

Supplementary appendix 10. Rankings of efficacy and safety of different regimens.

Ranking of competing antiplatelet regimens for preventing serious vascular events

Regimens	All trials(n=36)		Trials with low risk of bias(n=29)*		Allocation concealed(n=33)		Adjudication blinded(n=31)*		Attrition bias(n=31)*		Trials with ≥24 months of follow-up(n=19)†		Trials initiated after 1980(n=28)		A2=Aspirin 75-330 mg daily(n=36)	
	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)
Cilostazol	96	1(1-4)	98	1(1-3)	96	1(1-4)	98	1(1-3)	98	1(1-4)	94	1(1-5)	96	1(1-5)	96	1(1-4)
Aspirin plus clopidogrel	80	3(2-8)	84	5(1-7)	81	3(2-8)	83	3(2-7)	82	3(1-7)	69	4(1-10)	78	4(2-8)	78	4(2-8)
AD2	77	4(1-10)	70	4(1-12)	81	3(1-9)	81	3(1-8)	81	3(1-8)	57	6(1-13)	80	3(1-11)	77	4(1-9)
AD1	74	4(2-8)	73	4(2-9)	75	4(2-8)	72	4(2-9)	76	4(2-7)	84	3(1-6)	73	5(2-9)	72	4(2-8)
Clopidogrel	67	5(3-10)	68	5(2-9)	68	5(3-9)	67	5(3-9)	69	5(2-9)	82	3(1-8)	65	6(3-10)	65	5(3-9)
Ticlopidine	50	8(3-13)	47	8(3-13)	48	8(3-13)	48	8(3-12)	46	8(3-13)	50	7(3-12)	48	8(3-13)	50	8(3-12)
Aspirin plus ticlopidine	46	10(1-15)	—	—	45	10(1-15)	—	—	—	—	—	—	46	10(1-15)	48	8(1-14)
Triflusal	46	9(2-14)	32	11(3-14)	33	11(3-15)	32	11(3-14)	32	11(3-14)	46	7(2-13)	47	8(2-14)	46	8(2-13)
A4	43	9(4-13)	42	9(4-12)	45	9(4-13)	45	8(4-12)	42	9(4-13)	32	9(5-12)	46	9(3-13)	41	9(4-12)
A2	39	10(5-13)	53	7(3-12)	41	9(5-13)	50	7(3-12)	42	9(4-13)	37	9(5-12)	39	10(5-14)	36	9(6-12)
A3	36	10(6-13)	38	9(5-12)	39	10(6-13)	37	9(6-12)	38	9(6-12)	29	10(6-12)	37	10(6-13)	—	—
A1	33	11(6-14)	34	10(10-13)	34	10(6-14)	32	10(5-13)	34	10(5-13)	36	9(4-12)	33	11(6-14)	32	10(6-13)
Aspirin plus cilostazol	28	14(1-15)	27	13(1-14)	27	14(1-15)	23	14(1-14)	27	14(1-14)	—	—	30	14(1-15)	28	13(1-14)
Dipyridamole	26	12(6-15)	26	11(5-14)	28	12(6-14)	25	11(6-14)	27	11(5-14)	31	9(4-13)	26	12(6-15)	25	11(6-14)
Placebo	8	14(12-15)	7	13(11-14)	9	14(12-15)	7	13(11-14)	7	13(11-14)	3	13(11-13)	8	14(12-15)	8	13(11-14)

A1, aspirin 30-50 mg daily; A2, aspirin 75-162 mg daily; A3, aspirin 283-330 mg daily; A4, aspirin 500-1500 mg daily; AD1, aspirin 50 mg plus dipyridamole 400 mg daily; AD2, aspirin 990-1300 mg plus dipyridamole 150-300 mg daily; *study that investigated regimen of aspirin plus ticlopidine was excluded; † studies that investigated regimens of aspirin plus ticlopidine and aspirin plus cilostazol were excluded; SUCRA, surface under the cumulative ranking curve; SUCRA would be 1 when a treatment is certain to be the best and 0 when a treatment is certain to be the worst.

Supplementary appendix 10. Rankings of efficacy and safety of different regimens.

