

**Supplementary appendix 13. Discontinuation owing to adverse events.**

<b>Data of discontinuation owing to adverse events</b>												
Study	Interventions				Total included patients				Dropout due to adverse events			
	t1	t2	t3	t4	n1	n2	n3	n4	r1	r2	r3	r4
1977 AITIA	P	A4	—	—	157	162	—	—	5	9	—	—
1983 AICLA	AD2	P	13	—	202	204	198	—	18	6	17	—
1983 Danish coop	P	A4	—	—	102	101	—	—	12	7	—	—
1985 ACCSG	AD2	A4	—	—	448	442	—	—	87	75	—	—
1987 Swedish Coop	P	A4	—	—	252	253	—	—	20	33	—	—
1989 CATS	P	TC	—	—	541	531	—	—	15	62	—	—
1989 TASS	TC	A4	—	—	1529	1540	—	—	317	222	—	—
1990 ESPS	AD2	P	—	—	1250	1250	—	—	164	84	—	—
1991 Dutch TIA	A1	A3	—	—	1555	1576	—	—	75	93	—	—
1991 SALT	A2	P	—	—	676	684	—	—	17	10	—	—
1991 UK-TIA	P	A3	13	—	814	806	815	—	97	106	160	—
1996 ESPS2	AD1	D	8	11	1650	1654	1649	1649	262	249	127	141
2000 CSPP	CL	P	—	—	533	534	—	—	70	33	—	—
2003 AAASPS	TC	A4	—	—	902	907	—	—	81	71	—	—
2004 TAPIRSS	TF	A3	—	—	213	216	—	—	5	10	—	—
2006 ESPRIT	A2	AD1	—	—	1376	1363	—	—	35	255	—	—
2007 FASTER	A2	A+C	—	—	194	198	—	—	20	17	—	—
2008 Fukuuchi	C	TC	—	—	573	578	—	—	97	154	—	—
2008 CASISP	A2	CL	—	—	359	360	—	—	15	25	—	—
2008 PRoFESS	AD1	C	—	—	10181	10151	—	—	1650	1069	—	—
2009 Uchiyama Phase IIIa	C	TC	—	—	366	345	—	—	37	31	—	—
2010 CSPP2	A2	CL	—	—	1335	1337	—	—	166	267	—	—
2011 CAIST	CL	A3	—	—	231	227	—	—	18	11	—	—

