

ONLINE SUPPLEMENT

Association of Blood Pressure with Outcomes in Acute Stroke Thrombectomy

Short title: BP and Outcomes in MT-Treated Strokes

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Supplemental Methods

Complete search algorithm used in MEDLINE search

((mechanical[All Fields] AND ("thrombectomy"[MeSH Terms] OR "thrombectomy"[All Fields])) OR (endovascular[All Fields] AND (((("ischemia"[MeSH Terms] OR "ischemia"[All Fields] OR "ischemic"[All Fields]) AND ("stroke"[MeSH Terms] OR "stroke"[All Fields])) OR (large[All Fields] AND ("blood vessels"[MeSH Terms] OR ("blood"[All Fields] AND "vessels"[All Fields]) OR "blood vessels"[All Fields] OR "vessel"[All Fields]) AND ("vessel occlusion"[MeSH Terms] OR ("vessel"[All Fields] AND "occlusion"[All Fields]) OR "vessel occlusion"[All Fields] OR "occlusion"[All Fields])) OR ("brain ischemia"[MeSH Terms] OR ("brain"[All Fields] AND "ischemia"[All Fields]) OR "brain ischemia"[All Fields] OR ("cerebrovascular"[All Fields] AND "ischemia"[All Fields]) OR "cerebrovascular ischemia"[All Fields]) OR ("stroke"[MeSH Terms] OR "stroke"[All Fields])) AND ("blood pressure") OR blood pressure [MeSH Terms] OR ("systolic") OR pressure, systolic [MeSH Terms] OR ("diastolic") OR pressure, diastolic [MeSH Terms]))

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Supplemental Tables

Table S1. Definitions of symptomatic intracranial hemorrhage utilized by included studies

Adjudicating study	Definition
NINDS	Any ICH that had not been seen on a previous CT scan but there was subsequently either a suspicion of hemorrhage or any decline in neurologic status. To detect intracranial hemorrhage, CT scans were required at 24 hours and 7 to 10 days after the onset of stroke and when clinical findings suggested hemorrhage.
ECASS 2	Any ICH with neurological deterioration (≥ 4 points increase on the NIHSS) from baseline or death within 22 to 36 hours. Establishment of a causal relationship between the hemorrhage and clinical deterioration or death was not a requirement.
ECASS 3	In addition to definition of ECASS 2, the hemorrhage must have been identified as the predominant cause of the neurologic deterioration.
SITS-MOST	Large or remote parenchymal ICH (type 2, defined as greater than 30% of the infarct area affected by hemorrhage with mass effect or extension outside the infarct) combined with neurological deterioration (≥ 4 points increase on the NIHSS) from baseline or death within 22 to 36 hours.

NINDS, National Institute of Neurological Disorders and Stroke; ICH, intracranial hemorrhage; CT, computed tomography; ECASS, European Cooperative Acute Stroke Study; NIHSS, National Institutes of Health Stroke Scale; SITS-MOST, Safe Implementation of Thrombolysis in Stroke-Monitoring Study.

Table S2. Excluded studies with reasons for exclusion

Study	Reason for exclusion
Lowhagen et al, 2015 ¹	Data available for MAP; No SBP/DBP data available
Mulder et al, 2017 ²	Dichotomous SBP available; No continuous SBP/DBP available
Mundiyanapurath et al, 2016 ³	SBP available in median (IQR); No mean or maximum SBP/DBP available
Pikija et al, 2018 ⁴	SBP available in median (IQR); No mean or maximum SBP/DBP available
Treurniet et al, 2018 ⁵	Data available for MAP; No SBP/DBP data available
Eker et al, 2018 ⁶	No mean or maximum SBP/DBP available
Alcaraz et al, 2019 ⁷	Dichotomous SBP available; No continuous SBP/DBP available
Zhang et al, 2018 ⁸	Dichotomous SBP available; No continuous SBP/DBP available
Takahashi et al, 2014 ⁹	Dichotomous SBP available; No continuous SBP/DBP available
Sivasankar et al, 2016 ¹⁰	Data available for MAP; No SBP/DBP data available
Athiraman et al, 2018 ¹¹	Dichotomous SBP available; No continuous SBP/DBP available
Whalin et al, 2017 ¹²	No continuous SBP/DBP available
Jumaa et al, 2010 ¹³	No intended outcome data (i.e. mortality/FI, sICH) reported
Mattle et al, 2005 ¹⁴	Endovascular treatment other than MT
Nogueira et al, 2009 ¹⁵	Endovascular treatment other than MT
Sweid et al, 2019 ¹⁶	Endovascular treatment other than MT
De Havenon et al, 2016 ¹⁷	Endovascular treatment other than MT
Anadani et al, 2019 ¹⁸	Providing overlapping data

Table S3. Overview on the characteristics of the included studies

(1) functional independence (mRS 0–2), (2) sICH, (3) mortality, (4) recanalization, (5) mRS shift

First author, Year	Study design, registry	N Total	BP monitoring	sICH definition	Mean/Median age	Median NIHSS	Female sex (%)	IV tPA (%)	Adjusted variables	Outcomes
Abou-Chebl, 2014 ¹⁹	Retrospective, NASA	281	Admission	-	68	18	48	45	Age, NIHSS, revascularization, and time from onset	1, 3*
Anadani, 2019 ²⁰	Retrospective	298	Admission, 24 hr after MT	ECASS	67	15	51	42	Age, sex, race, diabetes, HTN, AF, HLD, onset to groin, NIHSS, IVT, procedure time, TICI score complications, ASPECTS	1 [†] 1, 2*
Bennett, 2018 ²¹	Retrospective	182	24 hr after MT	-	63	16	51	47	Age, NIHSS, AF, HLD, sICH, TICI score, admission INR and BUN, anterior circulation stroke, and history of prior clinical stroke	5*
Cernik, 2019 ²²	Retrospective	690	24 hr after MT	SITS-MOST	71	17	49	75	Age, HTN, DM, AF, NIHSS, IVT, admission glucose, recanalization time, sICH	1 [†] 1*
Chang, 2019 ²³	Retrospective	303	24 hr after MT	-	72	15	45	39	Age, male, BMI, NIHSS, HTN, DM, smoking, TICI	1, 4 [†] 1*
Chang (recanalized), 2019 ²⁴	Retrospective	90	Admission, 24 hr after IVT	ECASS 2	72	15	40	-	Age, sex, NIHSS, occlusion site	1 [†]

BP, blood pressure; sICH, symptomatic intracranial hemorrhage; IVT, intravenous thrombolysis; MT, mechanical thrombectomy; IAT, intra-arterial treatment; SITS-MOST, Safe Implementation of Thrombolysis in Stroke-Monitoring Study; ECASS, European Cooperative Acute Stroke Study; ASPECTS,

Cho, 2019 ²⁵	Retrospective	378	Admission, 24 hr after IVT	SITS-MOST	70	12	46	58	Age, gender, baseline NIHSS, vascular risk factors, SBP	1, 2, 3, 4 [†] 1, 2, 3, 5*
Ding, 2019 ²⁶	Retrospective	148	Admission, 24 hr after MT	ECASS 2	69	14	43	-	Age, NIHSS, HTN, previous antiplatelet usage, ASPECTS, and PH	1, 2 [†] 1, 2*
Goyal (post-MT, recanalized), 2017 ²⁷	Retrospective	217	24 hr after MT	SITS-MOST	62	16	50	65	Age, sex, race, HTN, DM, HLD, AF, smoking, admission SBP/DBP levels, NIHSS, admission serum glucose, IVT, ASPECTS, onset to groin puncture time, complete reperfusion	1, 2, 3 [†] 1, 3, 5*
Goyal (pre-MT), 2017 ²⁸	Retrospective	116	Admission	SITS-MOST	63	17	49	65	Age, sex, race, vascular risk factors, admission DBP, admission NIHSS and serum blood glucose, IVT, onset to groin time, collateral score and successful revascularization	1, 2, 3, 4 [†] 1*
Goyal (post-MT, non-recanalized), 2018 ²⁹	Retrospective	88	24 hr after IVT	SITS-MOST	62	16	52	64	age, gender, race, HTN, DM, HLD, AF, CAD, CHF, current smoking, admission SBP/DBP levels, NIHSS, admission serum glucose and LDL levels, IVT, ASPECTS, onset to groin puncture time, type of anesthesia, brain edema, good collaterals	1, 2, 3 [†] 1, 3, 5*
Jagani, 2016 ³⁰	Retrospective	99	During MT	-	66	17	24	25	Preoperative SBP and DBP, age, DM, morbid obesity, location of vessel occlusion, NIHSS	1 [†]
John, 2016 ³¹	Retrospective	147	During MT	-	67	16	55	36	age, sex, anesthesia type, maximum SBP, initial NIHSS, IVT, ASPECTS, ICA terminus occlusion, successful recanalization, time to recanalization, and sICH	1 [†] 1*

John, 2017 ³²	Retrospective	62	24 hr after MT	-	69	15	60	39	-	4 [†]
Kim, 2019 ³³	Retrospective	211	24 hr after MT	SITS-MOST	67	16	43	54	Age, NIHSS, fasting glucose level, GFR, platelets, and lesion location	2 [†] 2*
Maier B, 2017 ³⁴	Retrospective, ETIS	1332	Admission	ECASS 2	68	16	48	63	Age, sex, HTN, DM, NIHSS, and prior use of thrombolysis	1, 2, 3 [†] 1, 3*
Maier B, 2018 ³⁵	Retrospective, ETIS	343	During MT	ECASS 2	67	16	48	64	Age, HTN, DM, pre-stroke mRS, NIHSS, general anesthesia, recanalization, IVT	1, 2, 3, 5*
Maier IL, 2018 ³⁶	Retrospective	168	24 hr after MT	-	74	15	43	71	Age, HTN, CKD, NIHSS, baseline mRS, ASPECTS, collateral score, IVT, ICH, hospital days, onset-to-reperfusion,	1 [†] 1*
McCarthy, 2019 ³⁷	Retrospective	212	24 hr. after MT	ECASS 2	71	17	49	53	Age, recanalization success, various comorbidities, baseline NIHSS, hemorrhagic conversion, onset to reperfusion time	1, 3 [†] 1, 2, 3*
Mistry, 2017 ³⁸	Retrospective	228	24 hr after MT	SITS-MOST	66	16	54	52	Age, HTN, DM, AF, NIHSS, vessel occlusion, IVT, onset-to-groin puncture, mTICI, anti-HTN drip use, ICH, disposition	2, 5*
Panni, 2019 ³⁹	Retrospective, ETIS	216	Admission:	-	66	20	41	58	-	1, 3 [†]

Petersen, 2019 ⁴⁰	Retrospective	390	During MT	-	71	17	56	68	-	1 [†]
Rasmussen, 2018 ⁴¹	Post-hoc RCT, GOLIATH	128	During MT	-	71	17	49	75	-	1, 5 [*]
Schönenberger et al, 2018 ⁴²	Post-hoc RCT, SIESTA	150	Admission, post-recanalization	-	71	17	40	64	Age, heart rate, baseline SBP/DBP, baseline NIHSS	1 [†]
Whalin, 2014 ⁴³	Retrospective	83	During MT	-	66	19	50	53	-	1 [†]

Alberta stroke program early CT score; NIHSS, National Institutes of Health Stroke Scale; HTN, hypertension; HLD, hyperlipidemia; AF, atrial fibrillation; DM, diabetes mellitus; SBP, systolic blood pressure; RCT, randomized controlled trial; eGFR, estimated glomerular filtration rate; BMI, body mass index; TICI, thrombolysis in cerebral infarction; NASA, North American SOLITAIRE Stent-Retriever Acute Stroke; ETIS, Endovascular Treatment in Ischemic Stroke; GOLIATH, General or Local Anesthesia in Intra Arterial Therapy

[†]Unadjusted descriptive data; ^{*} Adjusted multivariable data

Table S4. Quality assessment of included studies with the Newcastle-Ottawa Scale

First author, Year	Selection	Comparability	Outcome	Overall
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Abou-Chebl, 2014 ¹⁹	***	**	***	8/9
Anadani, 2019 ²⁰	****	**	**	8/9
Bennett, 2018 ²¹	****	**	***	9/9
Cernik, 2019 ²²	****	**	**	8/9
Chang, 2019 ²³	****	**	**	8/9
Chang (recanalized), 2019 ²⁴	****	**	**	8/9
Cho, 2019 ²⁵	****	**	***	9/9
Ding, 2019 ²⁶	****	**	***	9/9
Goyal (post-MT, recanalized), 2017 ²⁷	****	**	***	9/9
Goyal (pre-MT), 2017 ²⁸	****	**	***	9/9
Goyal (post-MT, non-recanalized), 2018 ²⁹	****	**	***	9/9
Jagani, 2016 ³⁰	***	**	***	8/9
John, 2016 ³¹	****	**	**	8/9
John, 2017 ³²	****	**	***	9/9
Kim, 2019 ³³	****	**	***	9/9
Maier B, 2017 ³⁴	****	**	**	8/9
Maier B, 2018 ³⁵	****	**	**	8/9
Maier IL, 2018 ³⁶	****	**	***	8/9

McCarthy, 2019 ³⁷	****	**	***	9/9
Mistry, 2017 ³⁸	****	**	**	8/9
Panni, 2019 ³⁹	****	**	**	8/9
Petersen, 2019 ⁴⁰	****	**	**	8/9
Rasmussen, 2018 ⁴¹	****	**	***	9/9
Schönenberger et al, 2018 ⁴²	****	**	***	9/9
Whalin, 2014 ⁴³	***	**	***	8/9
Total	97/100	50/50	66/75	213/225

Table S5. Quality assessment of included studies with the Risk of Bias in Non-randomized Studies of Exposures (ROBINS-E) Scale

First author, Year	Confounding	Selection of participants into the study	Classification of exposures	Departures from intended exposures	Missing Data	Measurement of outcomes	Selection of the reported result	Overall Bias
Abou-Chebl, 2014	**	**	*	*	**	**	*	**
Anadani, 2019	*	*	*	*	*	**	*	*
Bennett, 2018	*	*	*	*	**	**	*	**
Cernik, 2019	*	*	*	*	*	**	*	*
Chang, 2019	*	*	*	*	*	**	*	*
Chang (recanalized), 2019	*	*	*	*	**	*	*	*
Cho, 2019	*	*	*	*	**	*	*	*
Ding, 2019	*	*	*	*	**	*	*	*
Goyal (post-MT, recanalized), 2017	*	*	*	*	**	*	*	*
Goyal (pre-MT), 2017	*	*	*	*	**	*	*	*
Goyal (post-MT, non-recanalized), 2018	*	*	*	*	**	*	*	*
Jagani, 2016	*	**	*	*	**	**	*	**

John, 2016	*	*	*	*	**	**	*	**
John, 2017	**	*	*	*	**	*	*	**
Kim, 2019	*	*	*	*	**	*	*	*
Maier B, 2017	*	*	*	*	*	**	*	*
Maier B, 2018	*	*	*	*	*	**	*	*
Maier IL, 2018	*	*	*	*	**	*	*	*
McCarthy, 2019	*	*	*	*	**	*	*	*
Mistry, 2017	*	*	*	*	*	**	*	*
Panni, 2019	*	*	*	*	**	*	*	*
Petersen, 2019	*	*	*	*	**	*	*	*
Rasmussen, 2018	*	*	*	*	*	*	*	*
Schonenberger, 2018	*	*	*	*	*	*	*	*
Whalin, 2014	*	*	*	*	**	**	*	**

*Low, **Medium, and ***High risk of bias

Table S6. Overview of primary and secondary analyses of during-treatment BP association with available outcomes

Clinical outcome	BP level	Unadjusted analyses				Adjusted analyses			
		Studies	SMD (95% CI)	<i>P</i>	Heterogeneity (I ² , <i>P</i> for Cochran Q)	Studies	OR (95% CI)	<i>P</i>	Heterogeneity (I ² , <i>P</i> for Cochran Q)
FI	Max SBP	4	-0.37 (-0.62 to -0.12)	0.004	55%, 0.08	2	0.93 (0.90 to 0.96)	<0.001	0%, 0.78
	Min SBP	3	0.07 (-0.30 to 0.44)	0.71	67%, 0.05	-	-	-	-
	Max DBP	3	-0.16 (-0.49 to 0.16)	0.32	54%, 0.12	-	-	-	-
	Min DBP	2	0.25 (-0.35 to 0.84)	0.42	73%, 0.05	-	-	-	-

BP, blood pressure; SMD, standardized mean difference; CI, confidence interval; OR, odds ratio; SBP, systolic blood pressure; DBP, diastolic blood pressure; FI, functional independence (mRS 0–2)

Supplemental Figures

Figure S1. Flow-chart diagram presenting the selection of eligible studies.

