Supplementary Online Content

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eTable 1. Inclusion and Exclusion Criteria

eTable 2. Study Procedures

eTable 3. Characteristics of Patients Included in Modified Intent-To-Treat Population (ITT) and Those Excluded From the ITT Population

eTable 4. Sensitivity Analyses

eTable 5. Endpoints in the Per-Protocol Population

eTable 6. Characteristics of New Ischemic Lesion in the Modified ITT Population

eTable 7. Characteristics of New Intracranial Hemorrhage in the Modified ITT Population

eTable 8. Subgroup Analysis for Primary Endpoint in the Modified ITT Population

eTable 9. Subgroup Analysis for Recurrent Ischemic Lesion at Week 4 in the Modified ITT Population

eTable 10. Subgroup Analysis for Intracranial Hemorrhage at Week 4 in the Modified ITT Population

eFigure 1. Onset to Randomization

eFigure 2. INR Values in the Warfarin Group

This supplementary material has been provided by the authors to give readers additional information about their work.

eTable 1. Inclusion and Exclusion Criteria

Inclusion criteria

1. Acute presumed cardioembolic stroke of mild to moderate severity or TIA that fulfills the following criteria

1) Ischemic stroke or TIA with acute ischemic lesion confirmed by DWI

2) Randomization within 5 days after symptom onset

3) Mild to moderate stroke severity defined by acute ischemic lesion on DWI less than 1/3 of MCA territory, 1/2 of ACA territory, 1/2 of PCA territory, and 1/2 of one cerebellar hemisphere

2. Persistent or paroxysmal AF documented by one of followings

1) AF documented by 12-lead ECG or Holter within 30 days before randomization

2) Prior history of AF confirmed by the review of medical record

3. Age ≥19 years

4. Written informed consent

Exclusion criteria

1. Significant hemorrhagic transformation (parenchymal hematoma type I or type II by the ECASS definition)

2. Mechanical heart valve requiring warfarin therapy

3. Stroke or TIA caused by presumed small vessel occlusion defined as <2.0 cm in largest dimension on DWI and in the distribution of the small, penetrating cerebral arteries

4. Renal impairment (CrCl <30 ml/min) or severe hepatic impairment

5. Active internal bleeding

6. History of symptomatic intracranial bleeding

7. History of major surgery or trauma within 30 days

8. History of clinically significant gastrointestinal bleeding within 6 months

9. Patients treated with intravenous tissue plasminogen activator or intra-arterial fibrinolysis within 48 hours and having significant hemorrhagic transformation or large acute ischemic lesion on DWI (>1/3 of MCA territory, 1/2 of ACA territory, 1/2 of PCA territory, or 1/2 of one cerebellar hemisphere)

10. Severe aemia: Hb level <10 g/dL

11. Bleeding diathesis: platelet count <90,000/μl or PTINR >1.7

12. Uncontrolled hypertension: systolic blood pressure >180 mmHg or diastolic blood pressure >100 mmHg

13. Malignancy or other serious medical conditions with a life expectancy <6 months

14. Planned major surgery or invasive intervention

15. Treatment with a strong inhibitor of cytochrome P450 3A4, such as azole class of antifungal agents (ketoconazole, itraconazole, voriconazole, posaconazole) or protease inhibitors (ritonavir), within 4 days before randomization, or planned treatment during the study period

16. Treatment with a strong inducer of cytochrome P450 3A4 or P-gp, such as rifampicin /rifampin, phenytoin, phenobarbital, carbamazepine, Saint. John's Wort, within 4 days before randomization, or planned treatment during the study period

