**Table S1. Missing number (%) for variables**

|  |  |
| --- | --- |
| **Variables** | **Missing number (%)** |
| **Age** | 0(0) |
| **Sex, male** | 0(0) |
| **Weight** | 73(0.4%) |
| **Emergency** | 0(0) |
| **AKI stage** | 0(0) |
| **Comorbidities** |  |
| CKD | 0(0) |
| Diabetes | 0(0) |
|  Heart failure | 0(0) |
|  Chronic lung disease | 0(0) |
|  Chronic liver disease | 0(0) |
|  Fluid and electrolyte disorders | 0(0) |
|  Hypertension | 0(0) |
|  Sepsis | 0(0) |
|  Cardiac arrhythmias | 0(0) |
| **Disease severity scores** |  |
| SOFA score on ICU admission | 0(0) |
| SAPS II on ICU admission | 0(0)  |
| **Biochemical indices** |  |
| Scra | 0(0)  |
| WBC counta | 91(0.6%) |
| Hba | 55(0.4%) |
| PLTa | 63(0.4%) |
|  Glua | 31(0.2%) |
| **eGFR** | 0(0) |
| **Vasopressors use c** | 0(0) |
| **Mechanical ventilationc** | 0(0) |
| **MAPb** | 20(0.1) |

Abbreviations: AKI: acute kidney injury, CKD: chronic kidney diseases, COPD: chronic obstructive pulmonary disease, ARDS: acute respiratory distress syndrome, IQR: interquartile range, SOFA: sequential organ failure assessment, SAPS II: Simplified Acute Physiology Score II, RRT: renal replacement therapy, eGFR: estimated glomerular filtration rate, MAP: mean arterial pressure, ICU: intensive care unit. Scr: serum creatinine, WBC: white blood cell, Hb: hemoglobin, PLT: platelet, Glu: glucose.

aThe maximum values during the first day after ICU admission were recorded

bMAP was calculated within the first 24 h after the ICU admission

cThe status during the first day after ICU admission were recorded

**Table S2. The association with early thiamine use on the RRT and nutritional supplement.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Non early thiamine use group** | **Early thiamine use group** | **P** | **OR** | **95% CI** | **Adjusted P** | **OR** | **95% CI** |
| **Prematched cohort** | n=14331 | n=735 |  |  |  |  |  |  |
| **Primary outcome** |  |  |  |  |  |  |  |  |
| **RRT** | 1341 (9.4) | 68 (9.3) | 0.924 | 0.99 | (0.76–1.28) | 0.305 | 0.86 | (0.63–1.15) |
| **Parenteral nutrition** | 333 (2.3) | 35 (4.8) | <0.001 | 2.10 | (1.47–3.00) | 0.166 | 1.31 | (0.89–1.92) |
| **Enteral nutrition** | 1744 (12.2) | 188 (25.6) | <0.001 | 2.48 | (2.09–2.95) | <0.001 | 1.71 | (1.41–2.07) |
| **Oral nutritional supplement** | 6 (0) | 0 (0) | - | - | - | - | - | - |
| **Matched cohort** | n=734 | n=734 |  |  |  |  |  |  |
| **Primary outcome** |  |  |  |  |  |  |  |  |
| **RRT** | 76 (10.4) | 68 (9.3) | 0.483 | 0.88 | (0.63–1.25) | - | - | - |
| **Parenteral nutrition** | 33 (4.5) | 35 (4.8) | 0.804 | 1.06 | (0.65–1.73) |  |  |  |
| **Enteral nutrition** | 143 (19.5) | 187 (25.5) | 0.006 | 1.41 | (1.10–1.81) | - | - | - |
| **Oral nutritional supplement** | 0 (0) | 0 (0) | - | - | - | - | - | - |

The association with of early thiamine use on the RRT and nutrition supplement was estimated using logistic regression, adjusted by age, sex, weight, emergency status, AKI stage, CKD, diabetes, heart failure, chronic liver disease, fluid and electrolyte disorders, hypertension, sepsis, SOFA score on ICU admission, Hb, PLT, eGFR and MAP.

The timing of the RRT and nutrition supplement was the duration of the patients in the ICU.

The administration of any oral nutritional supplements (e.g. Fortisip) was recorded in the ICU.