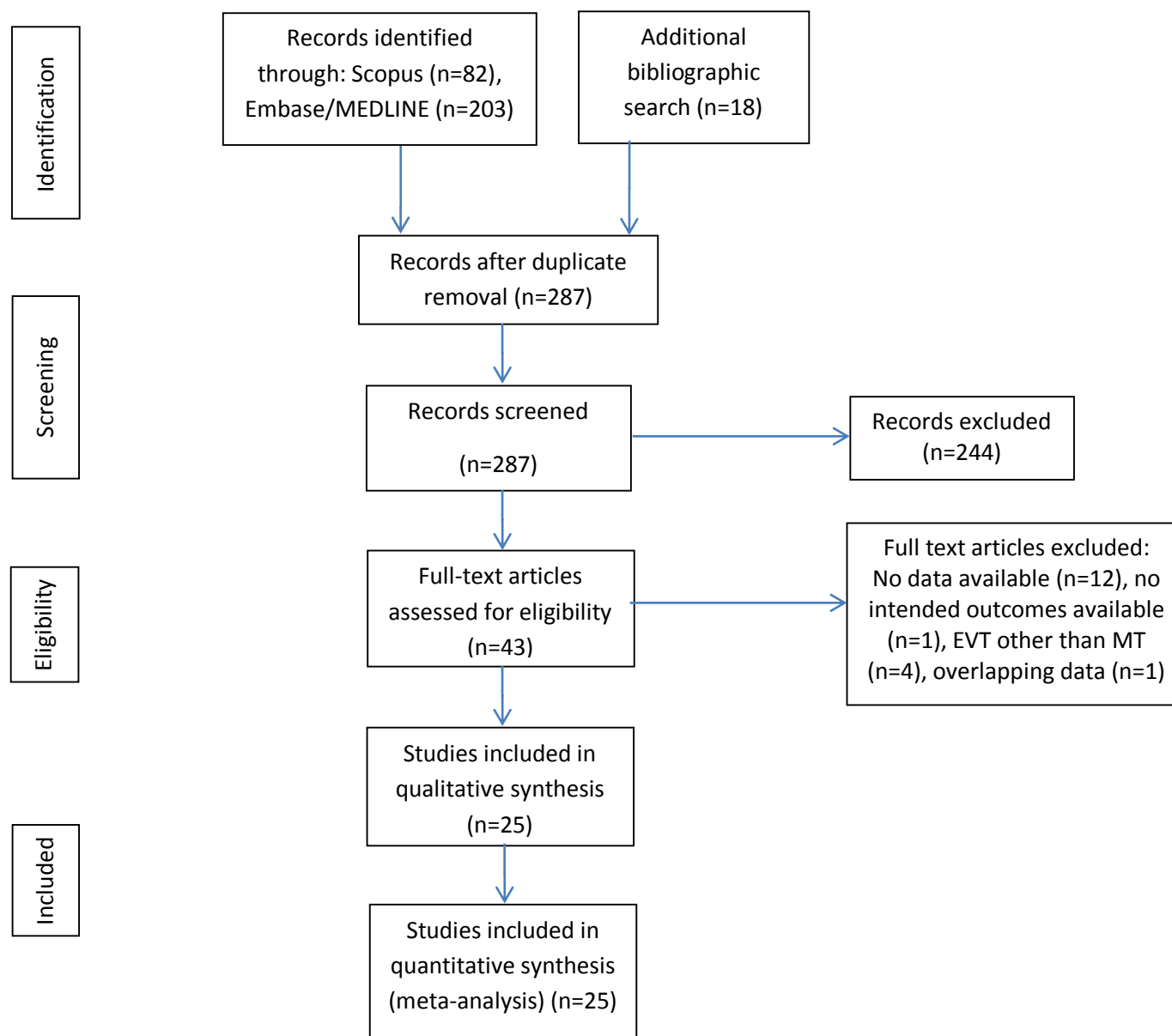
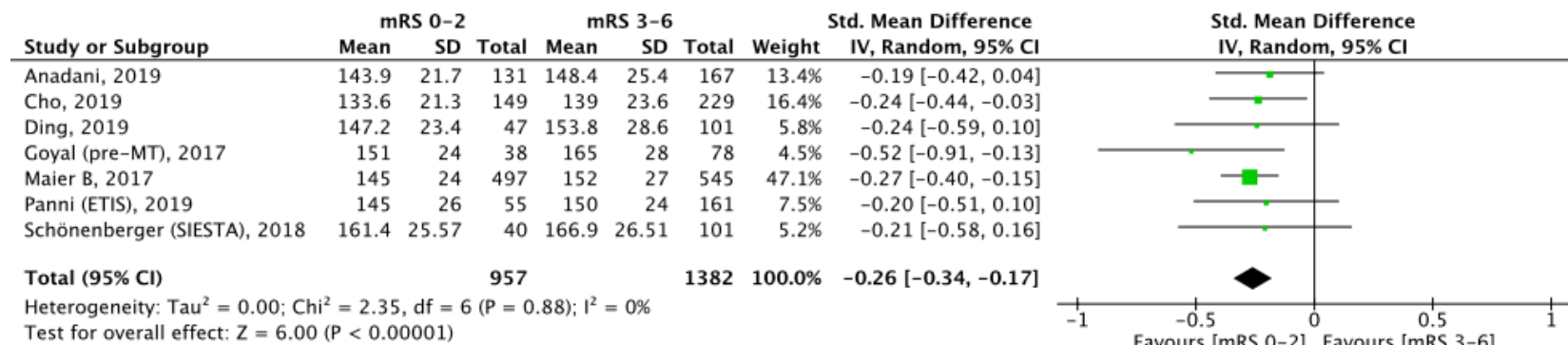


Figure S2. Forest plots evaluating the associations of pre-treatment mean (A) systolic blood pressure levels and (B) diastolic blood pressure levels with 3-month functional independence. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

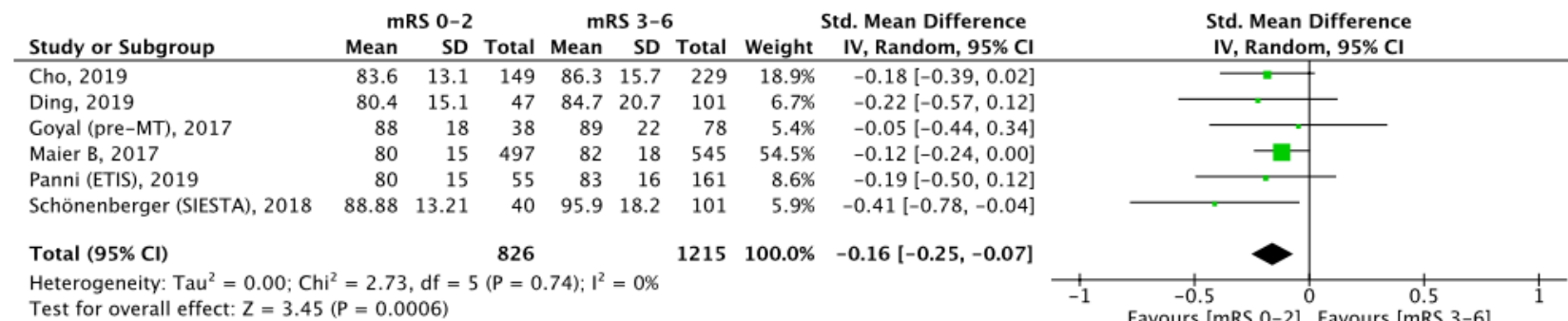
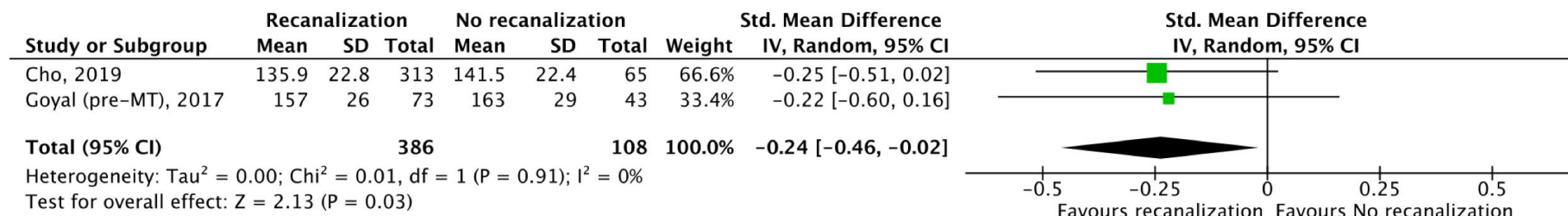


Figure S3. Forest plots evaluating the association of pre-treatment mean (A) systolic blood pressure levels and (B) diastolic blood pressure levels with successful recanalization. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

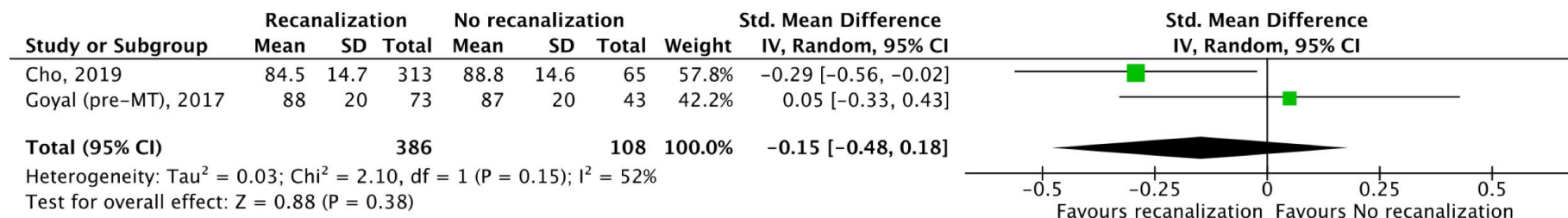
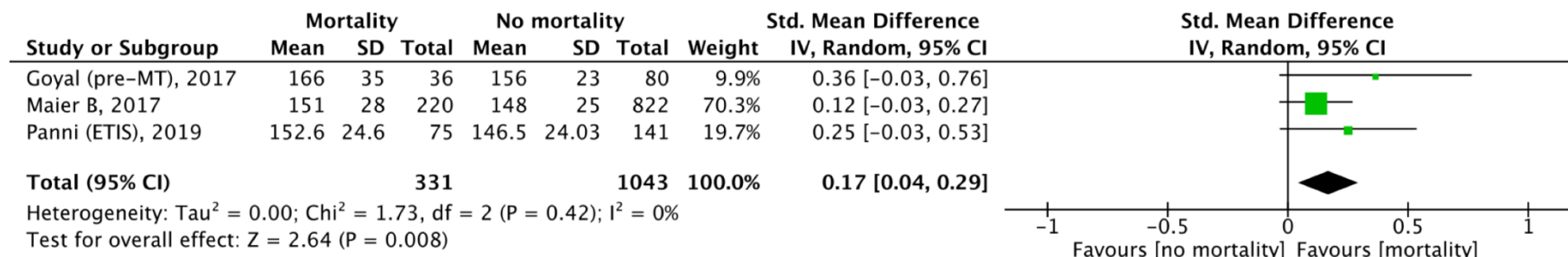


Figure S4. Forest plots evaluating the association of pre-treatment mean (A) systolic blood pressure levels and (B) diastolic blood pressure levels with 3-month mortality. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

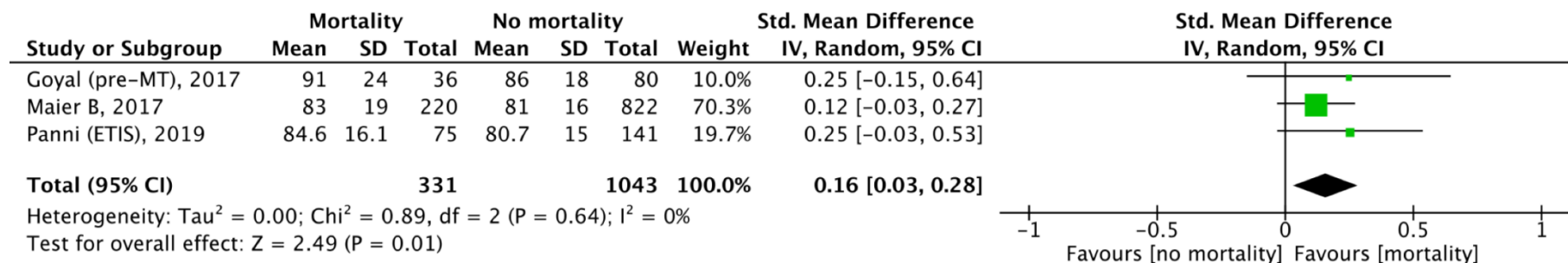
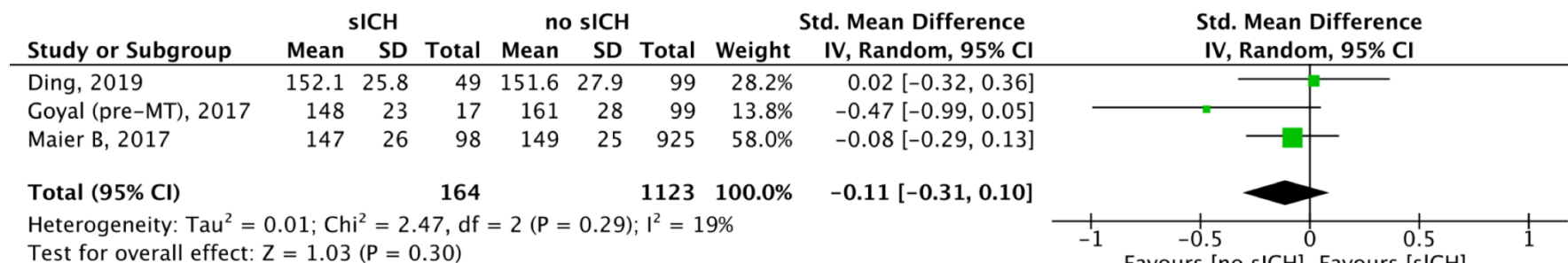


Figure S5. Forest plots evaluating the association of pre-treatment mean (A) systolic blood pressure levels and (B) diastolic blood pressure levels with symptomatic intracranial hemorrhage. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

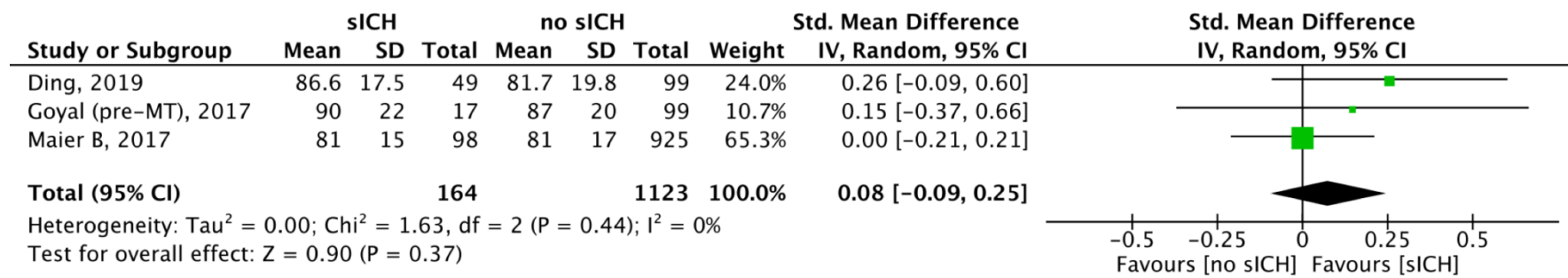
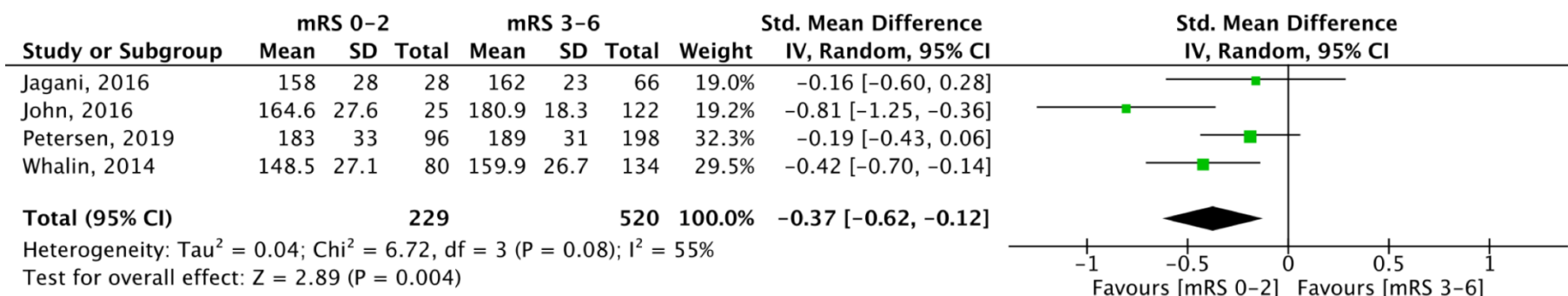


Figure S6. Forest plots evaluating the association of during treatment (A) maximum systolic blood pressure levels and (B) minimum systolic blood pressure levels with 3-month functional independence. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; IV, Inverse Variance; CI, confidence interval.

A)



B)

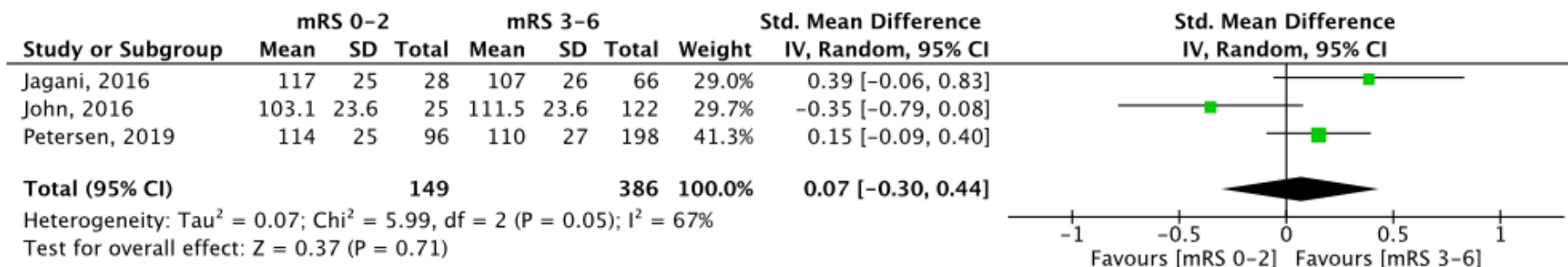
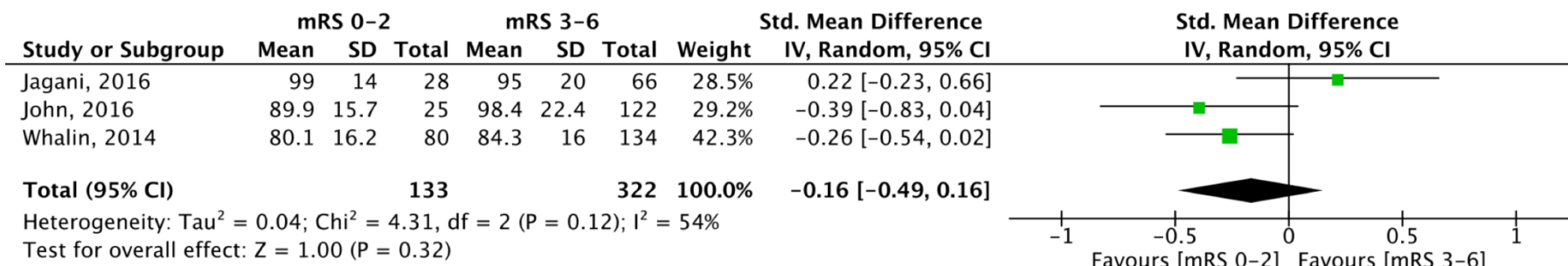


Figure S7. Forest plots evaluating the association of during treatment (A) maximum diastolic blood pressure levels and (B) minimum diastolic blood pressure levels with 3-month functional independence. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; IV, Inverse Variance; CI, confidence interval.