17. Anticipated long-term treatment with a non-steroidal anti-inflammatory drug

18. Alcohol or drug addiction

19. Contraindication to MRI

20. Pregnancy or breast-feeding

21. Allergy or contraindication to rivaroxaban, warfarin, heparin, or aspirin

22. Inability or unwillingness to comply with study-related procedures

23. Employees of the investigator or study center, with direct involvement in the current study

24. Women unwilling to continue contraception during the study period

25. Participation in other clinical trials within 3 months

eTable 2. Study Procedures

Criteria	Screening (from Day -5)	Baseline (Day 1)	Day 5 ± 2	Week2 (Day 14 ± 5)	Week 4 (Day 30 ± 5)	Week5 (Week4 visit+7±1)	Post study visit[1]	Unscheduled visit[2]
Informed consent	●							
Demography	●							
Inclusion/Exclusion	●	●						
Past Medical History	●							
Vital sign	●				●			●
Laboratory test[3]	●		●	●[4]	●	●[5]		●
Pregnancy test[6]	●							
ECG	●							
Brain imaging[7]	●				●			●
mRS	●				●			●
NIHSS	●				●			●
HAS-BLED, CHADS2-VASC		●						
Randomization[8]		●						
Drug administration[9]		→	→	→	→	→		
Drug compliance		●	●	●[4]	●			
Adverse event monitoring		→	→	→	→	→	→	●
Concomitant drug	●	→	→	→	→	●		●

1. Allow tele-monitoring (Day 44 ± 5)
2. Appropriate action performed at the discrete of physician
3. At screening, week 4: CBC, AST, ALT, BUN, Cr, PT, APTT, Na, K, Total cholesterol, hs-CRP, At screening: available laboratory test results performed at emergency room in advance to obtaining informed consent could be utilized, Day 5; PT, BUN, Cr (all subject in warfarin arm and subject with screening CrCl < 45ml/min in Rivaroxaban arm), Week 2; warfarin arm only: PT, BUN, Cr, Week 5; Rivaroxaban arm only: PT, BUN, Cr
4. Refers to Warfarin arm only
5. Refers to Rivaroxaban arm only (Week 5 visit will be performed on 7±1 days post Week 4 visit)
6. For women of childbearing age, HCG urine test
7. Screening; Patients who have baseline DWI, FLAIR, and GRE or SWI are eligible for this trial. At 4 weeks, follow-up MRI scan (including FLAIR and GRE or SWI) is required for all included patients. , and the primary outcome will be assessed using the follow-up MRI scan. For patients who have clinical stroke or intracranial bleeding before the end of trial, MRI will be evaluated at the time of the clinical events. CT scan for outcome assessment will be allowed only for patients who are not able to perform MRI, but have a clinical stroke or symptomatic intracranial bleeding (when the patient's stroke or intracranial bleeding is too serious to perform MRI scan).
8. After completion of all study procedures scheduled at screening visit, randomization is possible on the screening day (Date of

first drug administration will be regarded as Day 1)

9. For Rivaroxaban arm; first 5 days of warfarin transition, Rivaroxaban will be coadministered with warfarin

eTable 3. Characteristics of Patients Included in Modified Intent-To-Treat Population (ITT) and Those Excluded From the ITT Population

	Modified ITT population (N=183)	Patients who were randomized, but did not receive treatment (N=7)	Patients who were randomized and received treatment, but did not undergo follow-up MRI (N=5)
Age (years), mean (SD)	70.4 (10.4)	64.6 (7.7)	69.2 (6.1)
Female, n (%)	76 (41.5)	3 (42.9)	4 (80.0%)
Onset to randomization (day), median (IQR)	2.0 (2.0–3.0)	1.0 (1.0-2.0)	4.0 (3.0-5.0)
NIHSS at randomization, median (IQR)	2.0 (0.0–4.0)	3.0 (0.0-3.0)	2.0 (1.0-3.0)
Initial DWI volume (cm^3), median (IQR)*	3.5 (0.5-12.3)	0.0 (0.0-0.1)	0.0 (0.0-33.9)
Prestroke CHA_2DS_2-VASc score			
0	21 (11.5)	1 (16.7)	0 (0.0)
1	31 (16.9)	1 (16.7)	1 (20.0)
2	40 (21.9)	2 (33.3)	0 (0.0)
3	37 (20.2)	1 (16.7)	3 (60.0)
4	36 (19.7)	1 (16.7)	0 (0.0)
5	14 (7.7)	0 (0.0)	1 (20.0)
6	3 (1.6)	-	-
7	1 (0.5)	-	-
Mean (SD)	2.5 (1.6)	2.0 (1.4)	3.0 (1.4)
Prestroke HAS-BLED score			
0	28 (15.3)	2 (33.3)	1 (20.0)
1	90 (49.2)	3 (50.0)	3 (60.0)
2	50 (27.3)	1 (16.7)	1 (20.0)
3	13 (7.1)	-	-
4	2 (1.1)	-	-
Mean (SD)	1.3 (0.9)	0.8 (0.8)	1.0 (0.7)
Paroxysmal atrial fibrillation, n (%)	49 (26.8)	2 (28.6)	2 (40.0)
Prior VKA use†	75 (41.0)	3 (42.9)	4 (80.0)
Risk factor, n (%)			

