

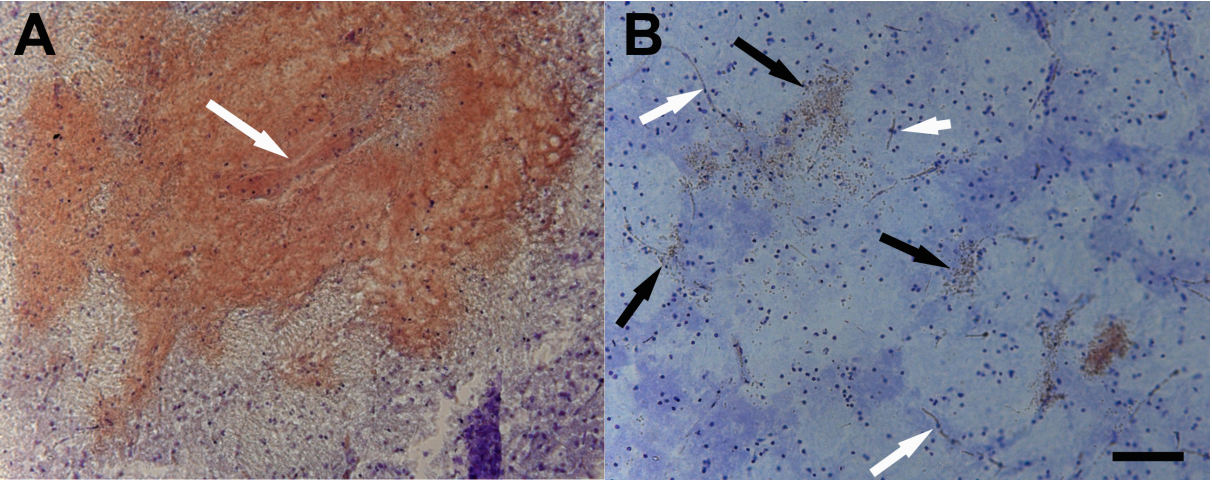
Supplemental Material

Supplemental Table 1: Imaging protocol. Images according to this protocol were taken during occlusion, 4h, and 24h post reperfusion. ONLINE ONLY

	TR/TE	Averages	Field of View	Flip Angle	Additional Information
T1	500/10 ms	2	38.4 mm ²	90°-180° (spin echo)	Localizer
T2	2500/80 ms	2	38.4 mm ²	90°-180° (spin echo)	
DWI	2500/80 ms	2	38.4 mm ²	90°-180° (spin echo)	b factor=1030s/mm ² applied along z-axis
T2* GRE	320/20 ms	4	38.4 mm ²	30°	
snapshot FLASH inversion recovery	3/3.5 ms	1	38.4 mm ²	10°	TI incremented from 100 to 2850 ms; Quantification of T1-values
Permeability T1 DCE (dynamic contrast enhancement)	50/3.5 ms	1	38.4 mm ²	90°	16 sets of images, 1 pre- and 15 post contrast sets; images repeated every 1.56 min; short bolus of 0.3mmol/kg Gd-DTPA (Magnevist; Bayer)
Perfusion T2* DSC (dynamic susceptibility enhancement)	1000/17 ms	1	50 mm ²	(echo planar)	second short bolus of 0.3mmol/kg; 32 echo planar images acquired at 1s interval; 1 slice