A)



B)

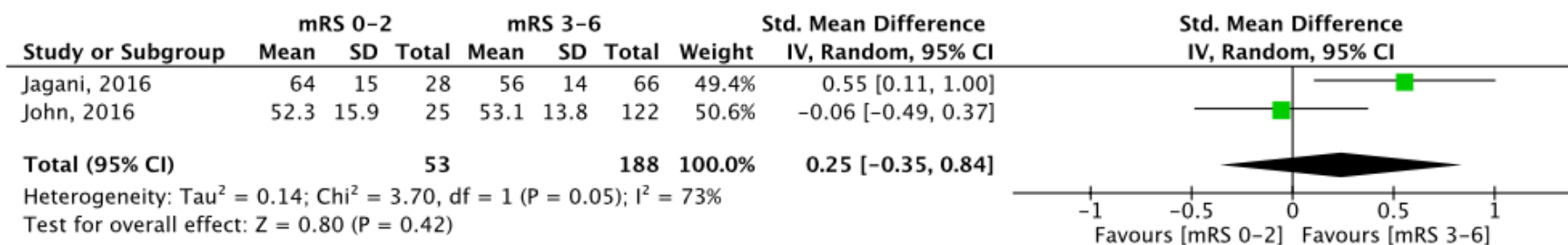


Figure S8. Forest plots evaluating the association of post-treatment maximum systolic blood pressure levels with 3-month functional independence. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

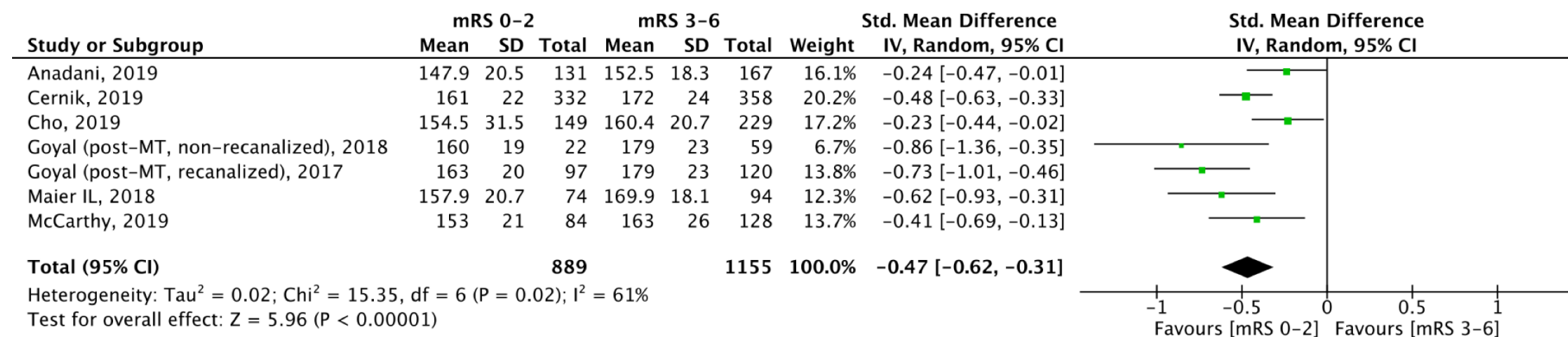
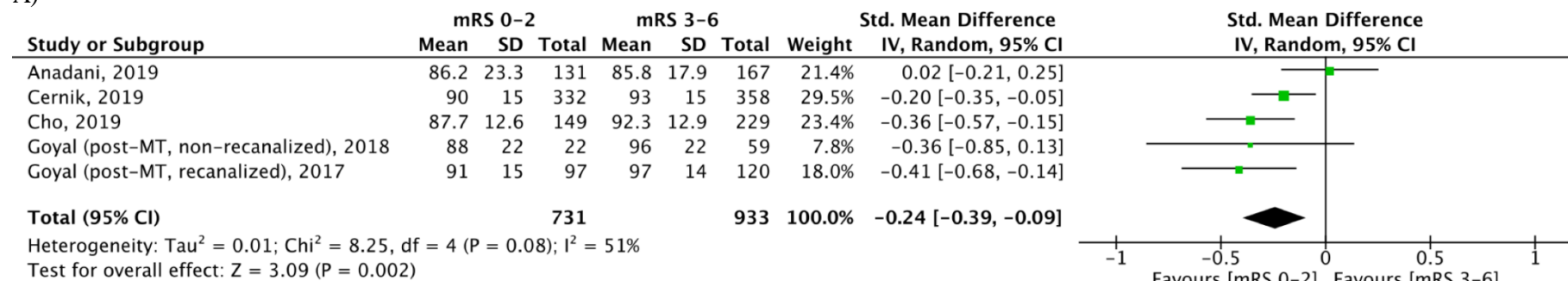


Figure S9. Forest plots evaluating the association of post-treatment A) maximum diastolic blood pressure levels and B) mean diastolic blood pressure levels with 3-month functional independence. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

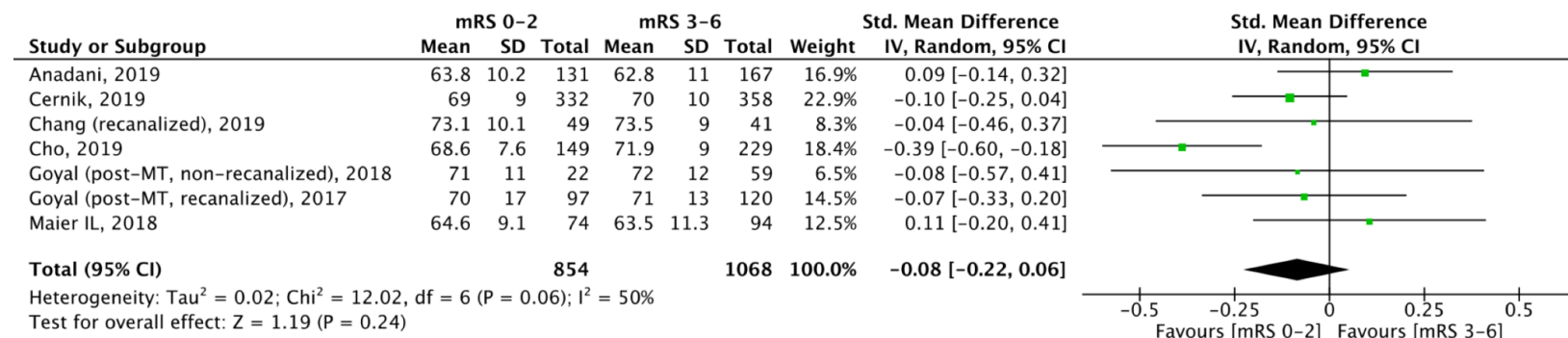
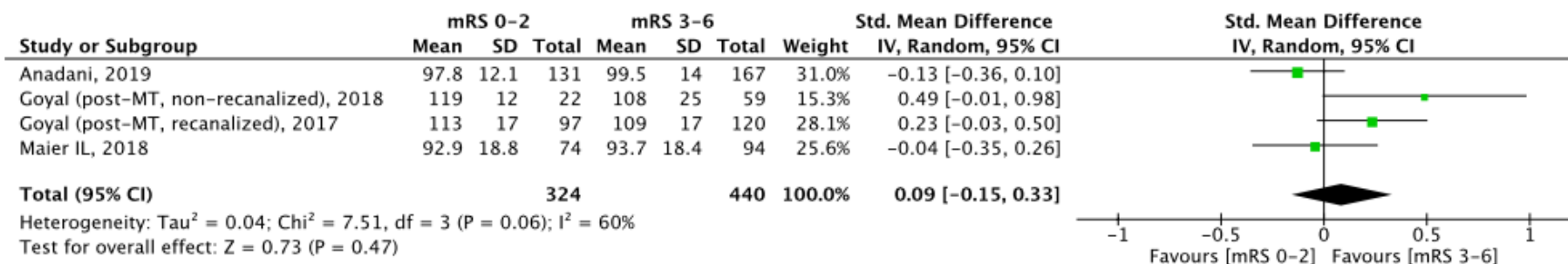


Figure S10. Forest plots evaluating the association of post-treatment A) minimum systolic blood pressure levels and B) minimum diastolic blood pressure levels with 3-month functional independence. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

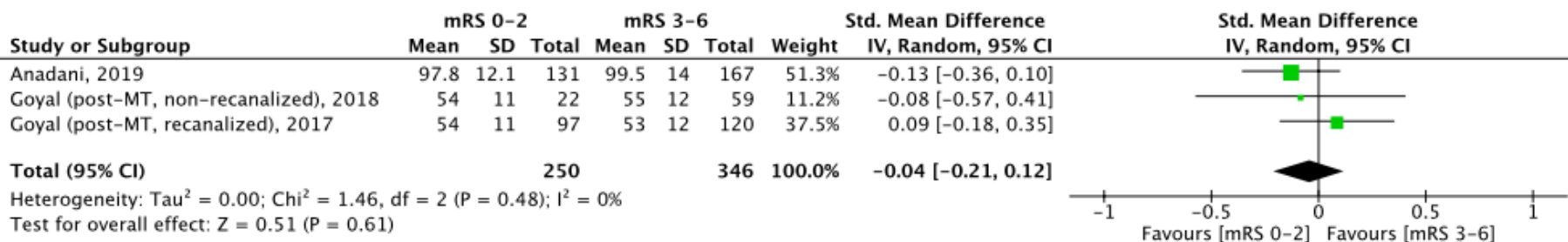
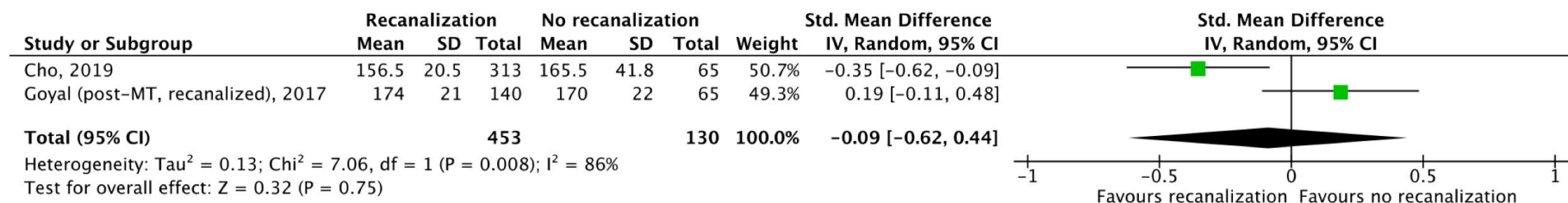


Figure S11. Forest plots evaluating the association of post-treatment A) maximum systolic blood pressure and B) mean systolic blood pressure levels with successful recanalization. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; IV, Inverse Variance; CI, confidence interval.

A)



B)

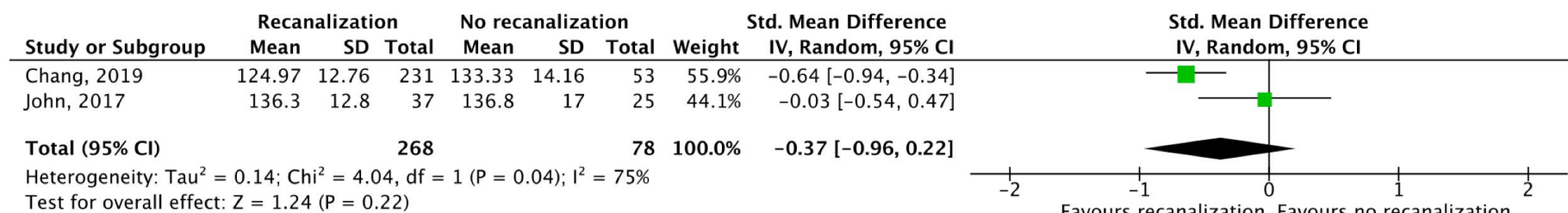
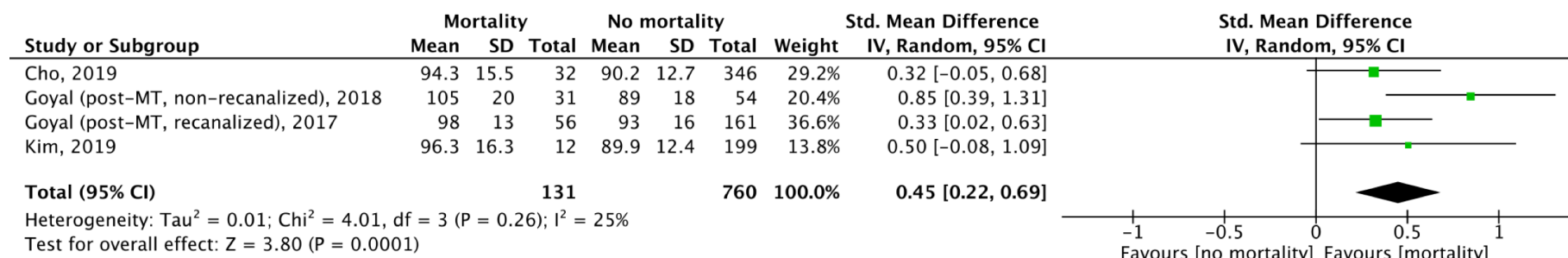


Figure S12. Forest plots evaluating the association of post-treatment A) maximum diastolic blood pressure levels and B) mean diastolic blood pressure levels with 3-month mortality. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

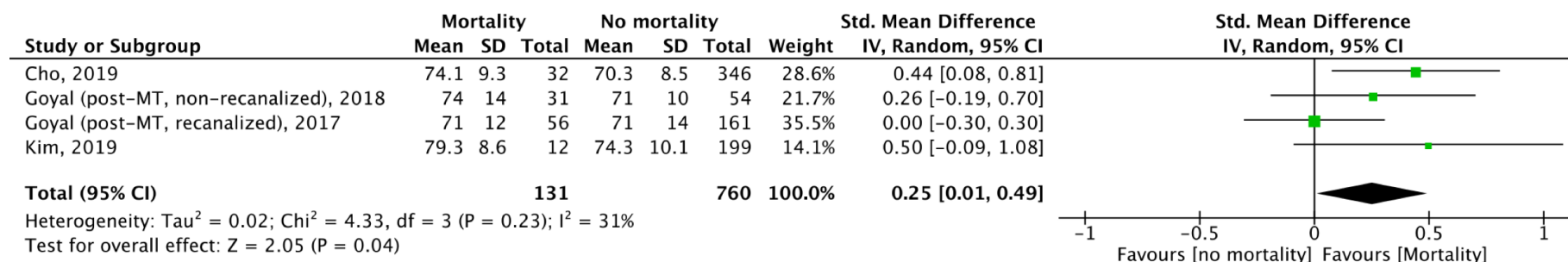


Figure S13. Forest plots evaluating the association of post-treatment mean systolic blood pressure levels with 3-month mortality. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

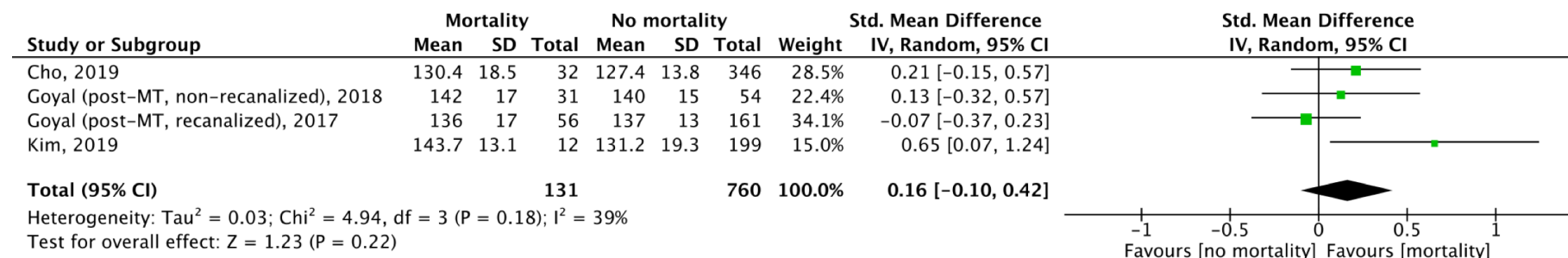
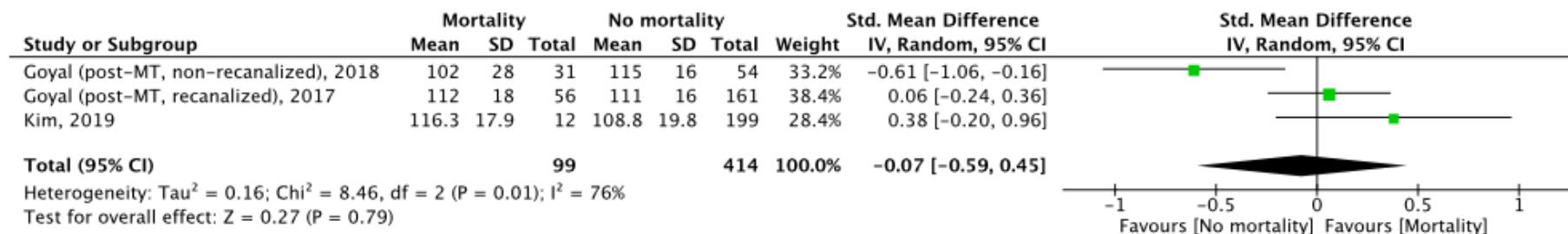


Figure S14. Forest plots evaluating the association of post-treatment A) minimum systolic blood pressure levels and B) minimum diastolic blood pressure levels with 3-month mortality. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