Hypertension	117 (63.9)	4 (57.1)	3 (60.0)
Diabetes mellitus*	34 (18.6)	3 (42.9)	2 (40.0)
Hyperlipidemia	34 (18.6)	2 (28.6)	0 (0.0)
Coronary artery disease	25 (13.7)	0 (0.0)	1 (20.0)
Baseline neuroimaging, n (%)			
CT	130 (71.0)	4 (57.1)	4 (80.0)
MRI	183 (100.0)	7 (100.0)	5 (100.0)
DWI	182 (99.5)	7 (100.0)	5 (100.0)
FLAIR	182 (99.5)	7 (100.0)	5 (100.0)
GRE	166 (90.7)	7 (100.0)	4 (80.0)
SWI	18 (9.8)	0 (0.0)	1 (20.0)
Others	38 (20.8)	1 (14.3)	1 (20.0)
Blood pressure at entry (mm Hg), mean (SD)			
Systolic	130.0 (18.2)	122.6 (19.2)	129.6 (19.9)
Diastolic	77.1 (11.3)	77.7 (11.0)	77.4 (12.4)
Heart rate, mean (SD)	83.9 (22.9)	71.1 (13.9)	78.4 (7.0)
Serum creatinine (mg/dL), mean (SD)	0.89 (0.24)	0.92 (0.34)	0.76 (0.12)
Concomitant antiplatelet use	57 (31.1)	1 (14.3)	1 (20.0)
Single antiplatelet	48 (26.2)	0 (0.0)	0 (0.0)
Aspirin	36 (19.7)	0 (0.0)	0 (0.0)
Clopidogrel	9 (4.9)	0 (0.0)	0 (0.0)
Others	3 (1.6)	0 (0.0)	0 (0.0)
Dual antiplatelet	9 (4.9)	1 (14.3)	1 (20.0)

eTable 4. Sensitivity Analyses

1) Sensitivity analyses for the primary endpoint including all patients who received the study drug

	Rivaroxaban (N=98)	Warfarin (N=90)	*P*-value†	Risk Difference (95% CI)	Relative Risk (95% CI)
Scenario 1	50 (51.0)	50 (55.6)	0.53	-4.54 (-18.78 - 9.80)	0.92 (0.70 - 1.20)
Scenario 2	47 (48.0)	48 (53.3)	0.46	-5.37 (-19.60 - 9.01)	0.90 (0.68 - 1.19)

†P-value by Chi-square test

Scenario 1: All subjects who did not undergo follow-up MRI were assumed to have a primary outcome event

Scenario 2: All subjects who did not undergo follow-up MRI were assumed not to have a primary outcome event

2) Sensitivity analyses of the ITT population

Of the patients who were included in the ITT population and were evaluated for the primary endpoint (recurrent ischemic lesion or new intracranial hemorrhage), in the warfarin group, recurrent ischemic lesion on 4-week MRI was not evaluated in one patient (indicated as patient 1 in table below), and new intracranial hemorrhage on 4-week MRI was not evaluated in another patient (indicated as patient 2 in table below).