Ranking of competing antiplatelet regimens for preventing stroke

Regimens	All trials(n=33)		Trials with low risk of bias(n=27)*		Allocation concealed(n=31)		Adjudication blinded(n=29)*		Attrition bias(n=29)*		Trials with ≥24 months of follow-up(n=19)†		Trials initiated after 1980(n=28)		A2=Aspirin 75-330 mg daily(n=33)	
	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)
Cilostazol	94	2(1-5)	97	1(1-4)	94	2(1-5)	97	1(1-4)	97	1(1-4)	92	1(1-6)	92	2(1-6)	94	2(1-5)
AD2	78	3(1-10)	70	4(1-13)	79	3(1-10)	81	3(1-9)	81	3(1-9)	62	5(1-12)	78	3(1-12)	78	3(1-9)
Aspirin plus clopidogrel	73	4(2-10)	78	3(1-9)	75	4(2-9)	77	3(1-9)	77	4(1-9)	64	5(1-11)	72	5(2-10)	72	4(2-9)
Clopidogrel	65	5(2-12)	66	5(2-11)	67	5(2-11)	66	5(2-11)	69	5(2-11)	80	3(1-9)	63	6(2-12)	64	5(2-11)
AD1	65	6(2-11)	63	(2-11)	66	6(2-11)	62	6(2-11)	69	5(2-10)	79	3(1-7)	62	6(2-12)	64	6(2-10)
Aspirin plus ticlopidine	63	4(1-15)	—	—	63	3(1-15)	—	—	—	—	—	—	64	3(1-15)	64	3(1-14)
Triflusal	59	6(1-14)	46	8(2-14)	44	9(2-15)	46	8(2-14)	44	8(2-14)	59	6(1-13)	59	6(1-14)	58	6(2-13)
Ticlopidine	44	9(3-14)	45	8(3-13)	45	9(3-13)	46	8(3-13)	45	8(3-13)	51	7(2-12)	46	9(3-14)	43	9(3-13)
A2	42	9(4-13)	54	7(2-12)	43	9(4-13)	51	7(3-12)	45	8(4-12)	35	9(5-13)	42	9(4-14)	40	9(5-12)
A3	41	9(4-14)	45	8(3-13)	43	9(4-14)	45	8(3-13)	43	8(3-13)	20	11(6-13)	41	9(4-14)	—	—
A4	35	10(5-14)	34	10(4-13)	36	10(5-14)	37	9(4-13)	33	10(5-13)	36	9(4-13)	39	10(3-14)	34	10(5-13)
A1	29	11(4-15)	31	11(3-14)	30	11(4-15)	29	11(4-14)	31	10(4-14)	34	9(4-13)	29	12(4-15)	29	11(4-14)
Aspirin plus cilostazol	28	14(1-15)	31	13(1-14)	30	14(1-15)	30	13(1-14)	30	13(1-14)	—	—	28	14(1-15)	28	13(1-14)
Dipyridamole	26	12(5-15)	28	11(3-14)	27	12(5-15)	26	11(4-14)	28	11(4-14)	33	9(4-13)	26	12(4-15)	25	11(5-14)
Placebo	8	14(11-15)	11	13(9-14)	9	14(11-15)	9	13(1-14)	9	13(10-14)	5	13(10-13)	10	14(1-15)	8	13(11-14)

A1, aspirin 30-50 mg daily; A2, aspirin 75-162 mg daily; A3, aspirin 283-330 mg daily; A4, aspirin 500-1500 mg daily; AD1, aspirin 50 mg plus dipyridamole 400 mg daily; AD2, aspirin 990-1300 mg plus dipyridamole 150-300 mg daily; * study that investigated regimen of aspirin plus ticlopidine was excluded; † studies that investigated regimens of aspirin plus ticlopidine and aspirin plus cilostazol were excluded; SUCRA, surface under the cumulative ranking curve; SUCRA would be 1 when a treatment is certain to be the best and 0 when a treatment is certain to be the worst.

Supplementary appendix 10. Rankings of efficacy and safety of different regimens.