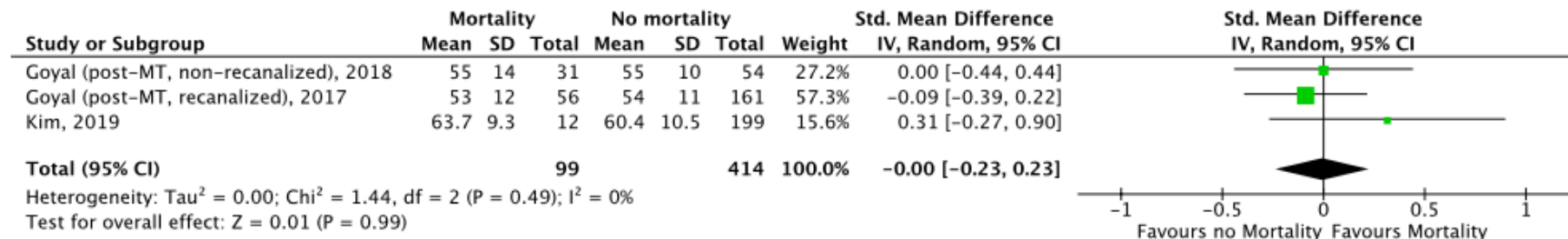
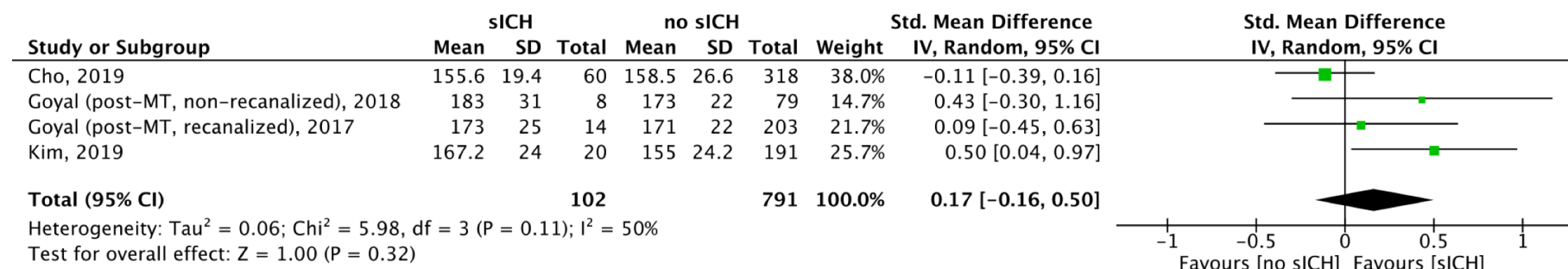
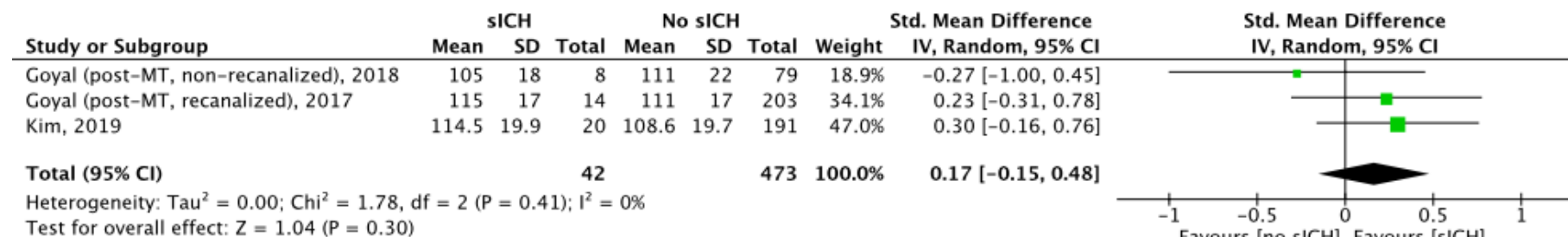


Figure S15. Forest plots evaluating the association of post-treatment A) maximum, B) minimum and C) mean systolic blood pressure levels with symptomatic intracranial hemorrhage. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)



C)

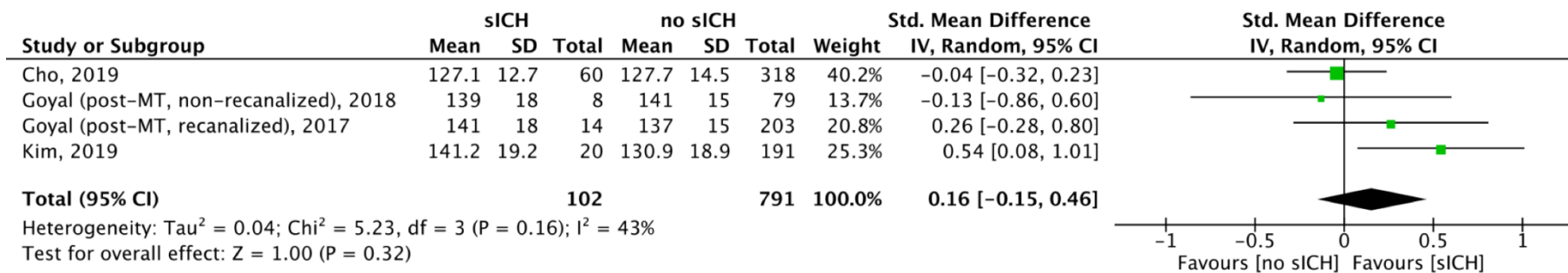
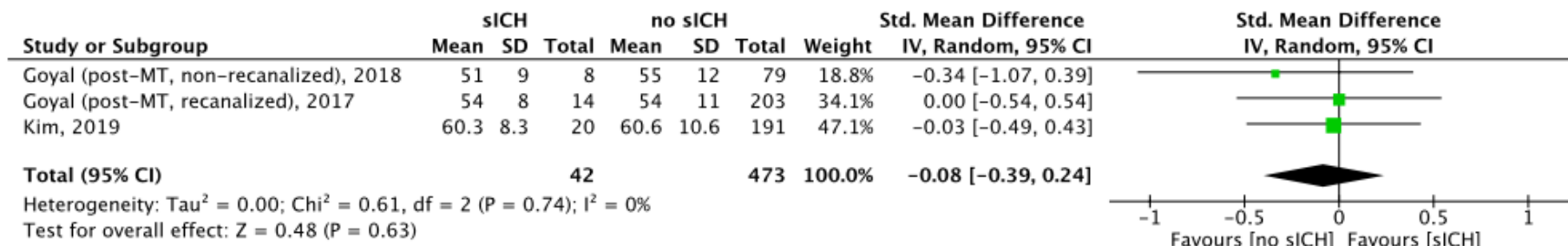


Figure S16. Forest plots evaluating the association of post-treatment A) minimum and B) mean diastolic blood pressure levels with symptomatic intracranial hemorrhage. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

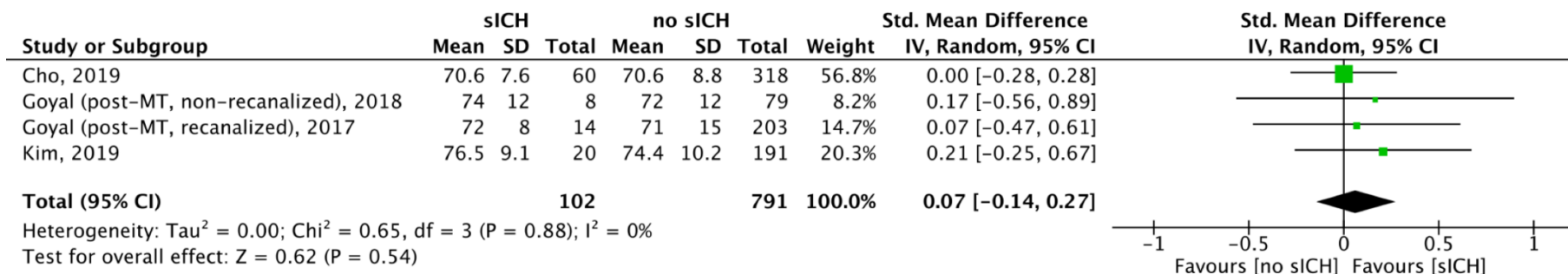
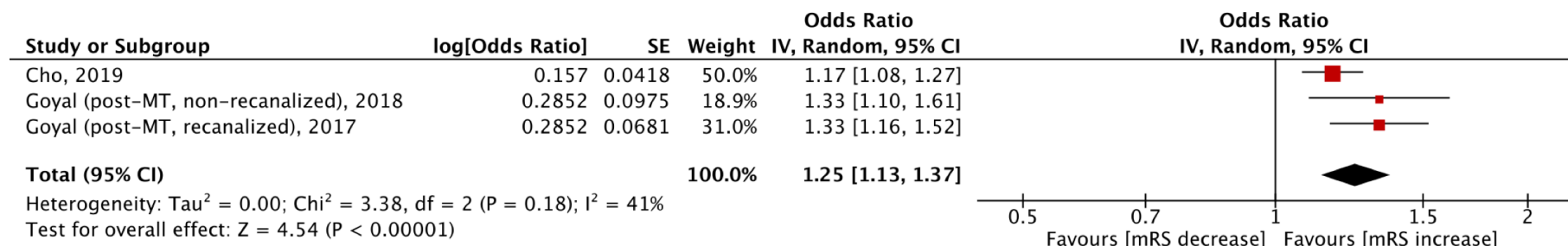


Figure S17. Forest plot evaluating the association of post-treatment A) maximum and B) mean systolic blood pressure levels with 3-month functional deterioration. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

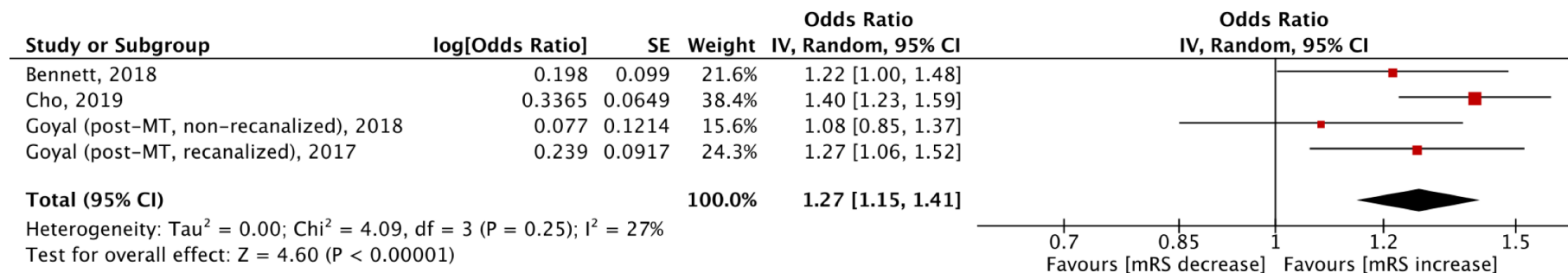
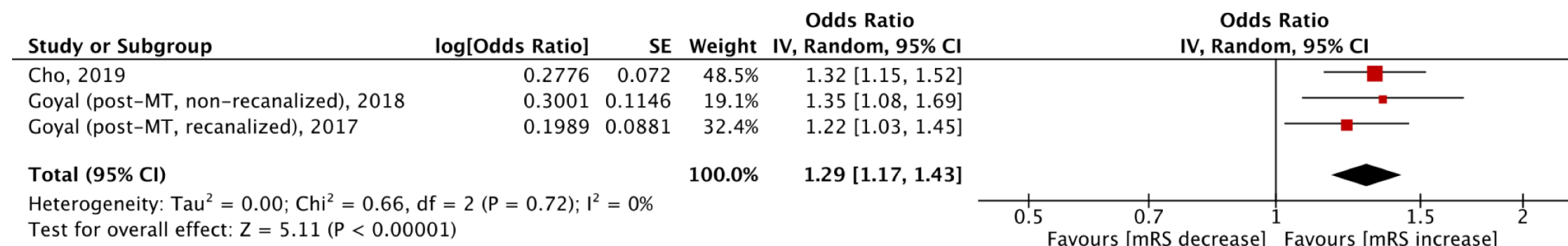


Figure S18. Forest plot evaluating the association of post-treatment A) maximum and B) mean diastolic blood pressure levels with 3-month functional deterioration. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

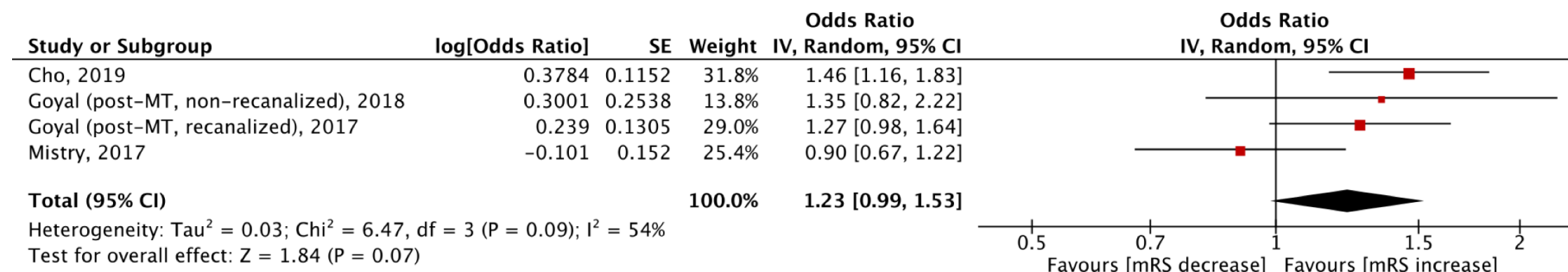
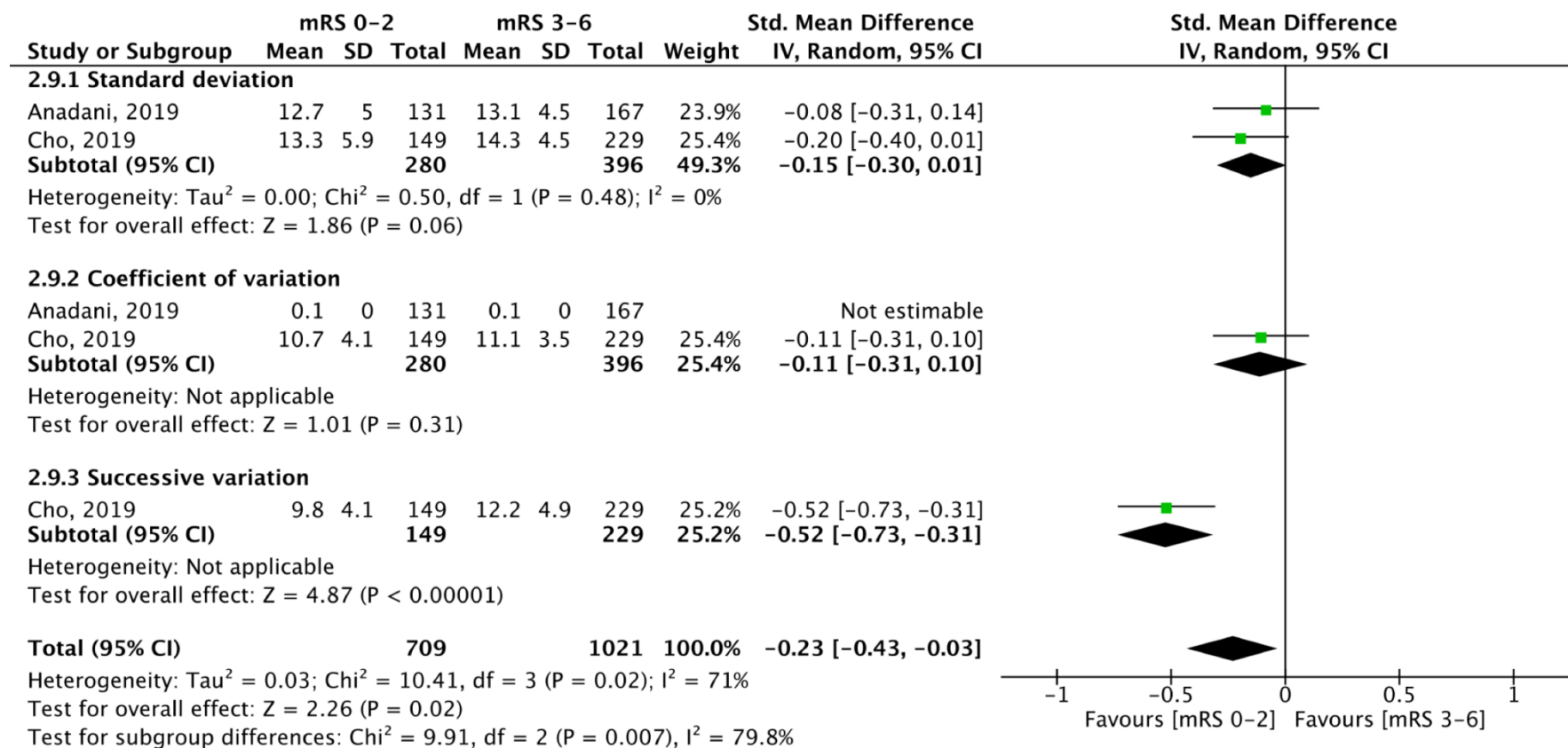


Figure S19. Forest plots evaluating the association of post-treatment A) systolic blood pressure variability and B) diastolic blood pressure variability with 3-month functional independence. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; IV, Inverse Variance; CI, confidence interval.