	Initial MRI obtained	4-week MRI obtained	Finding	Decision
Patient 1	DWI	FLAIR, GRE	No intracranial bleeding on 4-week GRE	Primary endpoint: no Recurrent ischemic lesion: not evaluable

				New intracranial bleeding: no
Patient 2	DWI, FLAIR	FLAIR, GRE	New ischemic lesion on follow-up FLAIR	Primary endpoint: yes Recurrent ischemic lesion: yes New intracranial bleeding: not evaluable

Therefore, in the warfarin group in Table 2, the percentage of recurrent stroke lesion was 35.6% (= [31/87] x 100), and the percentage of intracranial hemorrhage on 4-week MRI was 28.7% (= [25/87] x 100).

2-1) Sensitivity analyses for the primary endpoint

Intracranial hemorrhage or recurrent ischemic lesion on 4- week MRI (primary endpoint)	Rivaroxaban group (N=95)	Warfarin group (N=88)	P-value†	Risk Difference (95% CI)	Relative Risk (95% CI)
Scenario 1	47 (49.5)	49 (55.7)	0.401	-6.21 (-20.63 - 8.36)	0.89 (0.67 - 1.17)
Scenario 2	47 (49.5)	49 (55.7)	0.401	-6.21 (-20.63 - 8.36)	0.89 (0.67 - 1.17)
Scenario 3	47 (49.5)	48 (54.5)	0.493	-5.07 (-19.52 - 9.49)	0.91 (0.69 - 1.20)
Scenario 4	47 (49.5)	48 (54.5)	0.493	-5.07 (-19.52 - 9.49)	0.91 (0.69 - 1.20)

†P-value by Chi-square test

Scenario 1: Assuming that the patient who were not evaluable for recurrent ischemic lesion had recurrent ischemic lesion and the other patient who were not evaluable for new intracranial hemorrhage had new intracranial hemorrhage.

Scenario 2: Assuming that the patient who were not evaluable for recurrent ischemic lesion had recurrent ischemic lesion and the other patient who were not evaluable for new

intracranial hemorrhage did not have new intracranial hemorrhage.

Scenario 3: Assuming that the patient who were not evaluable for recurrent ischemic lesion did not have recurrent ischemic lesion and the other patient who were not evaluable for new intracranial hemorrhage had new intracranial hemorrhage.

Scenario 4: Assuming that the patient who were not evaluable for recurrent ischemic lesion did not have recurrent ischemic lesion and the other patient who were not evaluable for new intracranial hemorrhage did not have new intracranial hemorrhage.

2-2) Sensitivity analyses for the secondary endpoint of recurrent ischemic lesion on 4-week MRI in ITT population

Recurrent ischemic lesion on 4- week MRI	Rivaroxaban group (N=95)	Warfarin group (N=88)	P-value†	Risk Difference (95% CI)	Relative Risk (95% CI)
Scenario 1	28 (29.5)	32 (36.4)	0.321	-6.89 (-21.18 - 7.70)	0.81 (0.53 - 1.23)
Scenario 2	28 (29.5)	31 (35.2)	0.405	-5.75 (-20.06 - 8.83)	0.84 (0.55 - 1.27)

†P-value by Chi-square test

Scenario 1: Assuming that the patient who were not evaluable for recurrent ischemic lesion had recurrent ischemic lesion.

Scenario 2: Assuming that the patient who were not evaluable for recurrent ischemic lesion did not have recurrent ischemic lesion.

2-3) Sensitivity analyses for the secondary endpoint of new intracranial hemorrhage on 4-week MRI in ITT population

Intracranial hemorrhage on 4- week MRI	Rivaroxaban group (N=95)	Warfarin group (N=88)	P-value†	Risk Difference (95% CI)	Relative Risk (95% CI)
Scenario 1	30 (31.6)	26 (29.5)	0.766	2.03 (-12.44 - 16.50)	1.07 (0.69 - 1.66)
Scenario 2	30 (31.6)	25 (28.4)	0.640	3.17 (-11.34 - 17.61)	1.11 (0.71 - 1.73)

†P-value by Chi-square test

Scenario 1: Assuming that the patient who were not evaluable for new intracranial hemorrhage had new intracranial hemorrhage.