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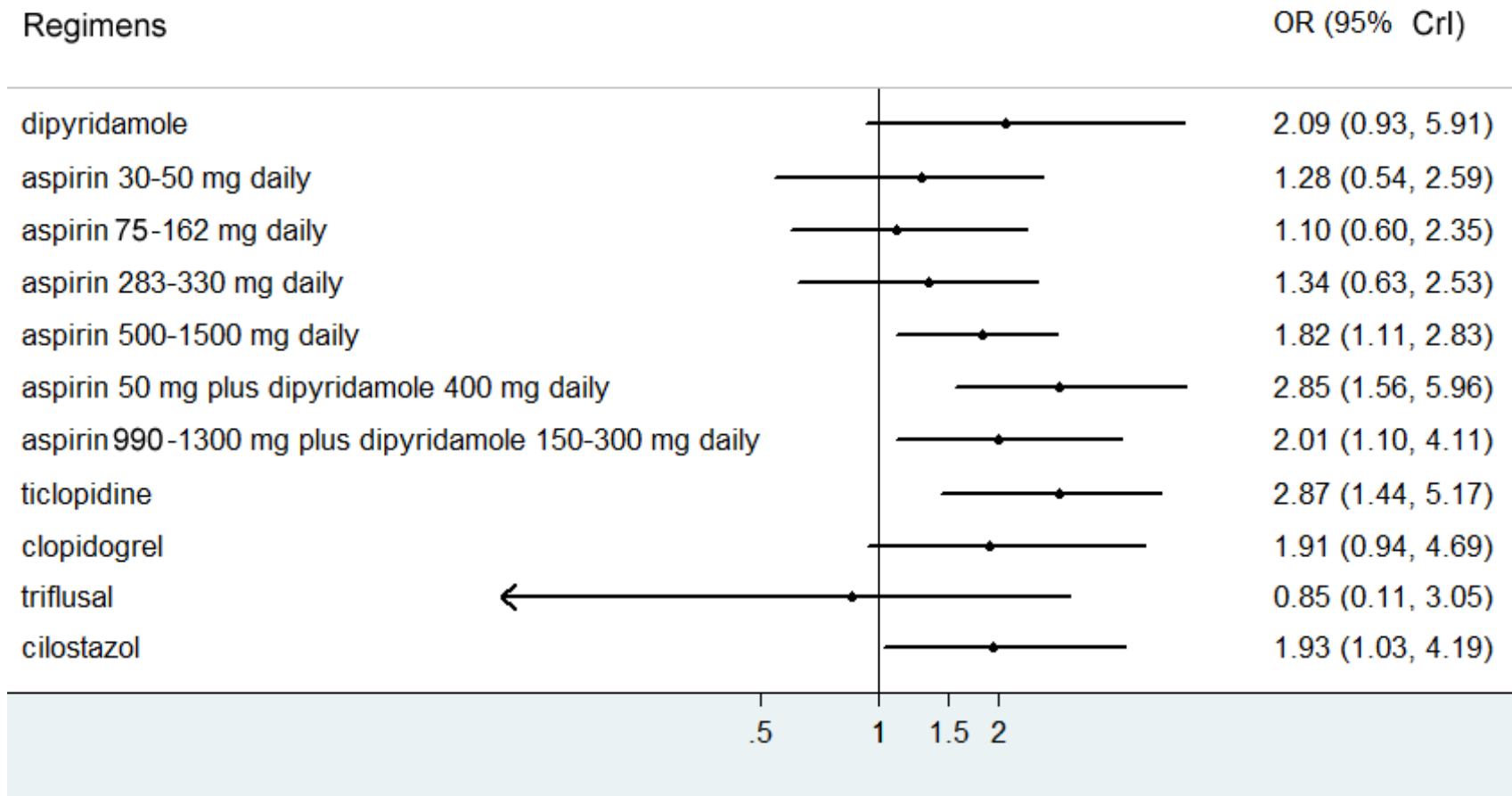
2011 JASAP	A2	AD1	—	—	639	652	—	—	142	172	—	—
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A, aspirin; D, dipyridamole; P, placebo; TF, triflusal; TC, ticlopidine; CL, cilostazol; C, clopidogrel; A1, aspirin 30-50 mg daily; A2, aspirin 75-162 mg daily; A3, aspirin 283-330 mg daily; A4, aspirin 500-1500 mg daily; AD1, aspirin 50 mg plus dipyridamole 400 mg daily; AD2, aspirin 990-1300 mg plus dipyridamole 150-300 mg daily; t1, t2, t3, and t4, comparison arms of each study; n1, n2, n3, and n4, total included patients of each comparison arm; r1, r2, r3, and r4, dropout due to adverse events of each comparison arm.

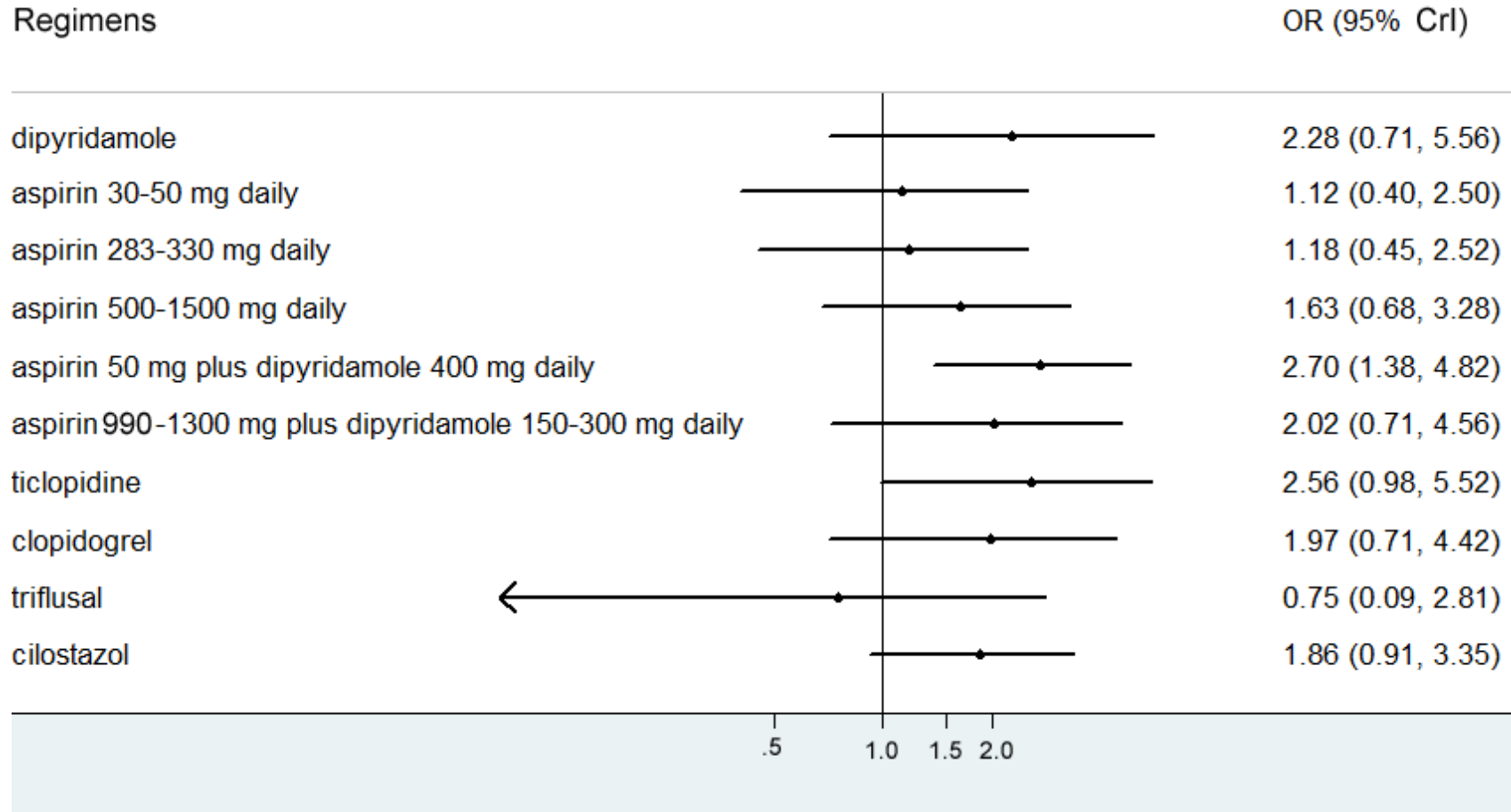
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Network meta-analysis for discontinuation due to adverse events. Regimens compared with placebo. ORs >1 favor placebo.