A)



B)

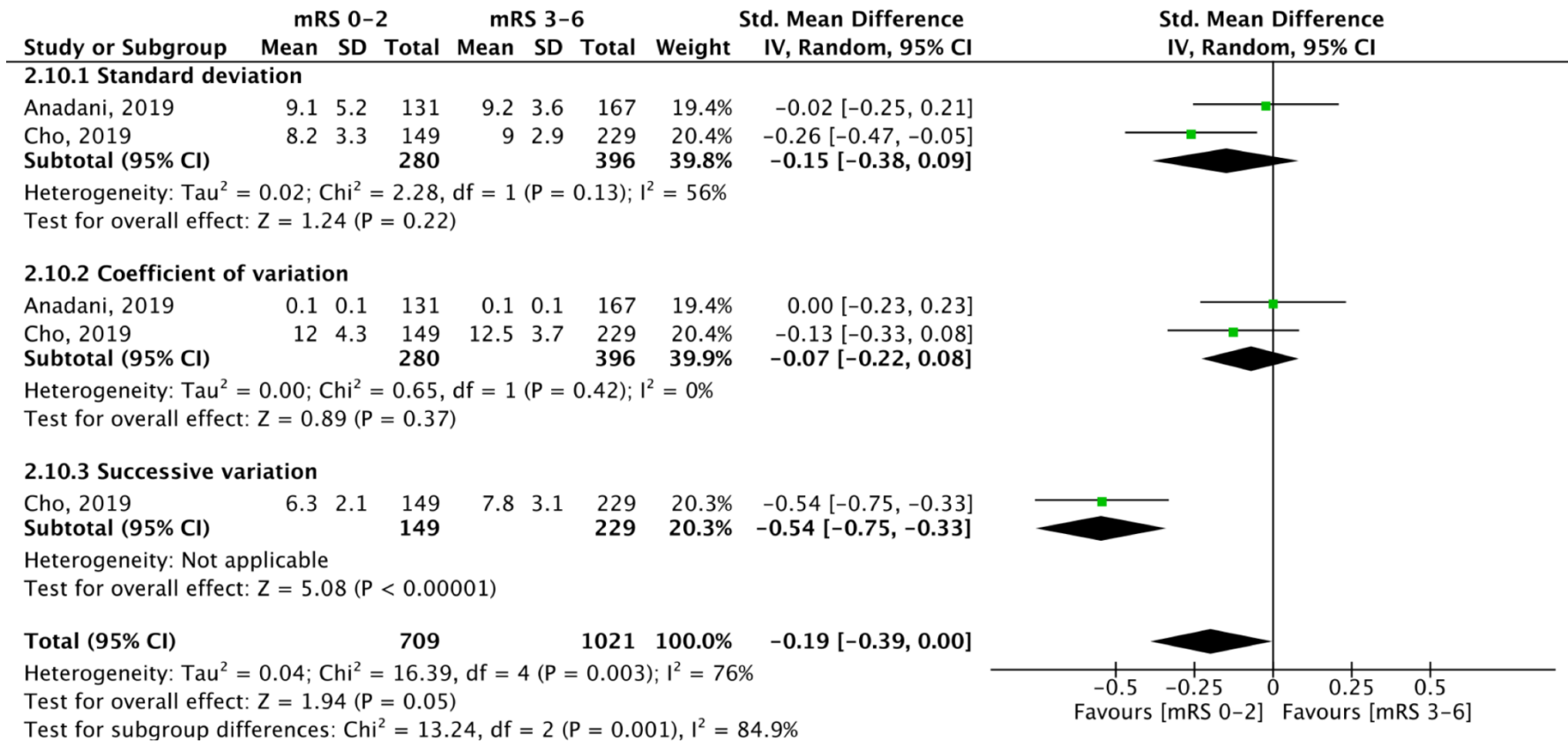
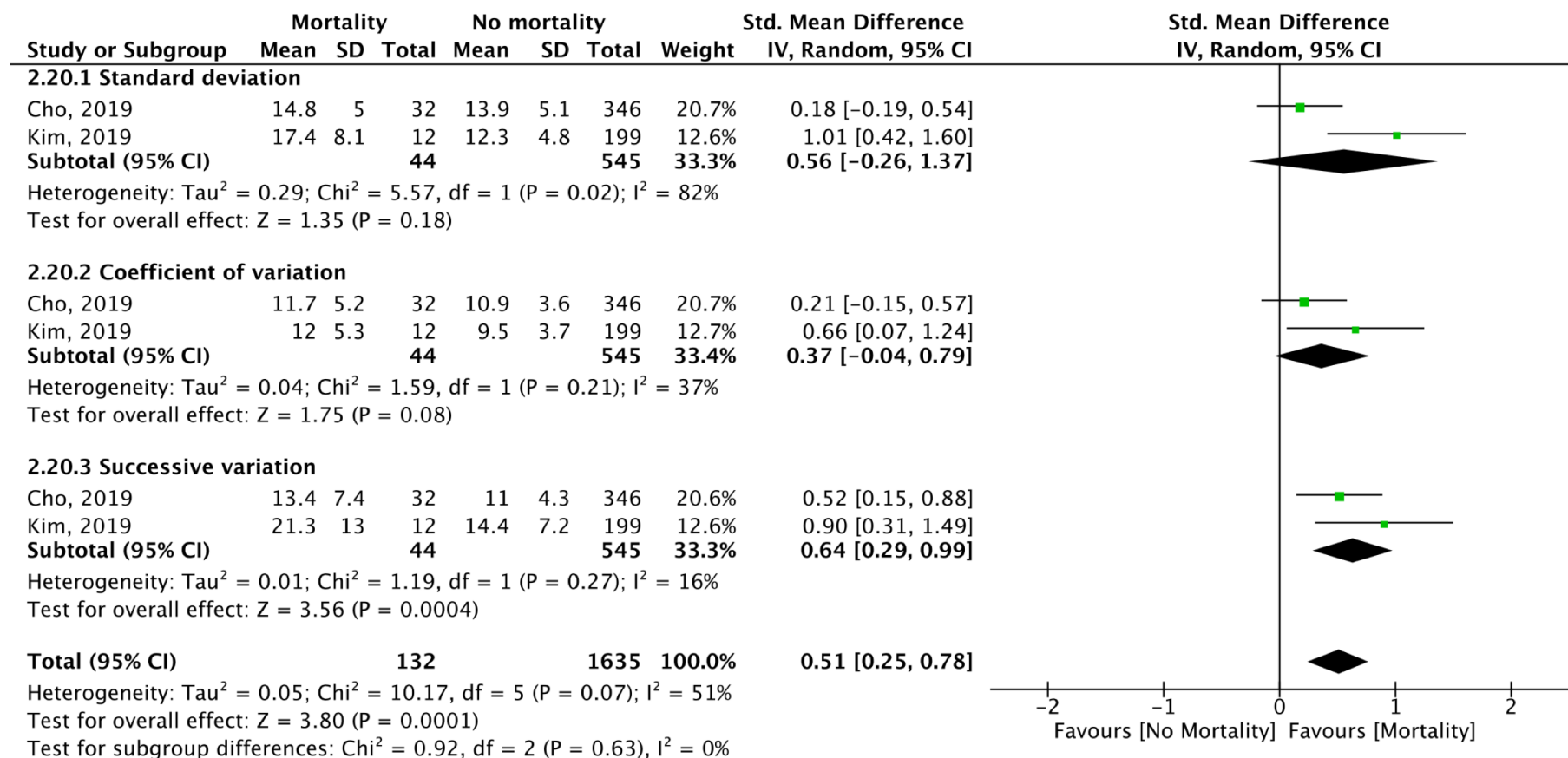


Figure S20. Forest plots evaluating the association of post-treatment A) systolic blood pressure variability and B) diastolic blood pressure variability with 3-month mortality. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; IV, Inverse Variance; CI, confidence interval.

A)



B)

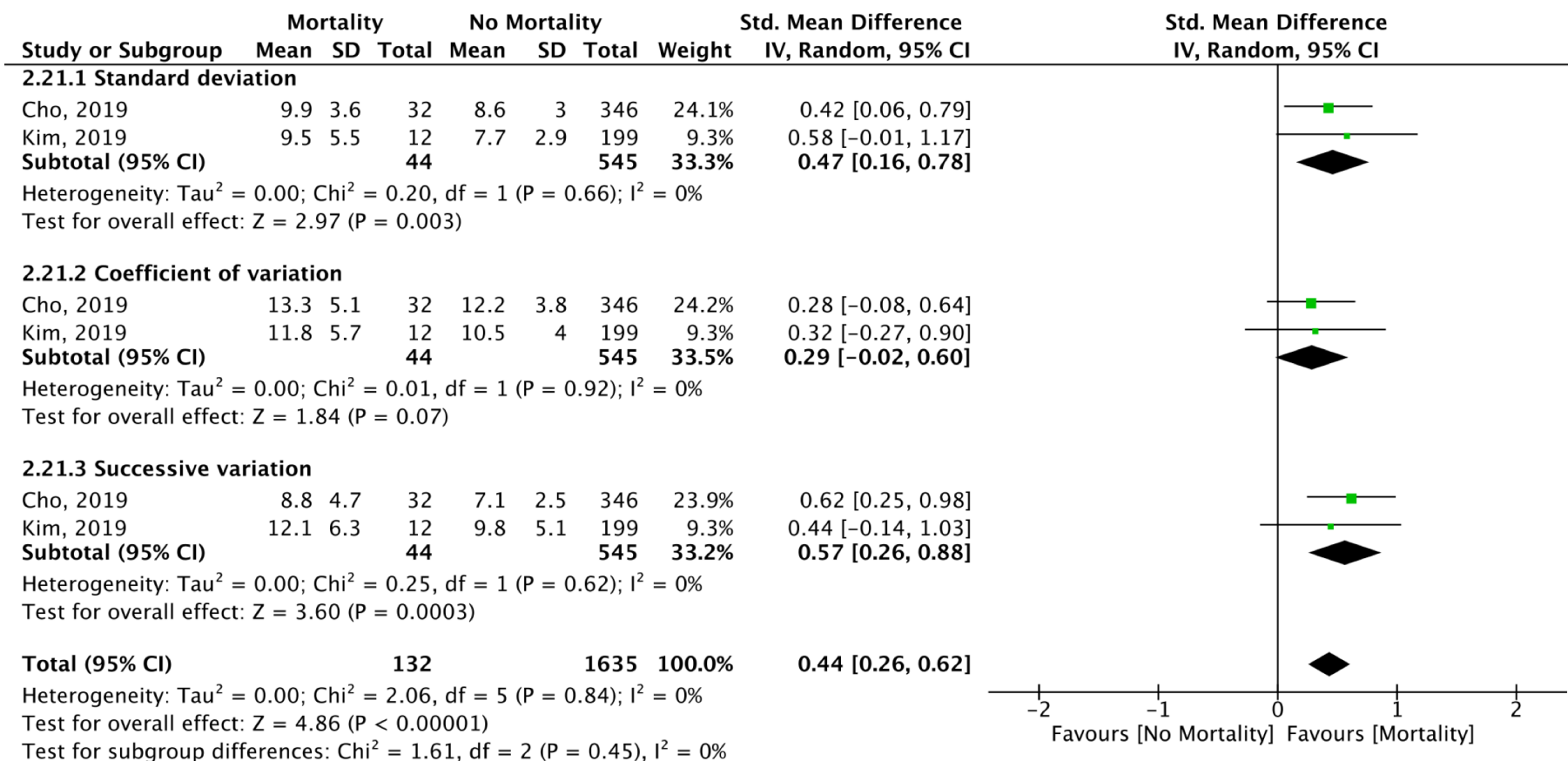
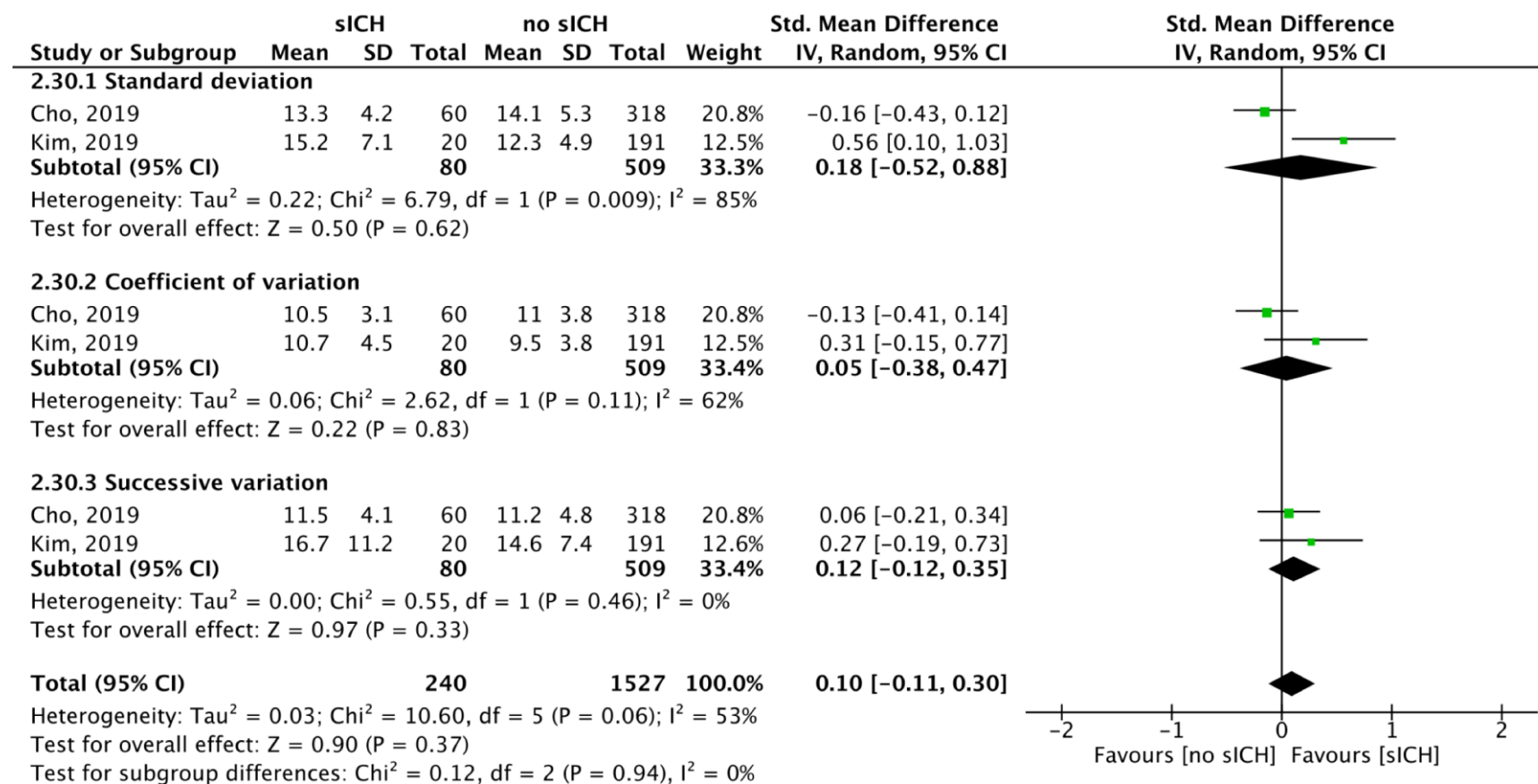


Figure S21. Forest plots evaluating the association of post-treatment A) systolic blood pressure variability and B) diastolic blood pressure variability with symptomatic intracranial hemorrhage. mRS, modified Rankin Scale; Std., standardized; SD, standard deviation; IV, Inverse Variance; CI, confidence interval.

A)



B)

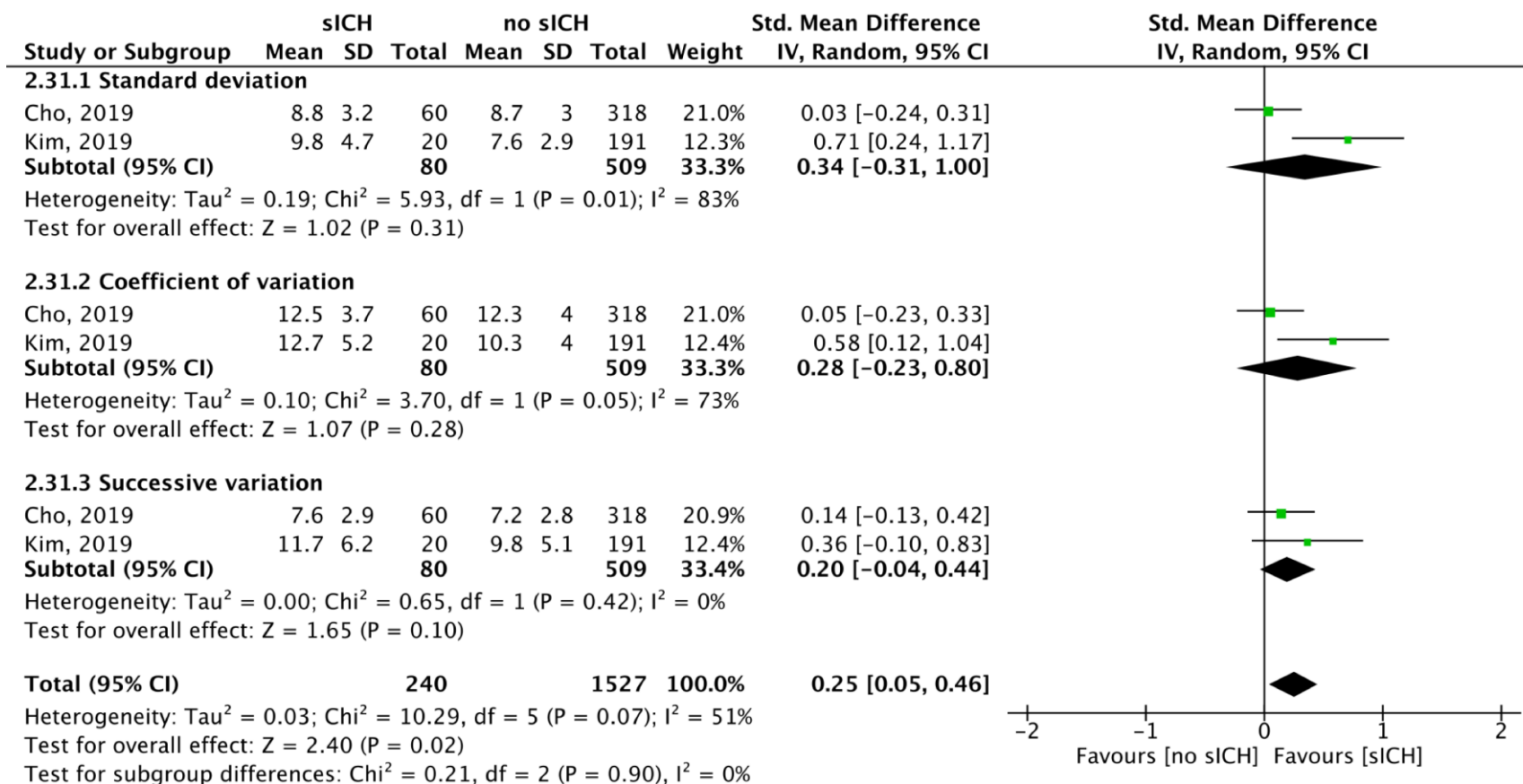


Figure S22. Forest plot evaluating the adjusted association of pre-treatment mean systolic blood pressure levels and 3-month functional independence. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