Scenario 2: Assuming that the patient who were not evaluable for new intracranial hemorrhage did not have new intracranial hemorrhage.

eTable 5. Endpoints in the Per-Protocol Population

	Rivaroxaban group (N=93)	Warfarin group (N=87)	Risk difference (95% CI)	Relative risk (95% CI)	P value	Adjusted relative risk (95% CI)	P value
Intracranial hemorrhage or recurrent ischemic lesion on 4-week MRI (primary endpoint)	46 (49.5)	47 (54.0)	-4.56 (-19.17–10.15)	0.92 (0.69–1.21)	0.5406	0.96 (0.72–1.28)	0.7929
Recurrent ischemic lesion on 4-week MRI	27 (29.0)	30 (34.9)	-5.85 (-20.33–8.87)	0.83 (0.54–1.28)	0.4011	0.86 (0.55–1.32)	0.4849
Intracranial hemorrhage on 4-week MRI	30 (32.3)	24 (27.9)	4.35 (-10.30–18.90)	1.16 (0.74–1.81)	0.5263	1.22 (0.77–1.95)	0.3961
Clinical recurrent ischemic stroke	0 (0)	1 (1.1)	-1.15 (-15.77–13.49)	-	0.4833	-	-
Symptomatic hemorrhagic conversion or hemorrhagic stroke	0 (0)	0 (0)	-	-	>0.999	-	-
Major bleeding	1 (1.1)	0 (0)	1.08 (-13.58–15.68)	-	>0.999	-	-
Systemic embolism	0 (0)	0 (0)	-	-	>0.999	-	-
Acute coronary syndrome	0 (0)	0 (0)	-	-	>0.999	-	-
Composite of stroke, MI, or vascular death	0 (0)	1 (1.1)	-1.15 (-15.77–13.49)	-	0.4833	-	-
Composite of stroke, MI,	1 (1.1)	1 (1.1)	-0.07 (-14.72–	0.94 (0.06–	>0.999	-	-

vascular death, or major bleeding			14.54)	14.73)			
Composite of clinical ischemic events	0 (0)	1 (1.1)	-1.15 (-15.8–13.49)	-	0.4833	-	-
Duration of hospitalization (days), median (IQR)	4.0 (2.0–6.0)	6.0 (4.0–8.0)	-	-	<0.0001	-	0.0051
mRS 0-1 at 4 weeks	78 (83.9)	64 (74.4)	8.58 (-6.16–23.00)	1.11 (0.96–1.30)	0.1547	1.04 (0.82–1.31)	0.7543

Data are n (%) unless otherwise stated. MI=myocardial infarction

Adjusted for age, sex, initial ischemic lesion volume on diffusion-weighted image, diabetes, prior vitamin K antagonist, concomitant antiplatelet use, and center

eTable 6. Characteristics of New Ischemic Lesion in the Modified ITT Population

	Rivaroxaban group (N=95)	Warfarin group (N=88)	*P*-value[†]
Size in diameter >10 mm, n (%)	12 (12.6)	14 (15.9)	0.6370
Multiplicity, n (%)	19 (20.0)	8 (9.2)	0.0405
[†] *P*-value by Pearson′s chi-square test			

eTable 7. Characteristics of New Intracranial Hemorrhage in the Modified ITT Population

	Rivaroxaban group (N=95)	Warfarin group (N=87)	*P*-value[†]
			0.1971
No HT	65 (68.4)	62 (71.3)	
HT type I	18 (18.9)	10 (11.5)	
HT type II	11 (11.6)	10 (11.5)	
PH	1 (1.1)	5 (5.7)	
[†] *P*-value by Fisher's exact test to compare the whole distribution between the two groups			

HT=hemorrhage infarction. PH=parenchymal haematoma.
HT type I: small hyperdense petechiae; HT type II: more confluent hyperdensity throughout the infarct zone without mass effect; PH: homogeneous hyperdensity with mass effect.
In the warfarin group, there was one missing value because one patient had only follow-up GRE without initial GRE/SWI.