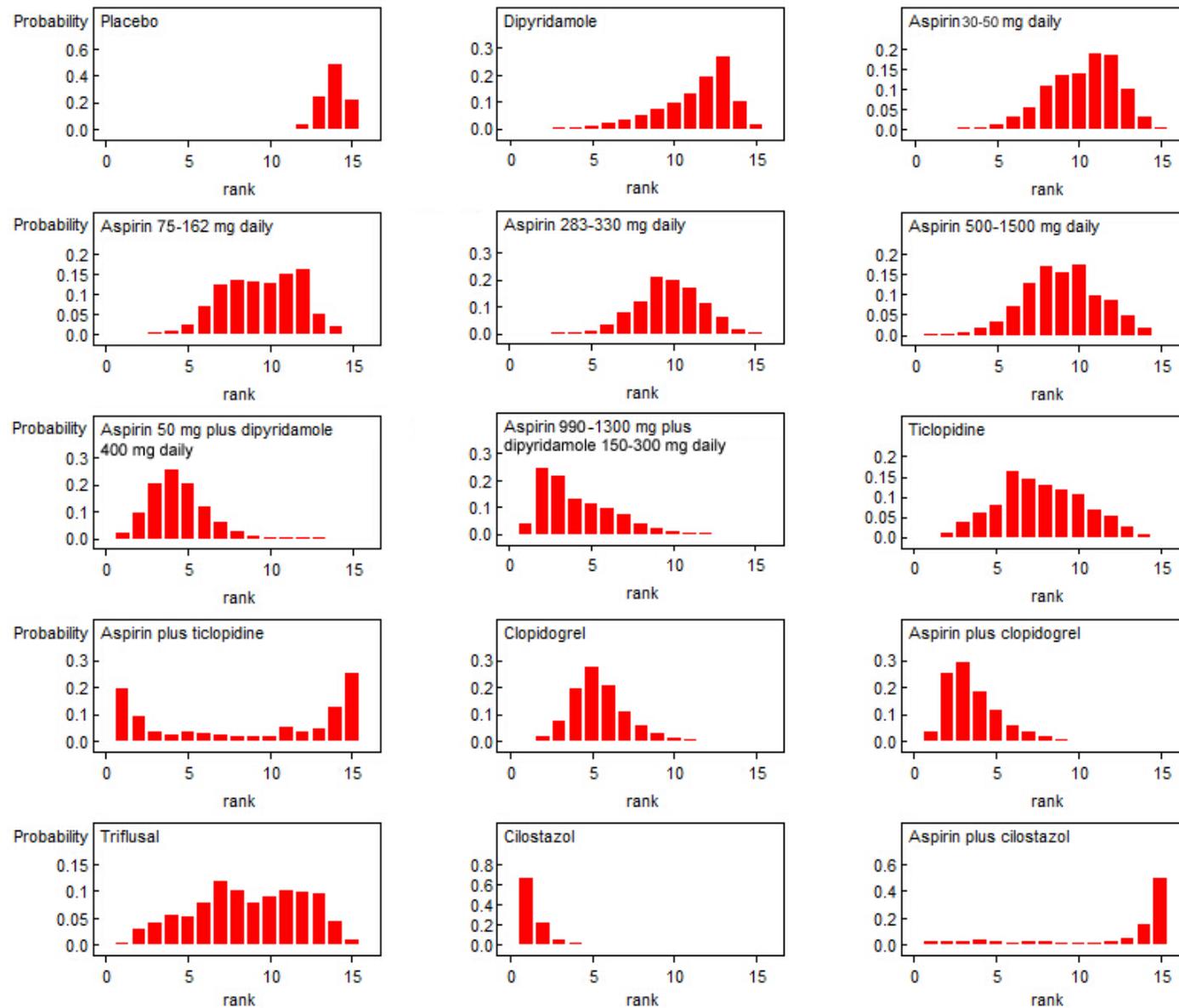
Ranking of competing antiplatelet regimens for risk of any bleeding

