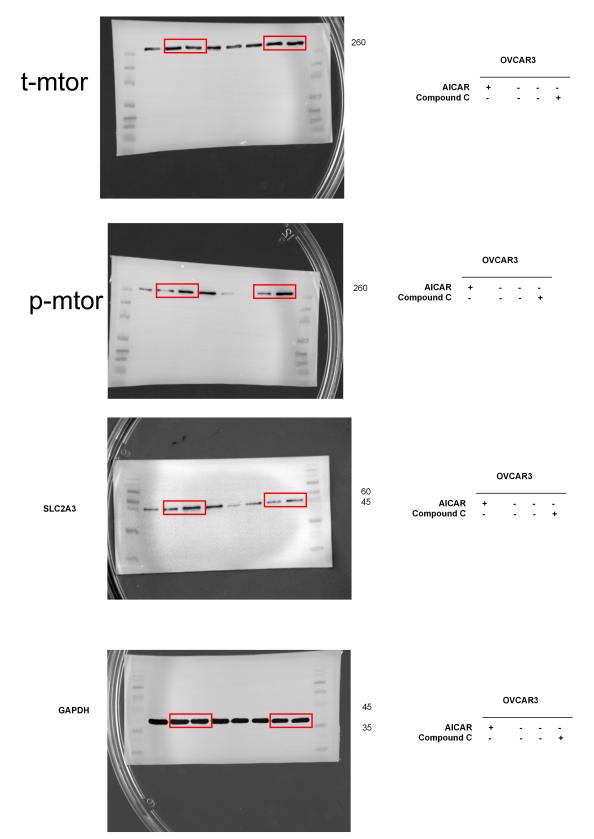
Supplementary Figure 6. Full-size blots of Figure 3a.



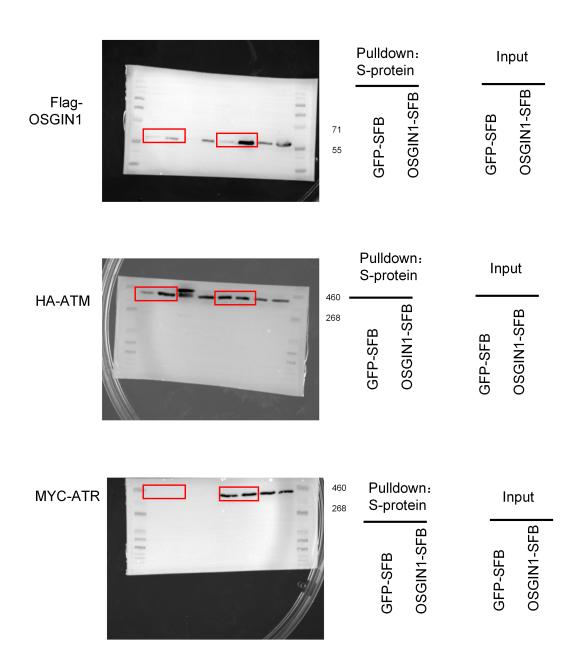
Supplementary Figure 7. Full-size blots of Supplementary Figure 2c.



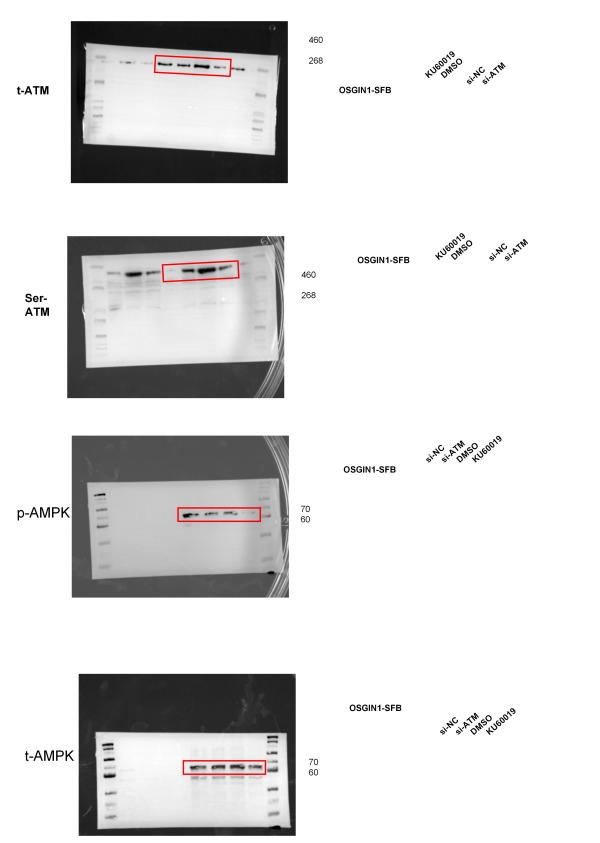
Supplementary Figure 8. Full-size blots of Figure 4d.