eTable 8. Subgroup Analysis for Primary Endpoint in the Modified ITT Population

	N	Rivaroxaban	Warfarin	*P*-value[†]	Relative Risk (95% CI)	*P*-value[‡]
Age						0.9626
≤70 yr	95	29 (54.7)	26 (61.9)	0.4810	0.88 (0.63–1.24)	
>70 yr	88	18 (42.9)	22 (47.8)	0.6401	0.90 (0.56–1.42)	
Sex						0.2534
Male	107	27 (49.1)	32 (61.5)	0.1957	0.80 (0.57–1.13)	
Female	76	20 (50.0)	16 (44.4)	0.6282	1.13 (0.70–1.82)	
Prior VKA use						0.1928
No	108	25 (44.6)	30 (57.7)	0.1753	0.77 (0.53–1.12)	
Yes	75	22 (56.4)	18 (50.0)	0.5783	1.13 (0.74–1.73)	
Prestroke CHA_2DS_2-VASc						0.8027
≤1	118	33 (55.9)	35 (59.3)	0.7095	0.94 (0.69–1.29)	
≥2	65	14 (38.9)	13 (44.8)	0.6291	0.87 (0.49–1.54)	
Prestroke HAS-BLED						0.8329
≤2	92	25 (61.0)	33 (64.7)	0.7126	0.94 (0.69–1.29)	
≥3	91	22 (40.7)	15 (40.5)	0.9848	1.00 (0.61–1.67)	
Baseline DWI volume						0.3007
≤3.53 cm^3	91	26 (49.1)	17 (44.7)	0.6840	1.10 (0.70–1.72)	
>3.53 cm^3	92	21 (50.0)	31 (62.0)	0.2475	0.81 (0.56–1.17)	
Concomitant antiplatelet use						0.6851

No	126	31 (50.8)	35 (53.8)	0.7339	0.94 (0.68–1.32)	
Yes	57	16 (47.1)	13 (56.5)	0.4832	0.83 (0.50–1.38)	
Creatinine Clearance						0.6601
<50 mL/min	35	5 (31.3)	8 (42.1)	0.5079	0.74 (0.30–1.82)	
≥50 mL/min	148	42 (53.2)	40 (58.0)	0.5573	0.92 (0.69–1.22)	

† P-value by Chi-square test or Fisher's exact test as appropriate
‡ P-value for interaction effect

VKA=vitamin K antagonist

eTable 9. Subgroup Analysis for Recurrent Ischemic Lesion in the Modified ITT Population

	N	Rivaroxaban	Warfarin	*P*-value[†]	Relative Risk (95% CI)	*P*-value[‡]
Age						0.4019
≤70 yr	94	17 (32.1)	19 (46.3)	0.1582	0.69 (0.41–1.15)	
>70 yr	88	11 (26.2)	12 (26.1)	0.9912	1.00 (0.50–2.03)	
Sex						0.0587
Male	106	14 (25.5)	22 (43.1)	0.0548	0.59 (0.34–1.02)	
Female	76	14 (35.0)	9 (25.0)	0.3434	1.40 (0.69–2.84)	
Prior VKA use						0.0422
No	107	12 (21.4)	20 (39.2)	0.0447	0.55 (0.30–1.00)	
Yes	75	16 (41.0)	11 (30.6)	0.3453	1.34 (0.72–2.50)	
Prestroke CHA_2DS_2-VASc						0.3698
≤1	118	20 (33.9)	21 (35.6)	0.8467	0.95 (0.58–1.56)	
≥2	64	8 (22.2)	10 (35.7)	0.2337	0.62 (0.28–1.37)	
Prestroke HAS-BLED						0.3152
≤2	91	12 (29.3)	21 (42.0)	0.2088	0.70 (0.39–1.24)	
≥3	91	16 (29.6)	10 (27.0)	0.7872	1.10 (0.56–2.14)	
Baseline DWI volume						0.5328
≤3.53 cm^3	91	17 (32.1)	13 (34.2)	0.8308	0.94 (0.52–1.69)	
>3.53 cm^3	91	11 (26.2)	18 (36.7)	0.2819	0.71 (0.38–1.33)	