Regimens	All trials (n=30)		Trials with low risk of bias(n=26)*		Allocation concealed(n=29)		Adjudication blinded(n=27)*		Attrition bias(n=29)*		Trials with ≥24 months of follow-up(n=19)†		Trials initiated after 1980(n=25)‡		A2=Aspirin 75-330 mg daily(n=33)	
	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)	SUCRA (%)	Median rank (95% credible interval)
Placebo	91	2(1-4)	92	2(1-4)	92	2(1-4)	92	2(1-4)	92	2(1-4)	89	2(1-4)	91	2(1-4)	91	2(1-4)
Dipyridamole	91	2(1-5)	90	2(1-5)	91	2(1-5)	91	2(1-5)	91	2(1-5)	91	2(1-4)	90	2(1-5)	91	2(1-5)
Cilostazol	81	4(1-7)	82	3(1-6)	82	3(1-7)	83	3(1-6)	82	3(1-6)	89	2(1-6)	80	4(1-7)	80	4(1-6)
Triflusal	81	4(1-7)	78	4(1-7)	78	4(1-8)	78	4(1-7)	78	4(1-7)	73	4(1-8)	80	4(1-7)	79	4(1-7)
A1	60	6(4-11)	59	6(4-10)	61	6(4-10)	60	6(4-10)	60	6(4-10)	59	6(4-9)	58	6(4-10)	58	6(4-10)
Clopidogrel	55	7(4-12)	54	7(4-12)	56	7(4-12)	55	7(4-11)	55	7(4-11)	59	6(3-11)	53	7(4-11)	53	7(4-11)
AD1	46	8(6-12)	42	8(6-12)	47	8(5-12)	43	8(6-12)	45	8(5-12)	52	7(4-10)	44	8(5-12)	44	8(6-11)
Aspirin plus cilostazol	45	9(1-15)	45	9(1-14)	43	10(1-15)	45	9(1-14)	43	10(1-14)	—	—	42	10(1-14)	43	9(1-14)
Ticlopidine	43	9(5-13)	44	8(4-12)	43	9(5-13)	41	9(4-12)	44	8(4-12)	32	9(5-12)	41	9(5-12)	40	9(5-12)
Aspirin plus ticlopidine	42	10(1-15)	—	—	41	10(1-15)	—	—	—	—	—	—	41	9(1-14)	41	10(1-14)
AD2	33	11(5-14)	33	10(4-13)	32	11(4-14)	31	11(4-13)	33	10(4-13)	31	10(4-12)	—	—	30	11(5-13)
A3	32	11(7-14)	30	10(6-13)	32	11(7-14)	31	10(6-13)	30	10(7-13)	28	10(7-12)	30	10(7-13)	—	—
A2	29	11(8-14)	29	10(7-13)	29	11(8-14)	31	10(7-13)	26	11(8-13)	26	10(7-12)	27	11(7-13)	28	10(8-13)
A4	20	12(8-14)	21	12(7-13)	20	12(8-14)	19	12(8-13)	21	12(7-13)	20	11(7-12)	20	12(7-13)	19	12(9-13)
Aspirin plus clopidogrel	2	15(14-15)	1	14(13-14)	2	15(14-15)	1	14(13-14)	1	14(13-14)	0	13(12-13)	2	14(13-14)	2	14(13-14)

A1, aspirin 30-50 mg daily; A2, aspirin 75-162 mg daily; A3, aspirin 283-330 mg daily; A4, aspirin 500-1500 mg daily; AD1, aspirin 50 mg plus dipyridamole 400 mg daily; AD2, aspirin 990-1300 mg plus dipyridamole 150-300 mg daily; * study that investigated regimen of aspirin plus ticlopidine was excluded; † studies that investigated regimens of aspirin plus ticlopidine and aspirin plus cilostazol were excluded; ‡ studies that investigated regimens of AD2 were excluded; SUCRA, surface under the cumulative ranking curve; SUCRA would be 1 when a treatment is certain to be the best and 0 when a treatment is certain to be the worst.

