

**Fig S1**: Course of *P. chabaudi AS* infection and pregnancy outcome in intraperitoneally-delivered N Actetylcysteine (NAC) and PBS-treated (control) mice from ED6 to ED12. Percent weight change (A) with area under the curve (AUC) (B) are indicated. Percent hematocrit (C) and AUC (D) also depict anemia in infected pregnant (IP) vs uninfected pregnant (UP) mice. Percent parasitemia (E) and AUC (F) are comparable in mice (Mann Whitney U test). Uterus weight (G) and embryo viability (H) do not show any improvement of pregnancy outcome in mice receiving treatment versus those treated with PBS. A Kruskal-Wallis test followed by Dunn's Multiple Comparison was used to verify statistical significance between the four experimental groups (UP NAC (closed diamond); UP PBS (closed circle); IP NAC (open diamond), and IP PBS (open circle). Data depicted in panels A-F cumulatively represent 6 independent experiments (n=26 mice) sacrificed at ED12; panels G and H represent 5 independent experiments (n=21 mice) sacrificed at ED10. \*P<0.05; \*\*P<0.01; \*\*\*P<0.001; ns=not statistically significant.



**Fig S2**. Representative immunostaining for 4hydroxynonenal (HNE), marker of lipid peroxidation, in ED10 placenta and spleen from mice injected with Nacetyl cysteine (NAC) or control (PBS). Uninfected pregnant (UP) junctional zone (JZ; A, B), labyrinth (LB; C, D) and spleen (SP; E, F) show little staining regardless of treatment. Heavy staining is observed regardless of treatment in infected pregnant (IP) junctional zone (JZ; G, H), labyrinth (LB; I, J) and spleen (SP; K, L). This experiment was performed with samples from mice generated in 5 independent experiments.



**Fig. S3**: Correlation of embryo viability and uterus weight in tempol-treated *P. chabaudi* AS-infected mice. The correlation is highly significant: r = 0.8584, P = 0.0045 by Spearman's correlation test.



**Fig. S4**: Course of *P. chabaudi AS* infection and pregnancy outcome in orally-delivered Tempol (TPL) from ED6 to ED12 in B6 mice. Percent weight change (**A**) and area under the curve (AUC) (**B**) are indicated. Also depicted are percent hematocrit (**C**) and AUC (**D**) as well as percent parasitemia (**E**) and AUC (**F**) are comparable in mice orally-delivered TPL versus mice under drinking water (Mann Whitney U test). Pregnancy outcome as indicated by uterus weight (**G**) shows relative improvement with TPL and the number of embryo per uterus remains unchanged (**H**). A Kruskal-Wallis test followed by Dunn's Multiple Comparison test was used to verify statistical significance between the four experimental groups (uninfected pregnant (UP)-TPL (closed diamond); UP-H<sub>2</sub>O (closed circle); infected pregnant (IP)-TPL (open diamond), and IP-H<sub>2</sub>O (open circle). Data depict 31 mice generated in 9 independent experiments. Number of embryo/uterus varies across the groups (Kruskal-Wallis test, P=0.0451); pairwise post-hoc tests are not significant. \*P<0.05; \*\*P<0.01; \*\*\*P<0.001; ns=not statistically significant.