Concomitant antiplatelet use						0.7910
No	126	17 (27.9)	23 (35.4)	0.3651	0.79 (0.47–1.33)	
Yes	56	11 (32.4)	8 (36.4)	0.7569	0.89 (0.43–1.86)	
Creatinine Clearance						0.5057
<50 ml/min	35	4 (25.0)	4 (21.1)	1.0000	1.19 (0.35–4.01)	
≥50 ml/min	147	24 (30.4)	27 (39.7)	0.2362	0.77 (0.49–1.19)	

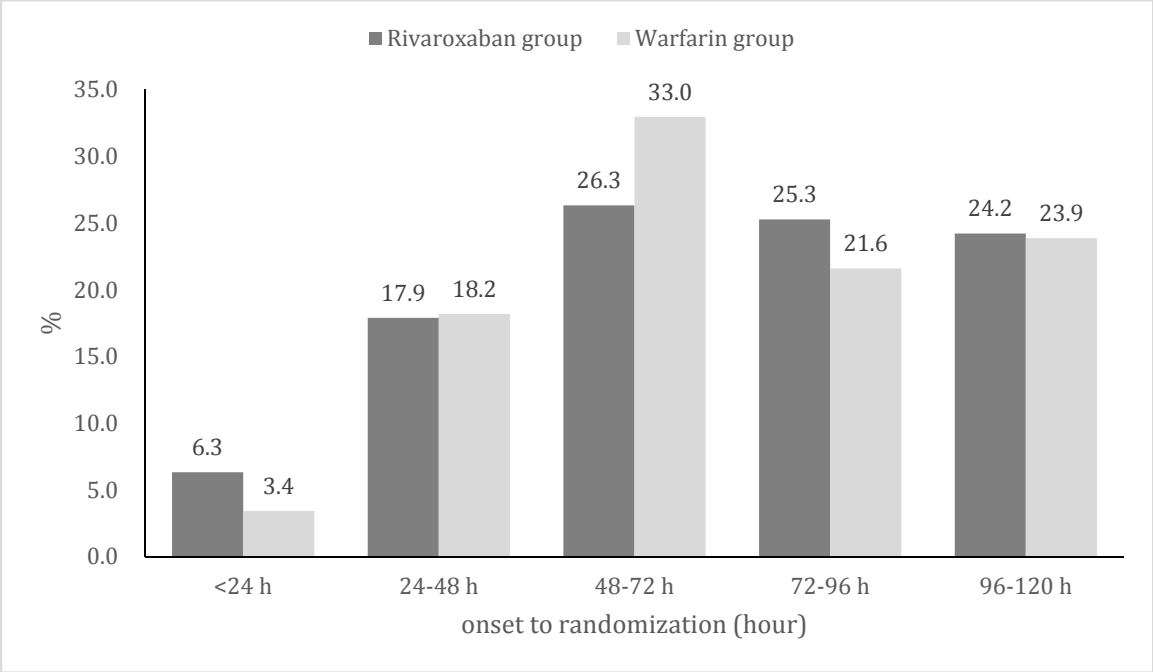
† P-value by Chi-square test or Fisher's exact test as appropriate
‡ P-value for interaction effect

eTable 10. Subgroup Analysis for Intracranial Bleeding in the Modified ITT Population

