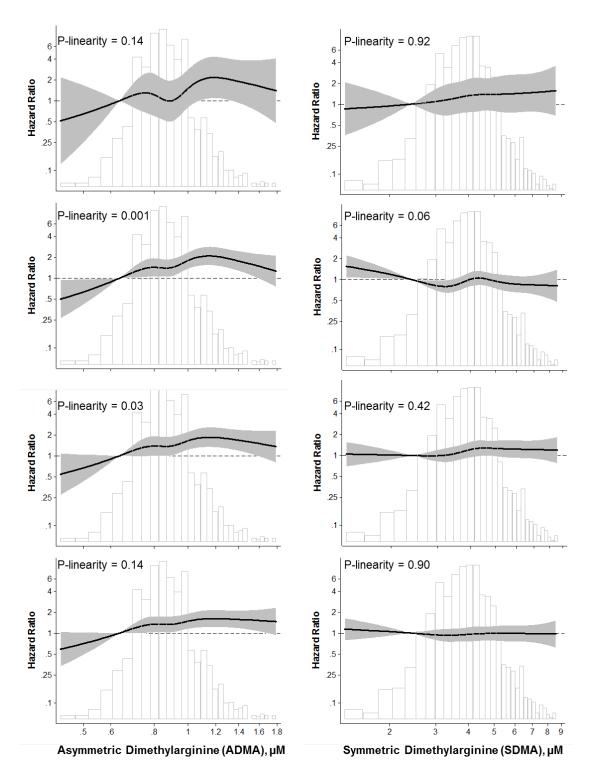
Figure S1: Association of ADMA and SDMA with Outcomes in the HEMO Study



Relative hazard predicted using Cox proportional hazards regression adjusted for age, sex, race, Index of Coexisting Disease (ICED) severity score, cause of end-stage renal disease, body mass index (categorized as <18, 18 to 25 and >25 kg/m2), systolic blood pressure (categorized as <130, 130-160 and >160 mm Hg), albumin,

relative volume removed on dialysis, and residual kidney function (urinary stdKt/ $V_{UREA}$  calculated from urinary urea clearance). ADMA and SDMA are modeled as a restricted cubic spline with 5 knots (5<sup>th</sup>, 27.5<sup>th</sup>, 50<sup>th</sup>, 72.5<sup>th</sup> and 95<sup>th</sup> percentiles); 10th percentile is used as the reference (HR = 1). The lines represent the adjusted HR and the shaded area is the 95% CI of the HR. Vertical bars are the frequency histogram, showing the distribution of the solutes. Extreme observations, defined as values >99<sup>th</sup> percentile, are excluded; ADMA >1.8  $\mu$ M (n=12) and SDMA >8.6  $\mu$ M (n=12).

Panel A (left): Asymmetric Dimethylarginine (ADMA) and Outcomes Panel B (right): Symmetric Dimethylarginine (SDMA) and Outcomes.