

Figure S1. Ropivacaine treatment does not affect the viability of AC16 and HCM cells. Cell viability following treatment with different ropivacaine concentrations. Data are presented as the mean \pm standard deviation from three independent experiments.

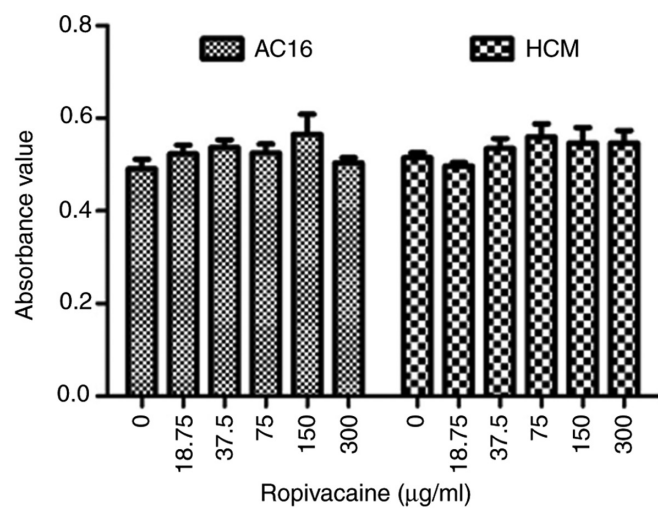


Figure S2. Ropivacaine treatment does not alter the effects of propofol on the viability of AC16 and HCM cells. Cell viability following combined treatment with 25 $\mu\text{g/ml}$ of propofol and different ropivacaine concentrations. Data are presented as the mean \pm standard deviation from three independent experiments. *** $P < 0.001$ vs. the control group. Con, control; NS, not significant.

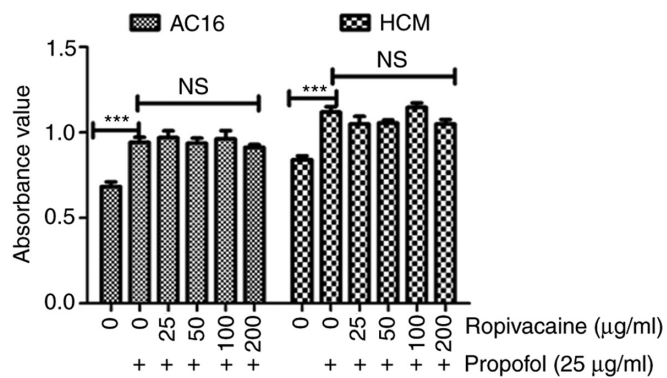


Figure S3. Ropivacaine treatment does not change the CoCl_2 -induced hypoxic effects on the viability of AC16 and HCM cells. Cell viability following the combined treatment with $500\ \mu\text{M}$ CoCl_2 and different ropivacaine concentrations. Data are presented as the mean \pm SD from three independent experiments. ** $P < 0.01$ vs. the control group. Con, control; NS, not significant; CoCl_2 , cobalt chloride.

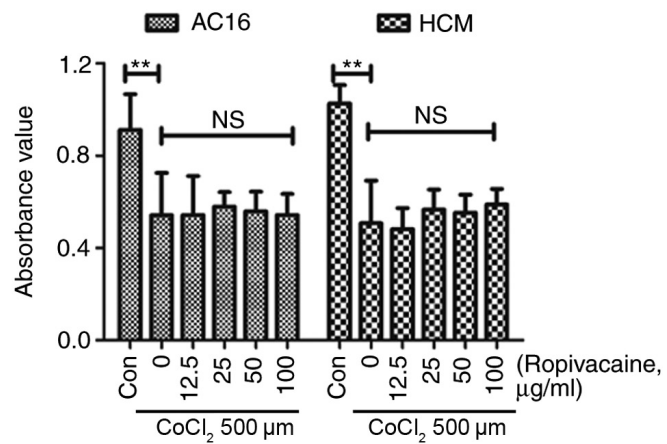


Figure S4. Western blot analyses of the phosphorylation of p65, p38, ERK and JNK in AC16 and HCM cells. AC16 and HCM cells were pre-incubated with propofol at different concentrations at 37°C for 2 h. P, phosphorylated.

