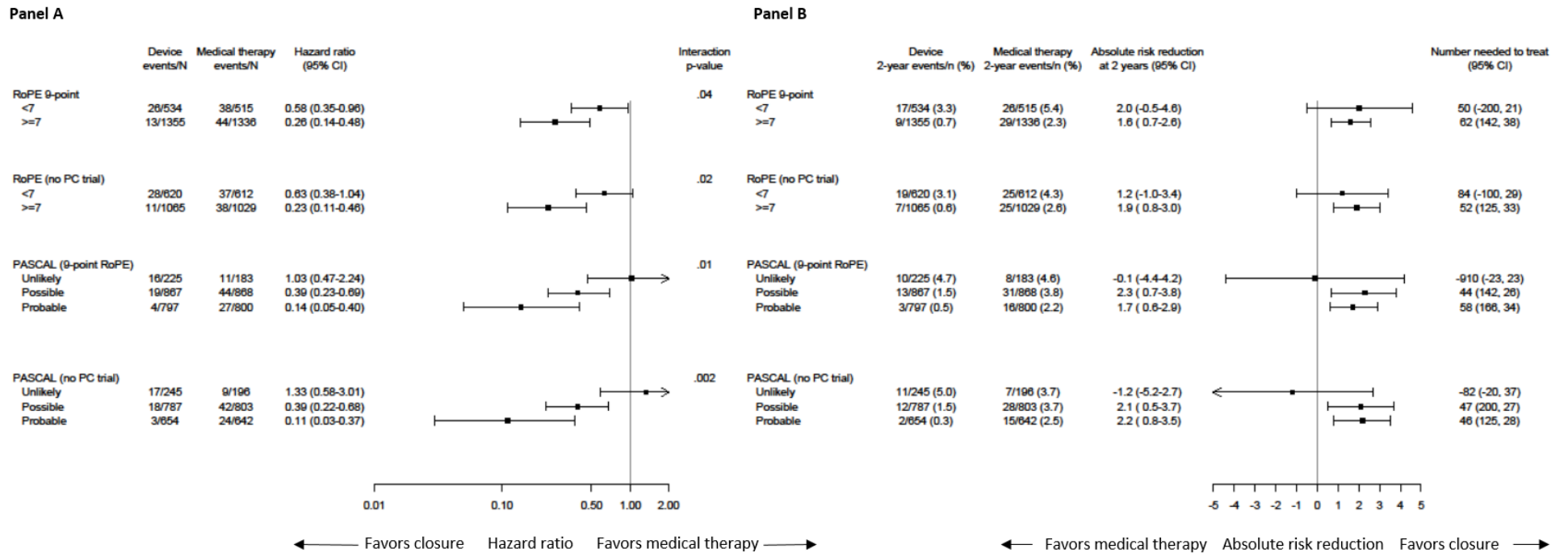


Appendix B8. RoPE and PASCAL Analyses

Appendix Figure 3. Recurrent Ischemic Stroke Heterogeneous Treatment Effects (HTE) Stability Analyses for RoPE and PASCAL.



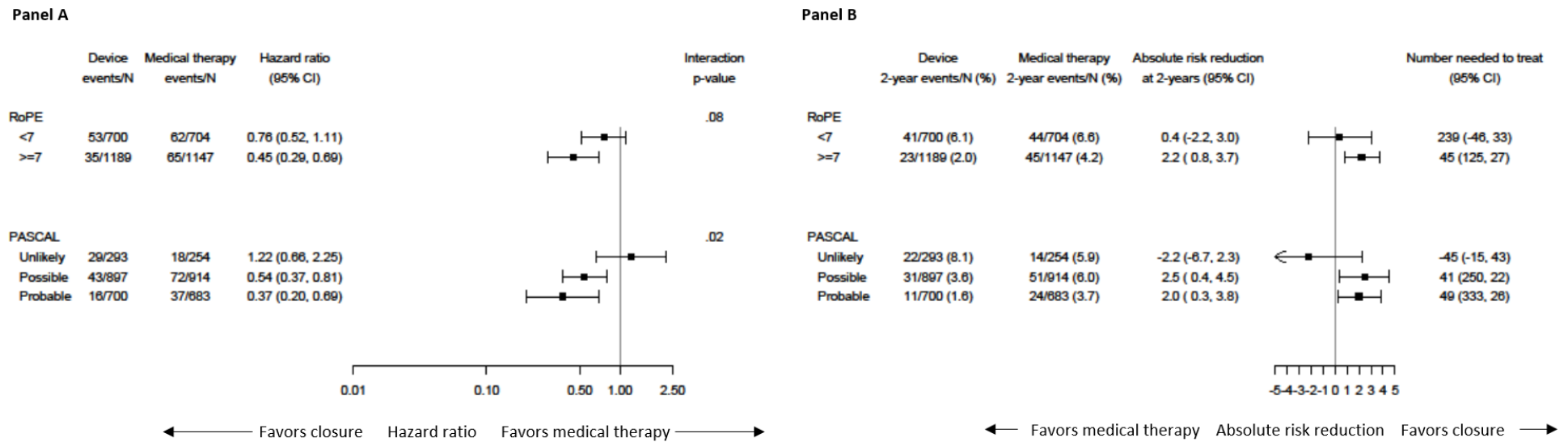
Legend:

Primary outcome of recurrent ischemic stroke. **Panel A: Hazard ratios. Panel B: Absolute risk reduction.** HR accounting for: age, sex, prior myocardial infarction, diabetes, hypertension, hyperlipidemia, prior stroke or TIA, smoking status, index event (stroke versus TIA), atrial septal aneurysm on trans-esophageal echocardiography (definition in Appendix A5), PFO shunt size (large versus small, definition in Appendix A5) and superficial infarction on neuroimaging (present versus absent). 2-year ARR calculated as differences in Kaplan Meier event rates at two years. Median time to the primary outcome of recurrent ischemic stroke was 13.7 months (n=121; interquartile range 4.8 to 29.7).

ARR, absolute risk reduction; CI, confidence interval; HR, hazard ratio; HTE, heterogeneous treatment effect; NNT, number-needed-to-treat; PASCAL, PFO-Associated Stroke Causal Likelihood; RoPE indicates Risk of Paradoxical Embolism.

Appendix B: Supplementary Results

Appendix Figure 4. Secondary Outcome RoPE and PASCAL Heterogeneous Treatment Effects (HTE) Analyses.



Legend:

Secondary outcome of recurrent ischemic stroke, TIA, or vascular death. **Panel A: Hazard ratios. Panel B: Absolute risk reduction.** HR accounting for: age, sex, prior myocardial infarction, diabetes, hypertension, hyperlipidemia, prior stroke or TIA, smoking status, index event (stroke versus TIA), atrial septal aneurysm on trans-esophageal echocardiography (definition in Appendix A5), PFO shunt size (large versus small, definition in Appendix A5) and superficial infarction on neuroimaging (present versus absent). 2-year ARR calculated as differences in Kaplan Meier event rates at two years.

ARR, absolute risk reduction; CI, confidence interval; HR, hazard ratio; HTE, heterogeneous treatment effect; NNT, number-needed-to-treat; PASCAL, PFO-Associated Stroke Causal Likelihood; RoPE indicates Risk of Paradoxical Embolism.