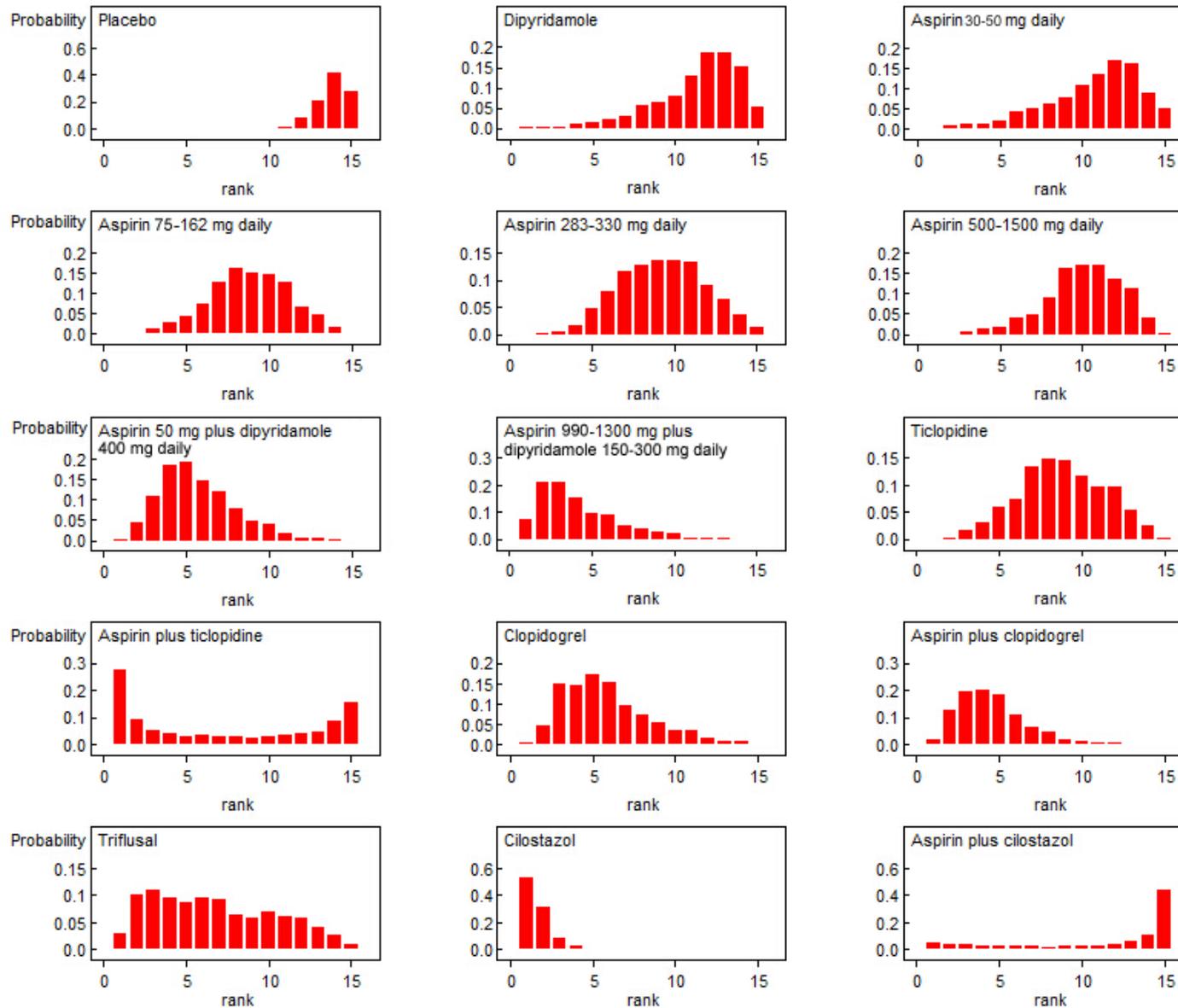
Supplementary appendix 10. Rankings of efficacy and safety of different regimens.

Rankograms of the 15 antiplatelet regimens for preventing serious vascular events (main analysis). On the horizontal axis are the 15 possible ranks and on the vertical axis the probability of a regimen to achieve each rank.



Supplementary appendix 10. Rankings of efficacy and safety of different regimens.

Rankograms of the 15 antiplatelet regimens for preventing recurrent stroke (main analysis). On the horizontal axis are the 15 possible ranks and on the vertical axis the probability of a regimen to achieve each rank.



Supplementary appendix 10. Rankings of efficacy and safety of different regimens.

Rankograms of the 15 antiplatelet regimens for risk of any bleeding (main analysis). On the horizontal axis are the 15 possible ranks and on the vertical axis the probability of a regimen to achieve each rank.