Supplementary Figure 9. Full-size blots of Figure 4g.



Supplementary Figure 10. Full-size blots of Figure 5a.

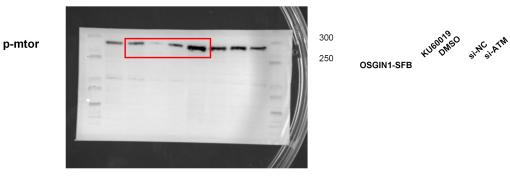


Supplementary Figure 11. Full-size blots of Figure 5b.

t-mTOR







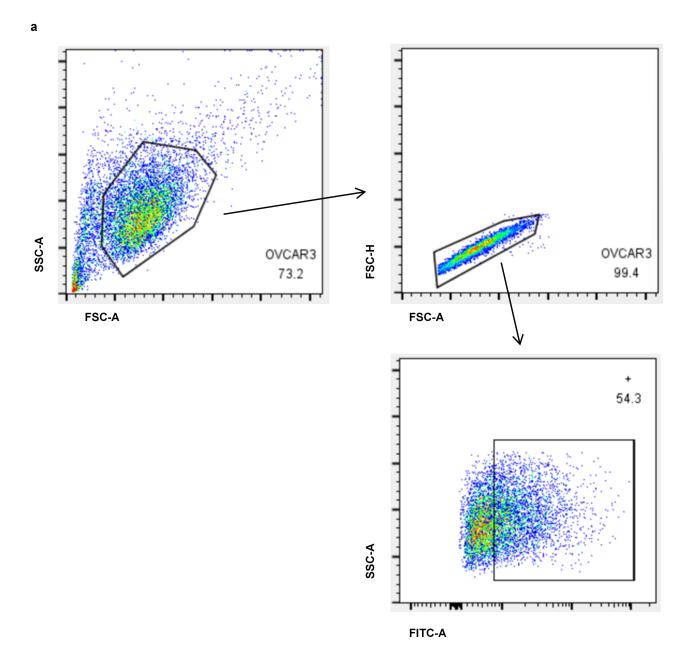
Histone H3



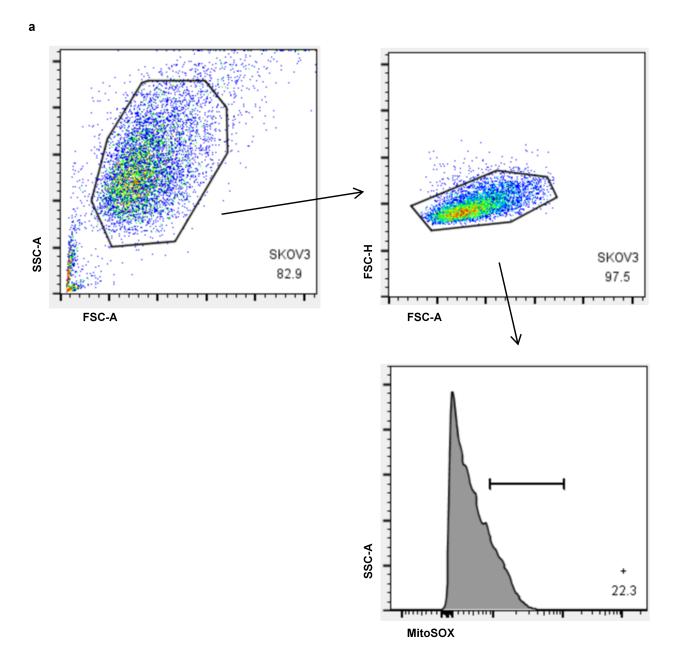


Supplementary Figure 12. Full-size blots of Figure 5b.

Supplementary Figure 13



Supplementary Figure 13. Gating strategy to determine the percentage of OVCAR3 cells.



Supplementary Figure 14. Gating strategy to determine the percentage of SKOV3 cells.