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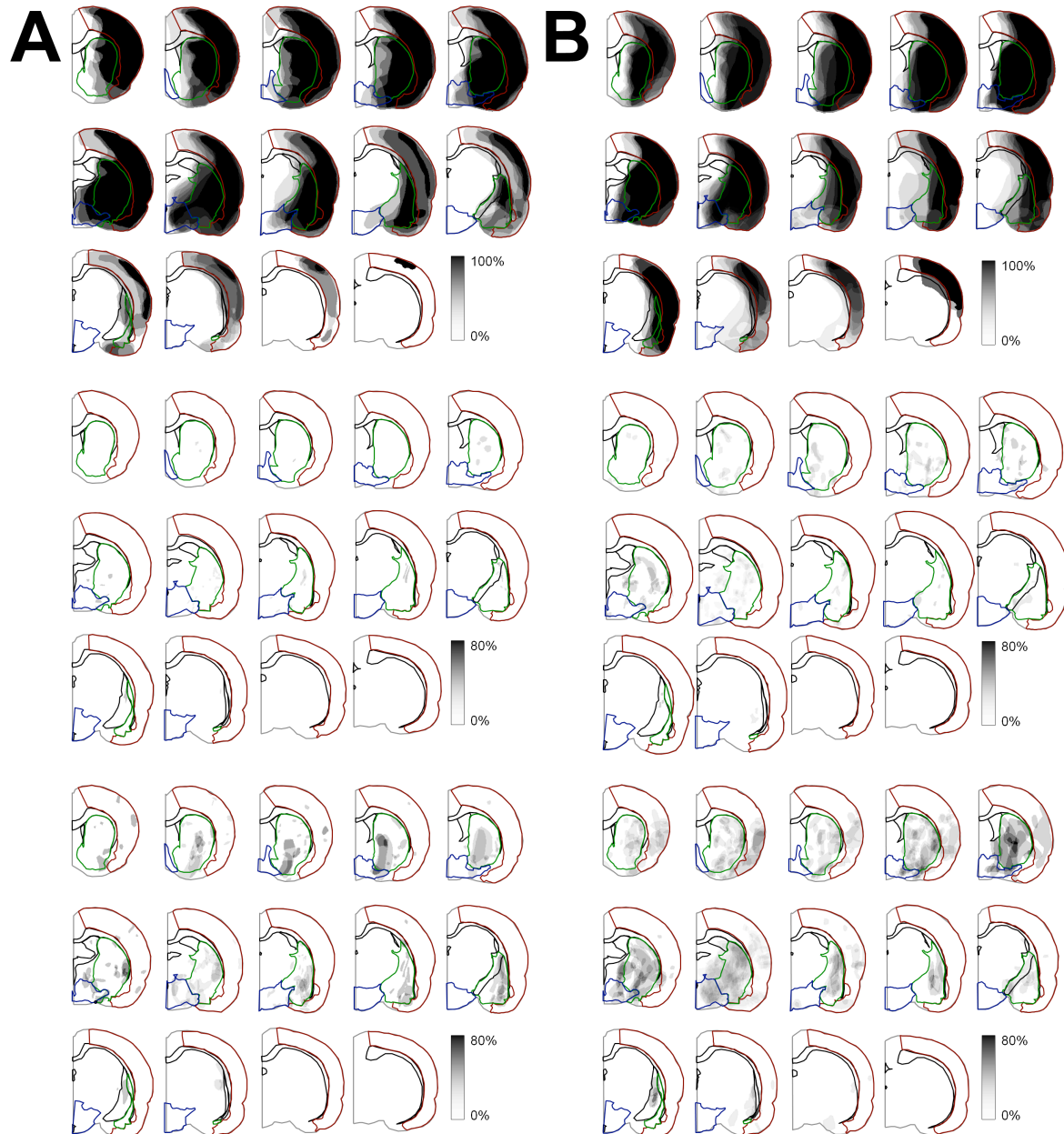
Supplement Figure 1. Appearance of different types of hemorrhage on Cresyl-violet-stained sections. Macroscopic hemorrhage, which was defined as bleeding visible to the naked eye, is shown magnified in A. A bleeding vessel is indicated by the white arrow. In B, microscopic hemorrhage is illustrated. Extravasated erythrocytes (black arrows) can be seen as well as plugged vessels (small white arrows). Scale bar = 100µm ONLINE ONLY



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Supplemental Figure 2. Distribution pattern of final infarction and hemorrhage patterns at 24h in Wistar (A, left) and SHR (B, right) rats. The shading represents the fraction of animals that showed infarction (top row), macroscopic hemorrhage (center row), or microscopic hemorrhage (bottom row) in the corresponding location on Cresyl-violet sections (absent in all animals for white regions, present in all animals for black regions).

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Supplemental Figure 3. Occlusion and reperfusion of the right MCA territory. DWI images show a persistent hyperintensity in the right MCA territory during occlusion and 4h after reperfusion. PWI images show low perfusion in the right MCA territory during occlusion and almost complete reperfusion at 4h after removal of the filament. ONLINE ONLY