Supplementary appendix 13. Discontinuation owing to adverse events.

Network meta-analysis for discontinuation due to adverse events. Regimens compared with aspirin 75-162 mg daily. ORs >1 favor aspirin 75-162 mg daily.



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#### Direct comparison for discontinuation due to adverse events.

Direct comparisons	OR(95% CI)
Placebo vs Dipyridamole	2.12(1.70-2.66)
Placebo vs Aspirin 75-162 mg daily	1.74(0.79-3.83)
Placebo vs Aspirin 283-330 mg daily	1.12(0.83-1.50)
Placebo vs Aspirin 500-1500 mg daily	1.66(1.13-2.45)
Placebo vs Aspirin 50 mg plus dipyridamole 400 mg daily	2.26(1.81-2.83)
Placebo vs Aspirin 990-1300 mg plus dipyridamole 150-300 mg daily	2.17(1.66-2.83)
Placebo vs Ticlopidine	4.64(2.60-8.26)
Placebo vs Cilostazol	2.30(1.49-3.54)
Dipyridamole vs Aspirin 30-50 mg daily	0.53(0.42-0.66)
Dipyridamole vs Aspirin 50 mg plus dipyridamole 400 mg daily	1.07(0.88-1.29)
Aspirin 30-50 mg daily vs Aspirin 50 mg plus dipyridamole 400 mg daily	2.02(1.62-2.51)
Aspirin 75-162 mg daily vs Aspirin 50 mg plus dipyridamole 400 mg daily	3.31(0.47-23.17)
Aspirin 75-162 mg daily vs Aspirin plus clopidogrel	0.82(0.41-1.61)
Aspirin 75-162 mg daily vs Cilostazol	1.75(1.43-2.14)
Aspirin 283-330 mg daily vs Aspirin 500-1500 mg daily	1.61(1.23-2.11)
Aspirin 283-330 mg daily vs Triflusal	0.50(0.17-1.47)
Aspirin 283-330 mg daily vs Cilostazol	1.66(0.77-3.60)
Aspirin 500-1500 mg daily vs Aspirin 990-1300 mg plus dipyridamole 150-300 mg daily	1.18(0.84-1.66)
Aspirin 500-1500 mg daily vs Ticlopidine	1.39(1.05-1.83)
Aspirin 50 mg plus dipyridamole 400 mg daily vs Clopidogrel	0.61(0.56-0.66)
Ticlopidine vs Clopidogrel	0.78(0.39-1.54)

Comparisons between regimens should be read from right to left. Odds ratio (OR) <1 favor the right regimens.