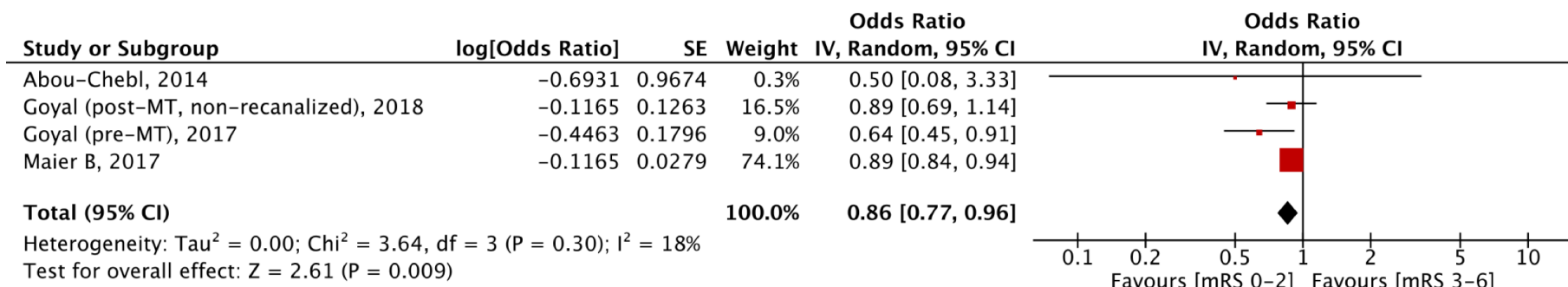
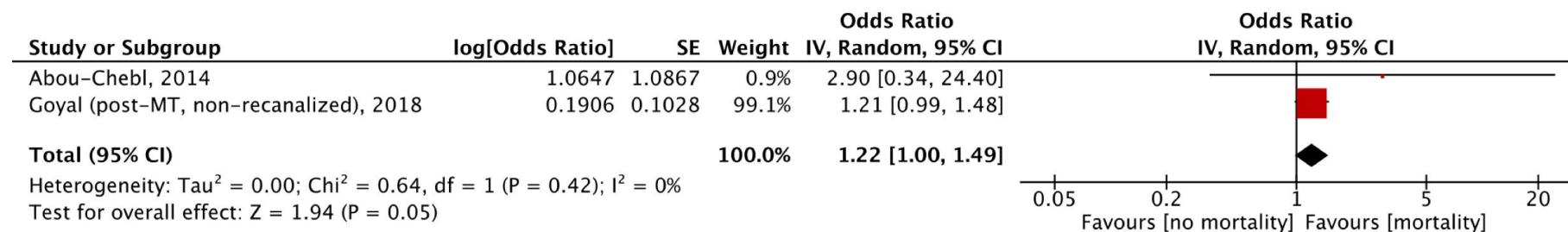


Figure S23. Forest plot evaluating the adjusted association of pre-treatment mean A) systolic blood pressure levels and B) diastolic blood pressure levels with 3-month mortality. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

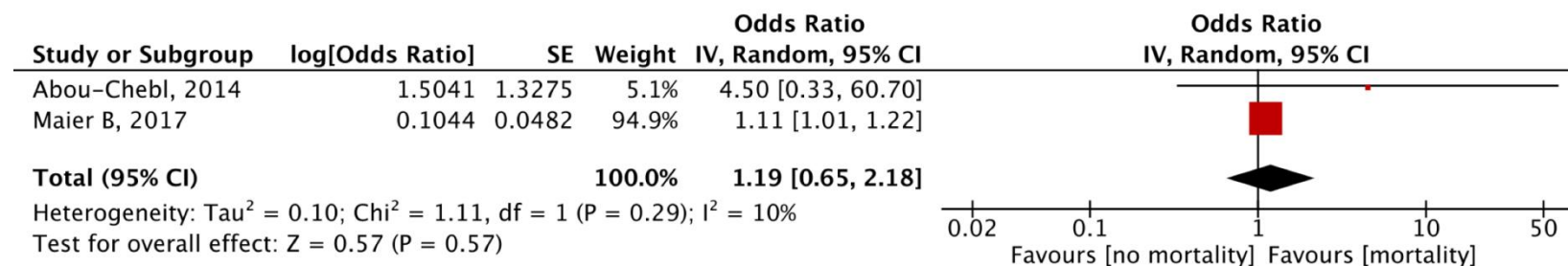


Figure S24. Forest plot evaluating the adjusted association of during-treatment maximum systolic blood pressure levels and 3-month functional independence. SE, standard error; IV, Inverse Variance; CI, confidence interval.

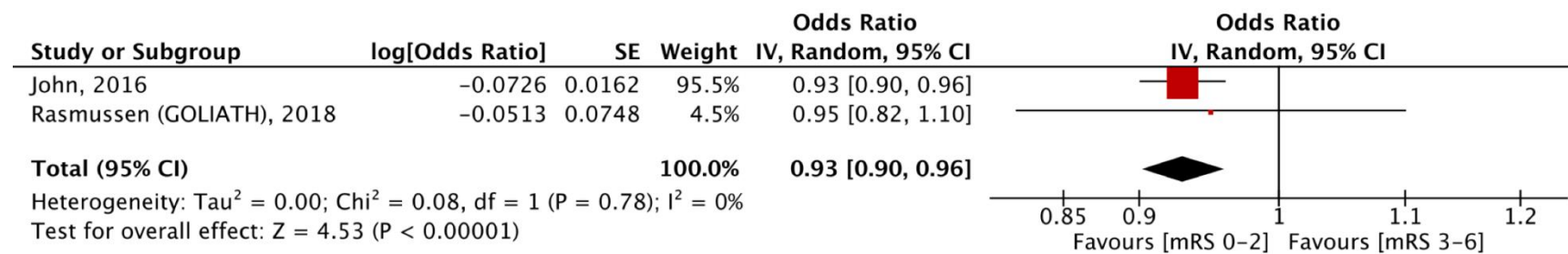
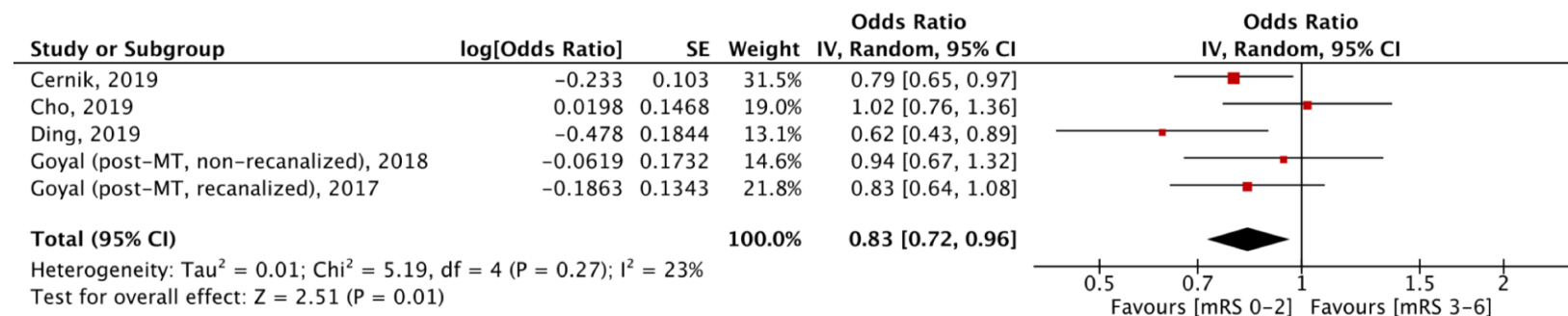


Figure S25. Forest plot evaluating the adjusted association of post-treatment maximum A) diastolic blood pressure levels and B) systolic blood pressure levels with 3-month functional independence. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

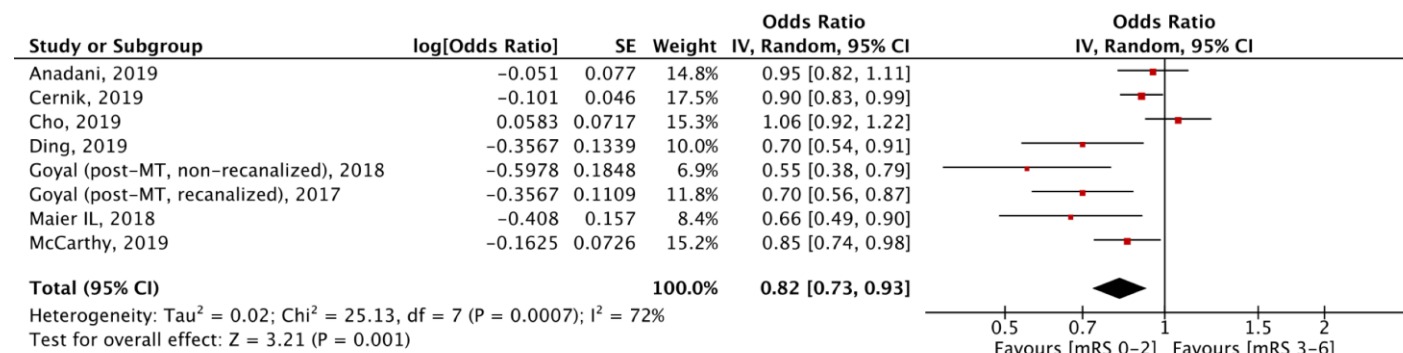
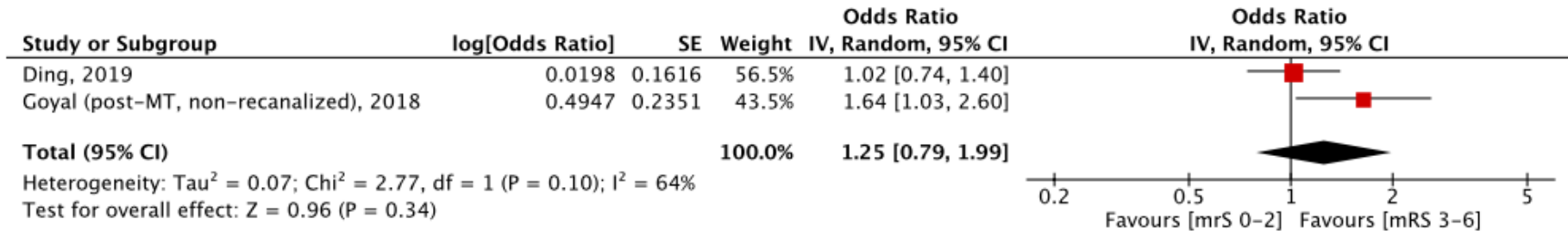


Figure S26. Forest plot evaluating the adjusted association of post-treatment A) minimum systolic blood pressure levels and B) mean diastolic blood pressure levels with 3-month functional independence. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

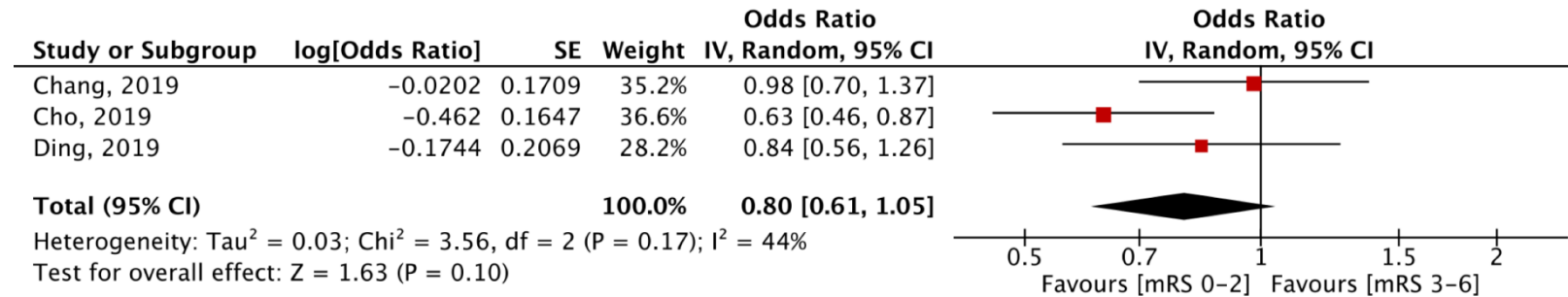
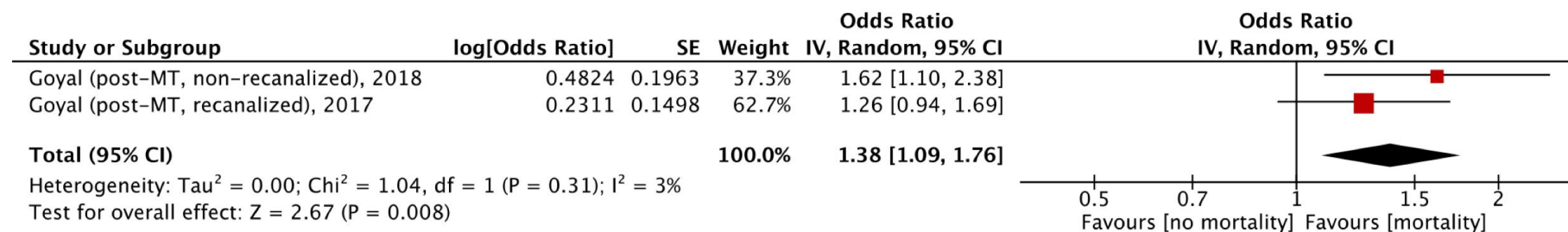


Figure S27. Forest plot evaluating the adjusted association of post-treatment A) maximum diastolic blood pressure levels and B) mean systolic blood pressure levels 3-month mortality. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

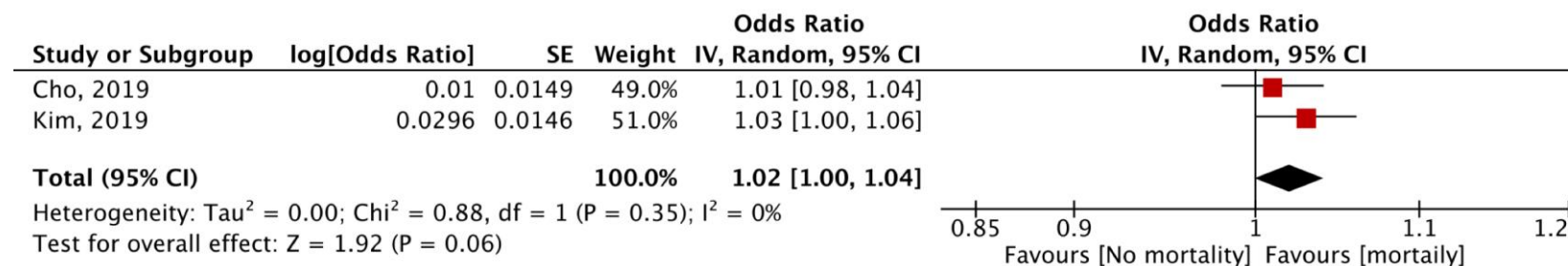
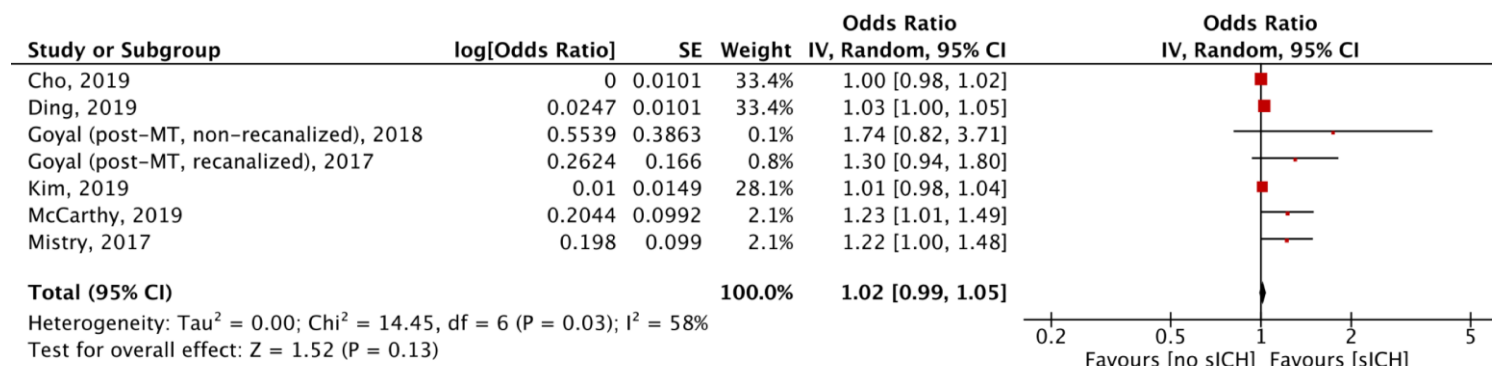
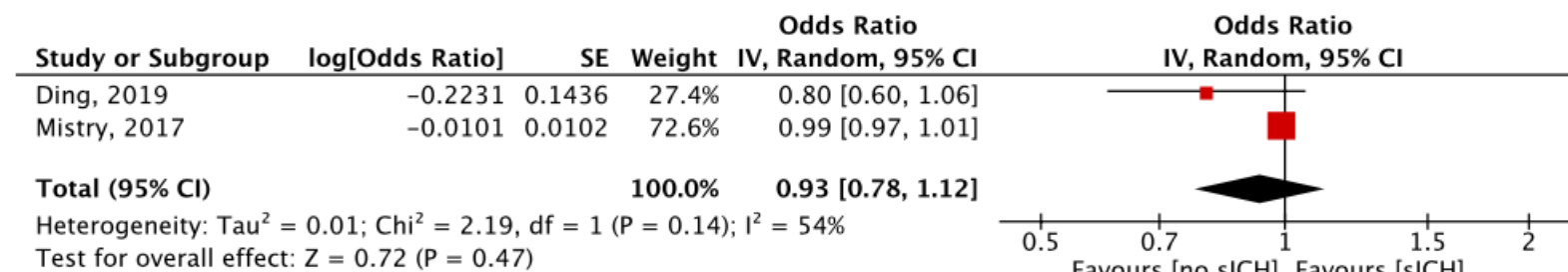


Figure S28. Forest plot evaluating the adjusted association of post-treatment A) maximum, B) minimum and C) mean systolic blood pressure levels and symptomatic intracranial hemorrhage. SE, standard error; IV, Inverse Variance; CI, confidence interval.