	N	Rivaroxaban	Warfarin	*P*-value[†]	Relative Risk (95% CI)	*P*-value[‡]
Age						0.0669
≤70 yr	94	22 (41.5)	11 (26.8)	0.1392	1.55 (0.85–2.81)	
>70 yr	88	8 (19.0)	14 (30.4)	0.2179	0.63 (0.29–1.34)	
Sex						0.5043
Male	106	20 (36.4)	15 (29.4)	0.4470	1.24 (0.71–2.14)	
Female	76	10 (25.0)	10 (27.8)	0.7836	0.90 (0.42–1.91)	
Prior VKA use						0.7853
No	107	19 (33.9)	15 (29.4)	0.6162	1.15 (0.66–2.02)	
Yes	75	11 (28.2)	10 (27.8)	0.9672	1.02 (0.49–2.10)	
Prestroke CHA_2DS_2-VASc						0.7578
≤1	117	22 (37.3)	20 (34.5)	0.7518	1.08 (0.67–1.76)	
≥2	65	8 (22.2)	5 (17.2)	0.6178	1.29 (0.47–3.52)	
Prestroke HAS-BLED						0.4485
≤2	91	19 (46.3)	17 (34.0)	0.2309	1.36 (0.82–2.26)	
≥3	91	11 (20.4)	8 (21.6)	0.8853	0.94 (0.42–2.12)	
Baseline DWI volume						0.1944
≤3.53 cm^3	91	15 (28.3)	6 (15.8)	0.1624	1.79 (0.77–4.19)	
>3.53 cm^3	91	15 (35.7)	19 (38.8)	0.7635	0.92 (0.54–1.58)	
Concomitant antiplatelet use						0.3092
No	125	18 (29.5)	20 (31.3)	0.8324	0.94 (0.55–1.61)	
Yes	57	12 (35.3)	5 (21.7)	0.2724	1.62 (0.66–3.99)	
Creatinine Clearance						0.1205

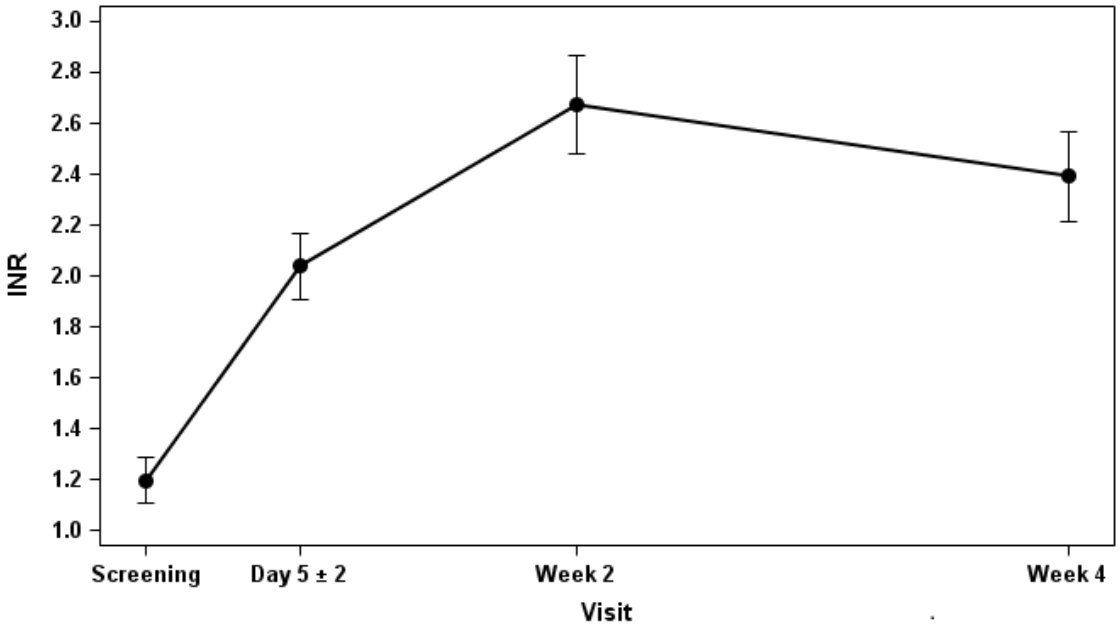
<50 ml/min	35	1 (6.3)	5 (26.3)	0.1874	0.24 (0.03–1.83)	
≥50 ml/min	147	29 (36.7)	20 (29.4)	0.3494	1.25 (0.78–1.99)	
† P-value by Chi-square test or Fisher's exact test as appropriate ‡ P-value for interaction effect						

eFigure 1. Onset to Randomization



eFigure 2. INR Values in the Warfarin Group

A. Mean INR



B. Proportion of achieving target INR of 2.0–3.0