A)



B)



C)

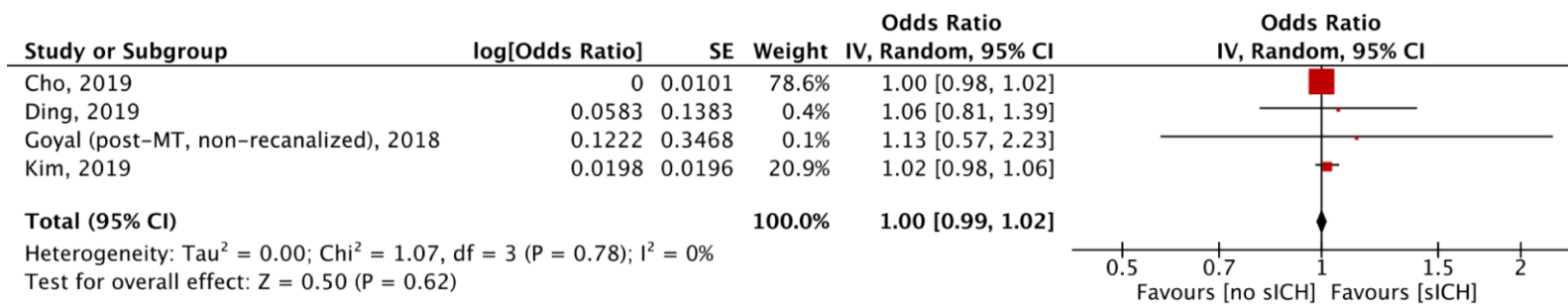
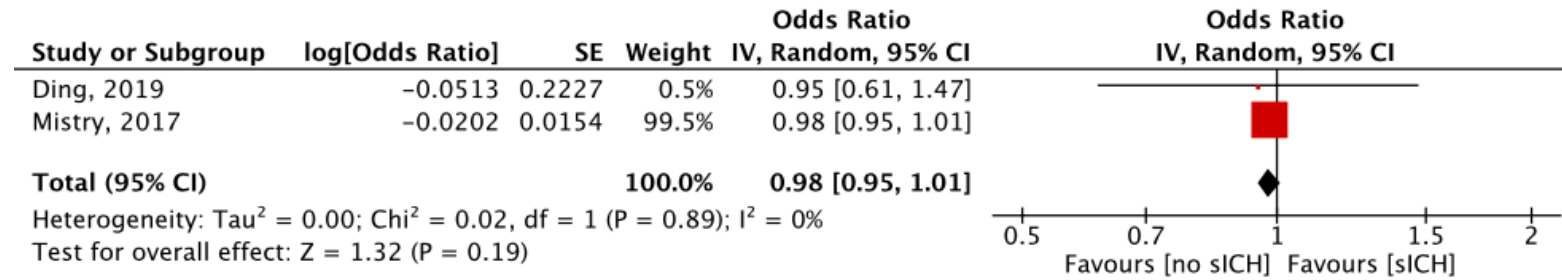


Figure S29. Forest plot evaluating the adjusted association of post-treatment A) minimum and B) mean diastolic blood pressure levels and symptomatic intracranial hemorrhage. SE, standard error; IV, Inverse Variance; CI, confidence interval.

A)



B)

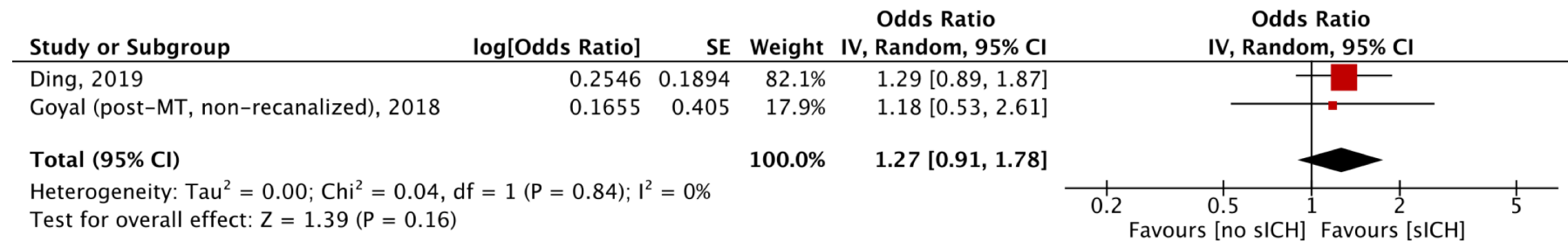
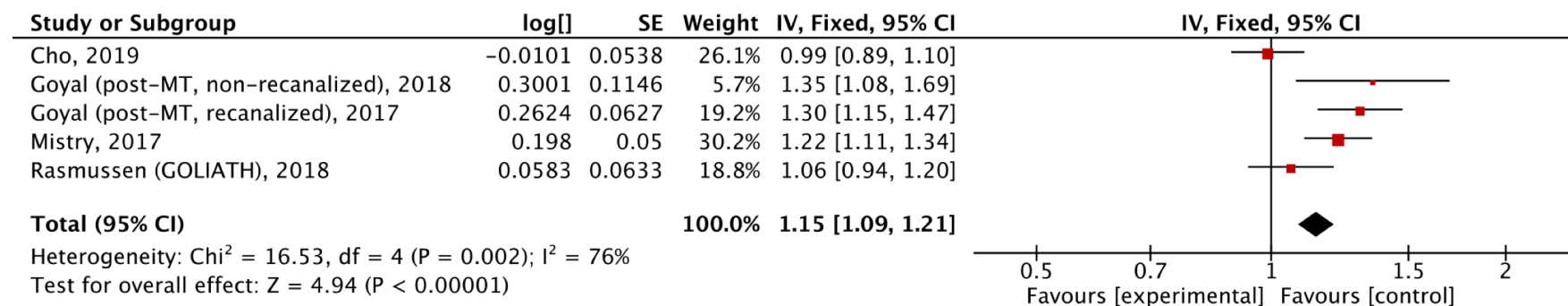


Figure S30. Forest plot evaluating the adjusted association of post-treatment A) maximum and B) mean systolic blood pressure levels with 3-month functional deterioration. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

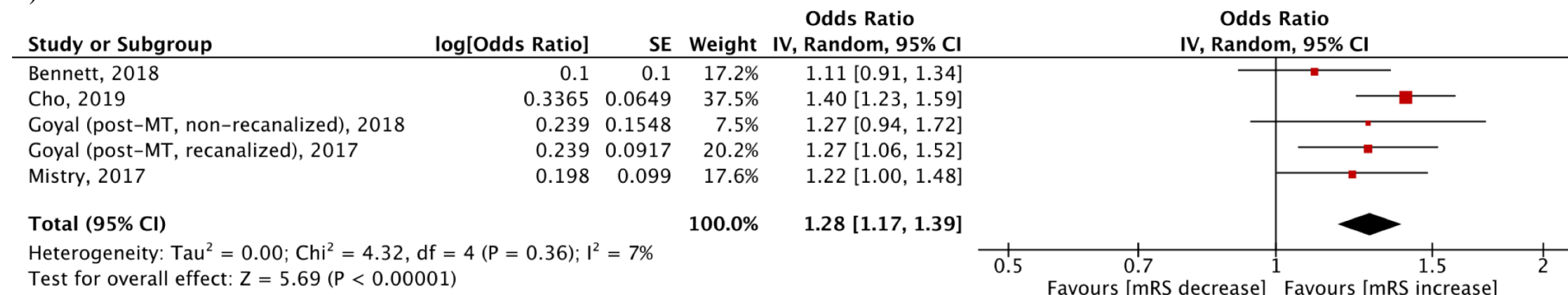
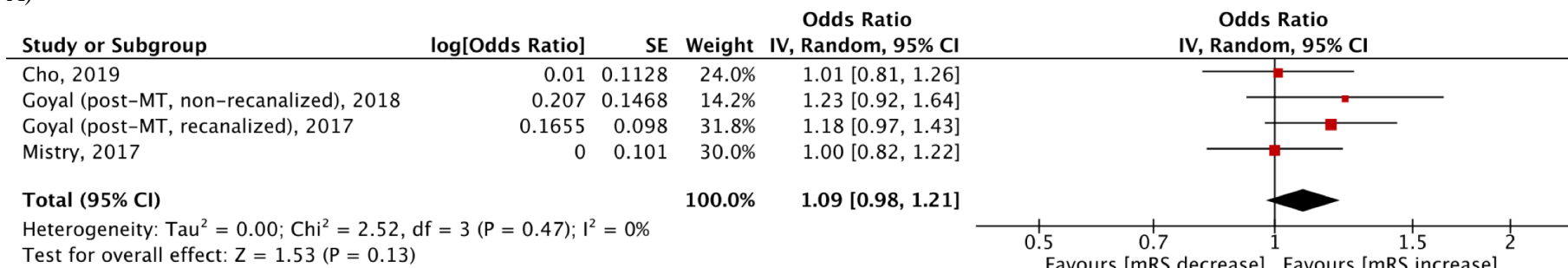


Figure S31. Forest plot evaluating the adjusted association of post-treatment A) maximum and B) mean diastolic blood pressure levels with 3-month functional deterioration. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

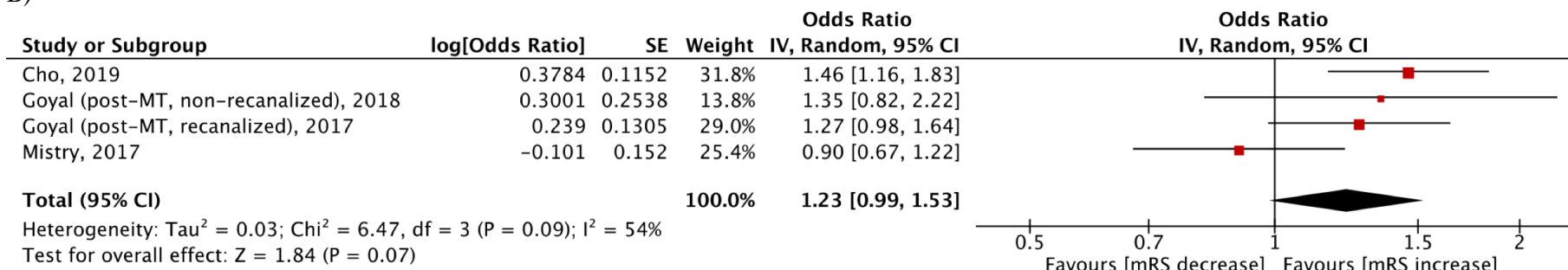
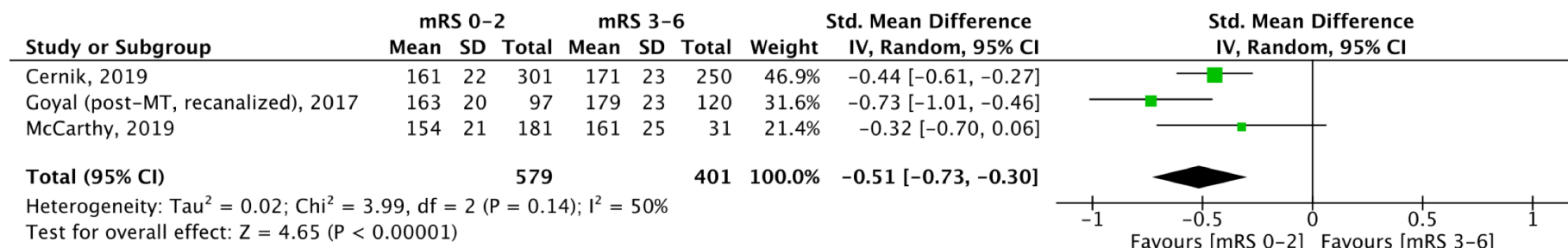


Figure S32. Forest plot evaluating the association of post-treatment maximum A) systolic blood pressure levels and B) diastolic blood pressure levels with 3-month functional independence among recanalized patients. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

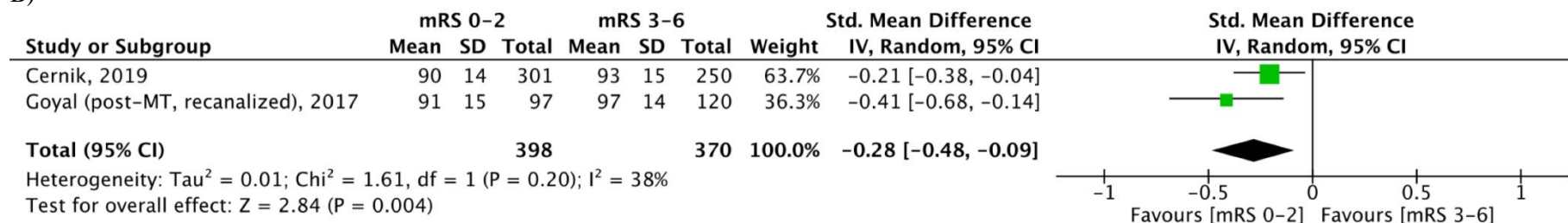
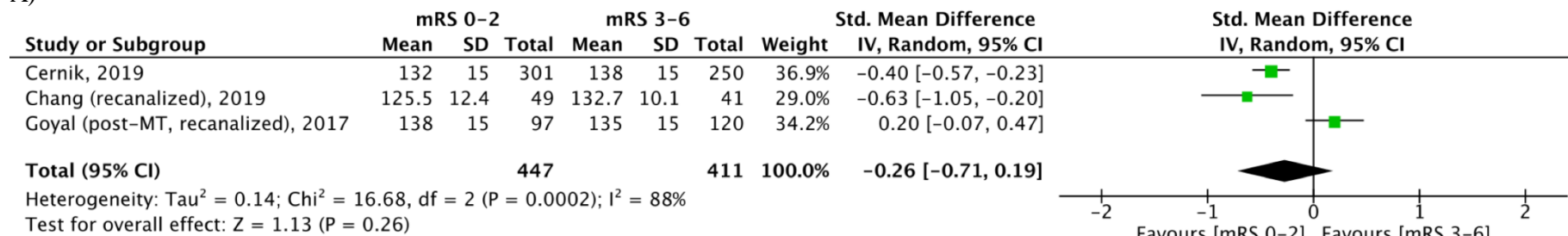


Figure S33. Forest plot evaluating the association of post-treatment mean A) systolic blood pressure levels and B) diastolic blood pressure levels with 3-month functional independence among recanalized patients. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

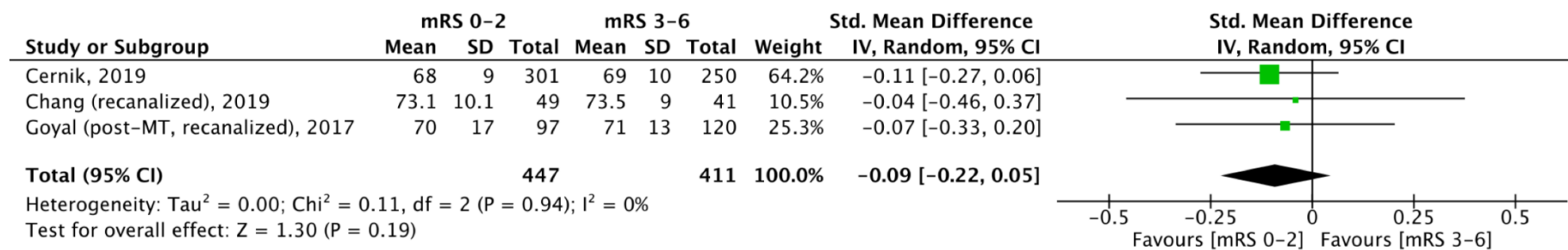
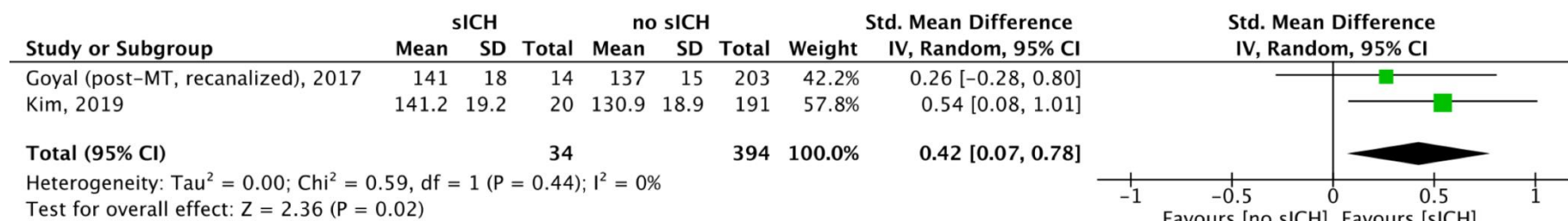


Figure S34. Forest plot evaluating the association of post-treatment mean A) systolic blood pressure levels and B) diastolic blood pressure levels with symptomatic intracranial hemorrhage among recanalized patients. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

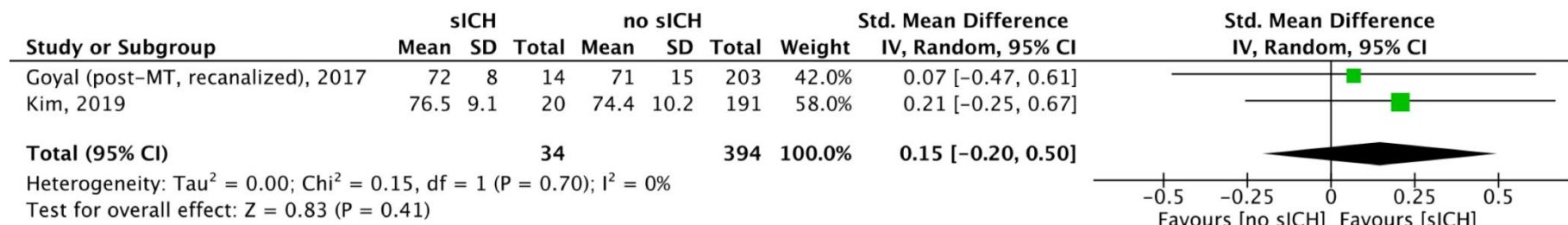
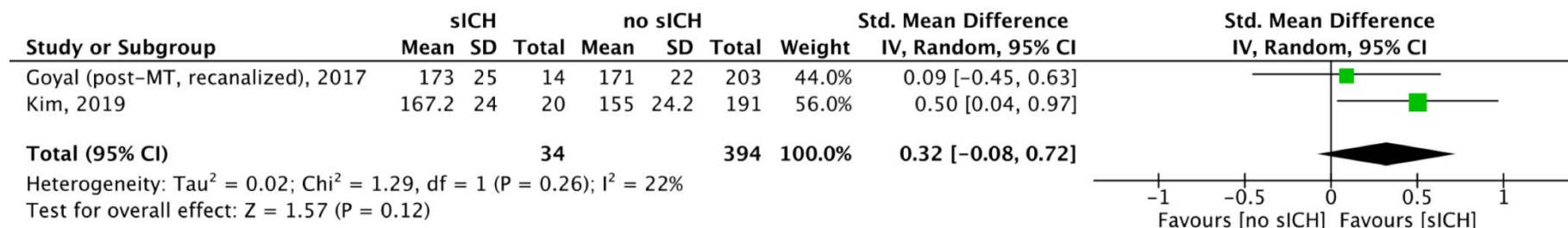


Figure S35. Forest plot evaluating the association of post-treatment maximum A) systolic blood pressure levels and B) diastolic blood pressure levels with symptomatic intracranial hemorrhage among recanalized patients. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

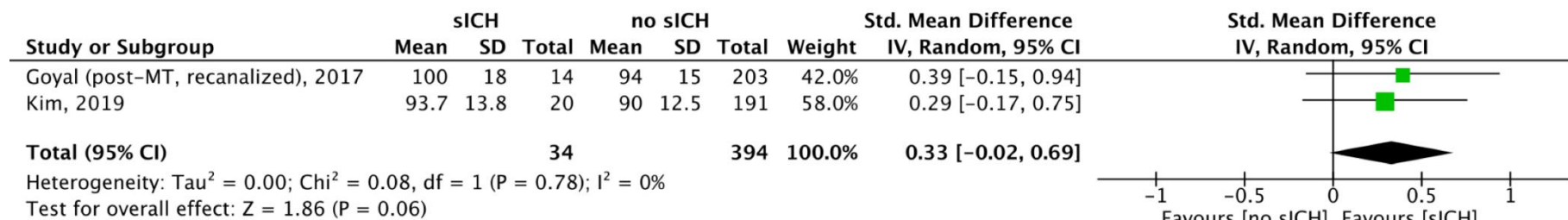
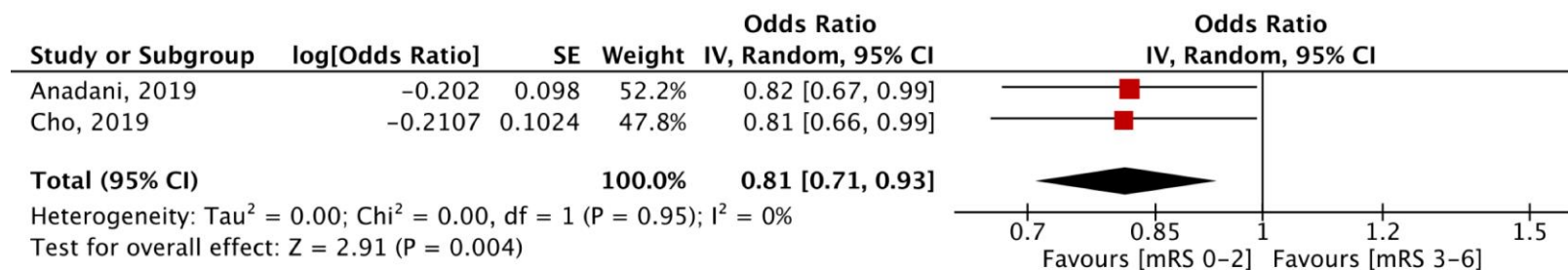


Figure S36. Forest plot evaluating the adjusted association of post-treatment A) mean systolic blood pressure levels and B) maximum diastolic blood pressure levels with 3-month functional independence among recanalized patients. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

A)



B)

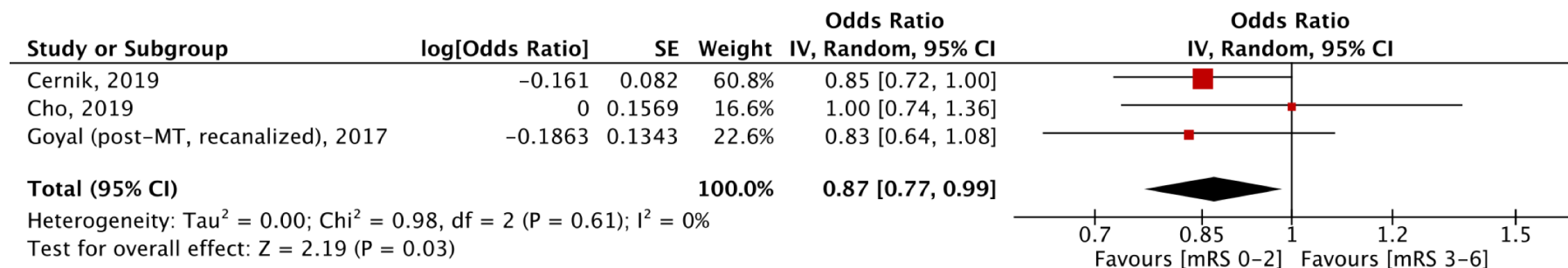


Figure S37. Forest plot evaluating the adjusted association of post-treatment maximum systolic blood pressure levels with 3-month functional independence among recanalized patients. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

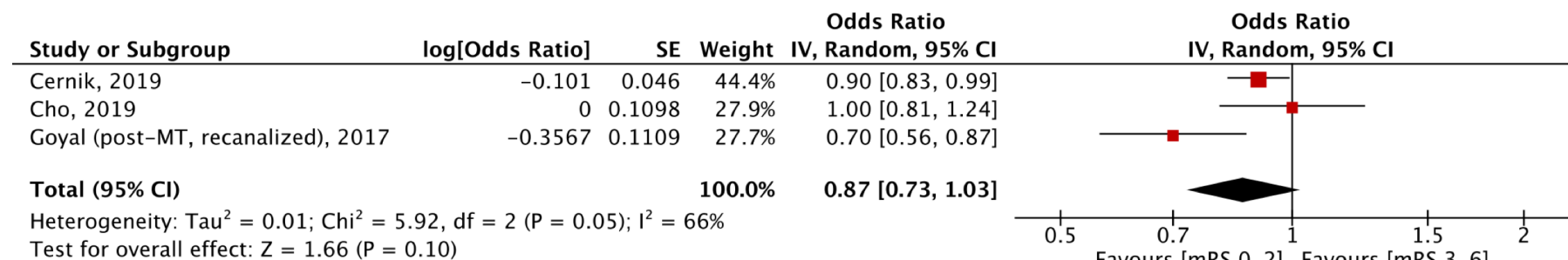


Figure S38. Forest plot evaluating the adjusted association of post-treatment maximum systolic blood pressure levels with 3-month mortality among recanalized patients. SE, standard error; MT, Mechanical Thrombectomy; IV, Inverse Variance; CI, confidence interval.

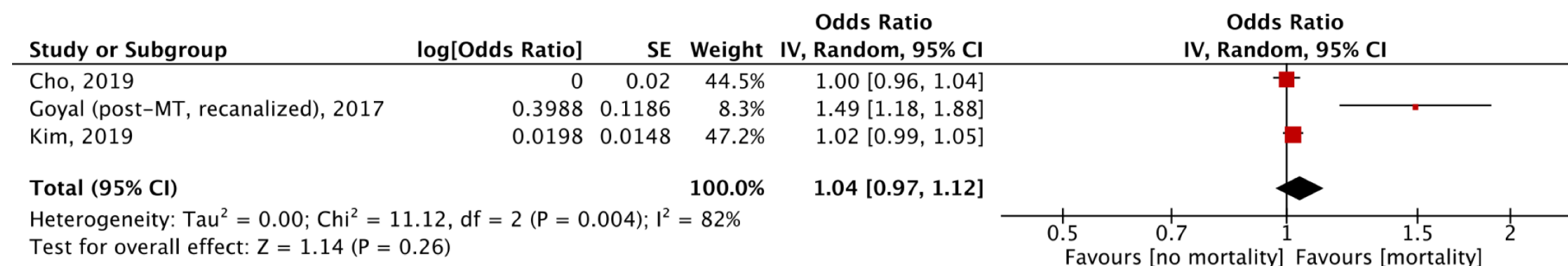
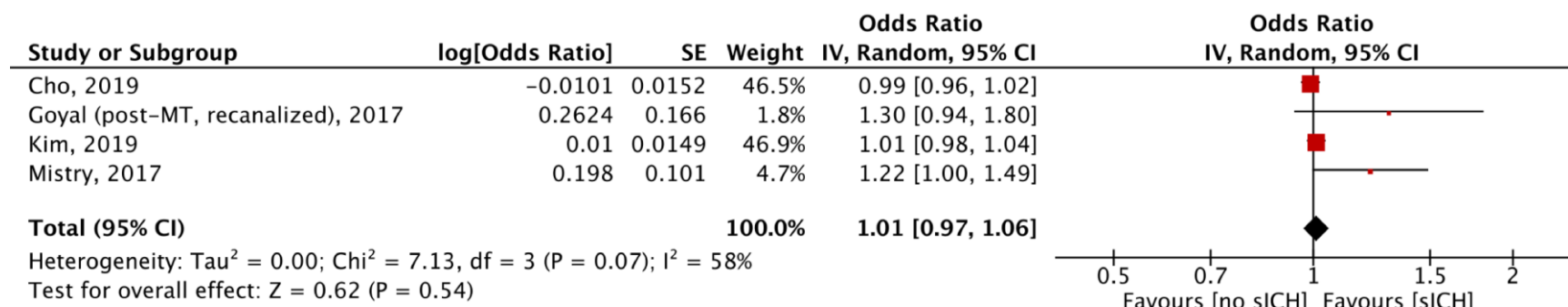


Figure S39. Forest plot evaluating the adjusted association of post-treatment A) maximum systolic blood pressure levels and B) mean systolic blood pressure levels with symptomatic intracranial hemorrhage among recanalized patients. SE, standard error; IV, Inverse Variance; CI, confidence interval.

A)



B)

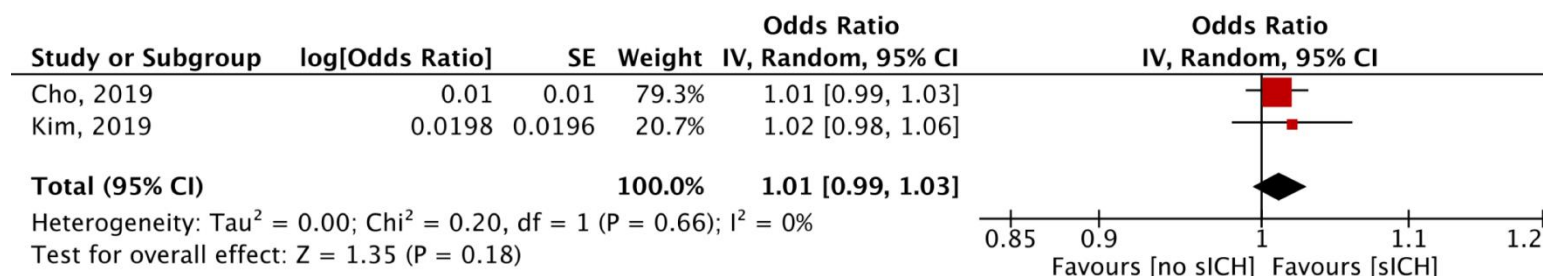


Figure S40. Funnel plot of the included studies evaluating the unadjusted associations of pre-treatment mean blood pressure variables with functional independence. SE, standard error; SMD, standardized mean difference; SBP, systolic blood pressure; DBP, diastolic blood pressure.

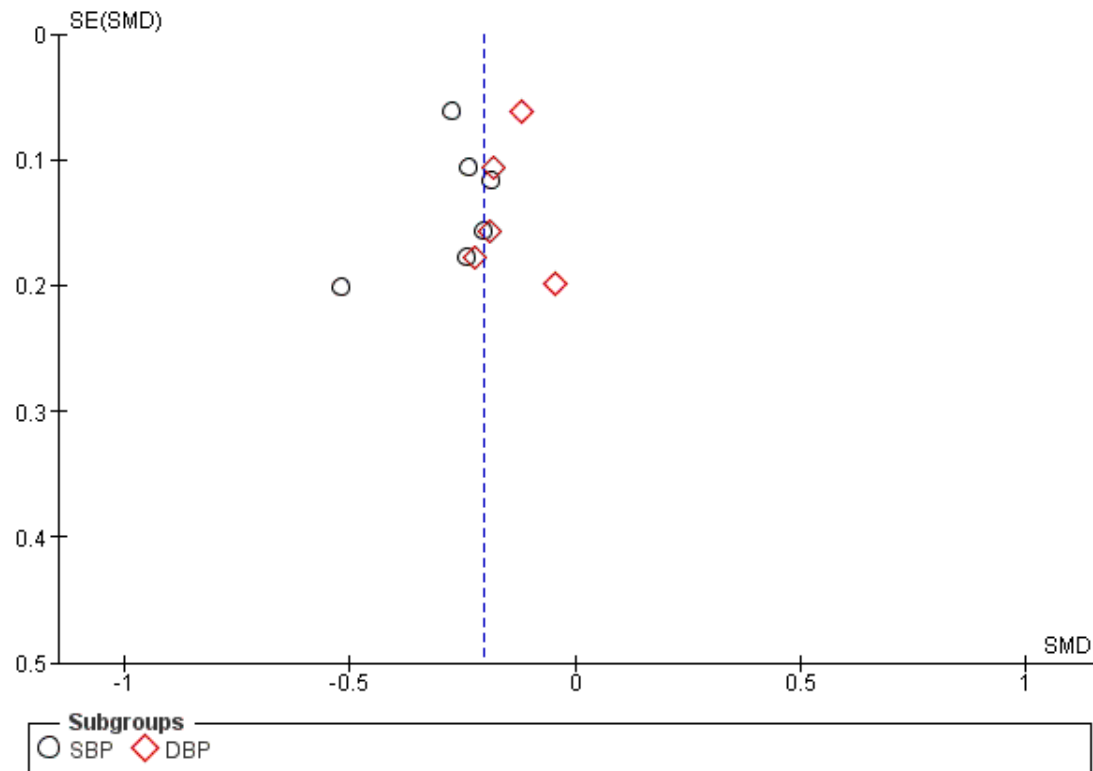


Figure S41. Funnel plot of the included studies evaluating the unadjusted association of post-treatment maximum blood pressure variables with functional independence. SE, standard error; SMD, standardized mean difference; SBP, systolic blood pressure; DBP, diastolic blood pressure.

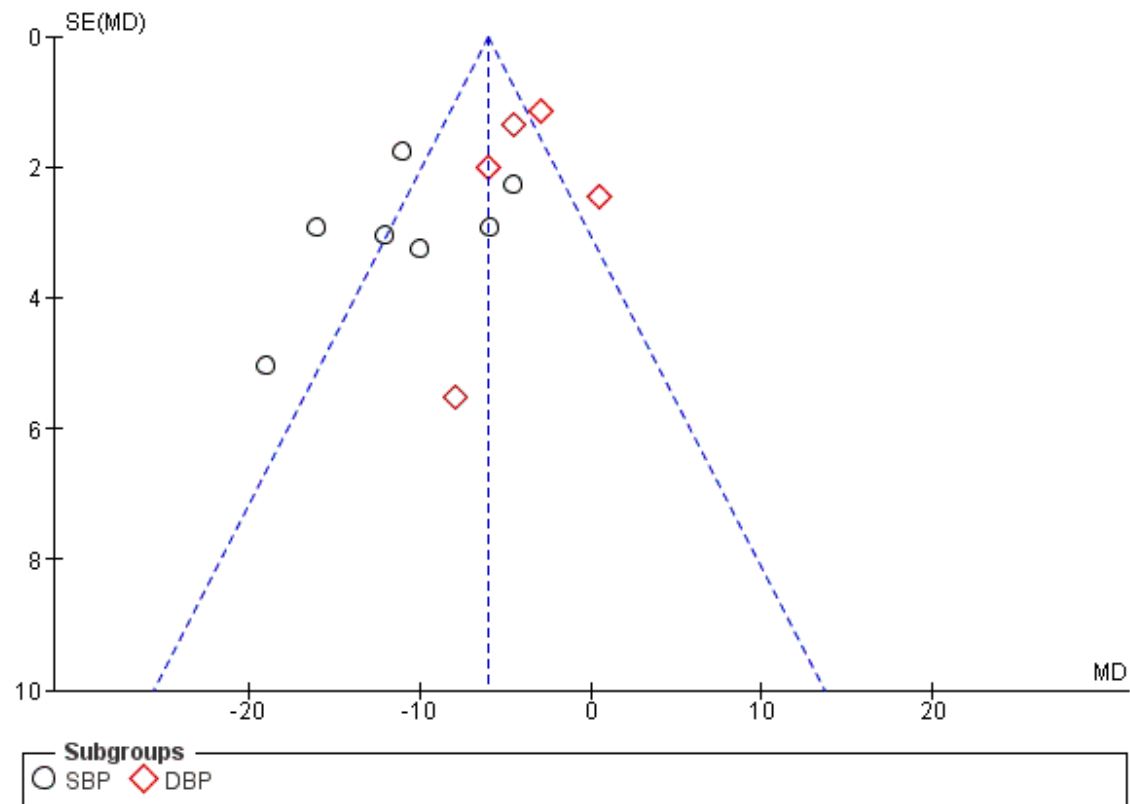


Figure S42. Funnel plot of the included studies evaluating the adjusted association of post-treatment maximum blood pressure variables with functional independence. SE, standard error; OR, odds ratio; SBP, systolic blood pressure; DBP, diastolic blood pressure.

