# **Supplemental Online Content**

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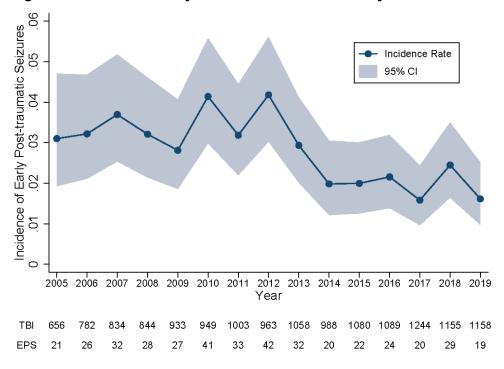
This supplemental material has been provided by the authors to give readers additional information about their work.

#### eMethods: Data Collection

All data was supplied by the Victorian State Trauma Outcomes Registry and Monitoring Group (VSTORM), following local ethics approval (MUHREC Project ID 18104). The VSTR is a population-based trauma registry collecting data about hospitalized patients with major trauma from all 138 trauma receiving health services within the state of Victoria, Australia (population 6.5 million people) (1). Patients are included using an opt-out process, where all eligible patients are included and provided with a letter and brochure detailing their inclusion, the purpose of the registry, and how to opt-out if they wish to do so. Verbal consent for telephone interviews are obtained at follow up. The registry has ethics approval from the Department of Health and Human Services Human Research Ethics Committee (HREC), Monash University HREC, and participating trauma-receiving hospitals. Existing registry data were used and patients were not contacted as part of this study.

eTable 1. Prevalence of EPS									
Category N=15,152 (%)									
No EPS	14,736	(97.3)							
All EPS	416	(2.7)							
- Seizure	389	(2.6)							
- Status epilepticus	27	(0.2)							

## eFigure. Incidence of Early Posttraumatic Seizures by Year from 2005-2019



eTable 2. Demographics and pre-existing illness									
	No EPS EPS								
Variable	N=14	4,736	N=	416	<i>p</i> -value	Corrected p-value <sup>^</sup>			
Age - yrs					<0.001				
Median (IQR)	60	(35-79)	69	(44-81)					
Sex (%)					0.82				
Male	10,172	(97.3)	285	(2.7)					
Female	4,564	(97.2)	131	(2.8)					
ARIA (%)					0.36				
Urban	13574	(97.3)	382	(2.7)					
Rural	681	(97.8)	15	(2.2)					
Missing	481	(96.2)	19	(3.8)					
IRSAD quintile (%)					0.16				
1st - most disadvantaged	2,248	(97.4)	60	(2.6)					
2nd	2,119	(96.8)	71	(3.2)					
3rd	2,783	(97.7)	66	(2.3)					
4th	3,166	(97.6)	78	(2.4)					
5th - least disadvantaged	3,951	(97.0)	122	(3.0)					
Missing	469	(96.1)	19	(3.9)					
Charlson Comorbidity Index weight (%)					<0.001				
0	7,146	(98.6)	103	(1.4)	<0.001	<0.001			
1	5,415	(97.2)	156	(2.8)	0.753	0.753			
2+	2,175	(93.3)	157	(6.7)	<0.001	<0.001			
History of alcohol misuse (%)					0.020				
No	13,019	(97.4)	352	(2.6)					
Yes	1,717	(96.4)	64	(3.6)					
History of drug misuse (%)					0.54				
No	14,423	(97.2)	409	(2.8)					
Yes	313	(97.8)	7	(2.2)					
History of mental health conditions (%)					0.71				
No	11,830	(97.2)	337	(2.8)					
Yes	2,906	(97.4)	79	(2.6)					

ARIA, accessibility and remoteness index of Australia; EPS, early posttraumatic seizure; IQR, interquartile range; IRSAD, index of relative socio-economic advantage and disadvantage.

^p-values from pairwise comparisons were corrected for multiple comparisons using Holm-Bonferroni method. All p values for categories compared to those not in that category.

eTable 3. Injury and ne	urosur	gery cha	aracte	ristics			
No EPS EPS							
Variable	N=14,736		N=416		<i>p</i> -value	Corrected p-value <sup>^</sup>	
Nature of injury (%)					<0.001		
Isolated TBI	6,228	(96.4)	234	(3.6)			
Multi-trauma	8,508	(97.9)	182	(2.1)			
Cause of injury (%)					<0.001		
Motor vehicle incident	2,165	(98.6)	31	(1.4)	<0.001	<0.001	
Motorcycle	820	(98.3)	14	(1.7)	0.05	0.26	
Bicycle	568	(98.1)	11	(1.9)	0.20	0.61	
Pedestrian	1,081	(97.7)	25	(2.3)	0.31	0.61	
Low fall <1m	6,078	(96.2)	237	(3.8)	<0.001	<0.001	
High fall	1,639	(97.8)	37	(2.2)	0.15	0.61	
Others	2,385	(97.5)	61	(2.5)	0.41	0.41	
Nature of Head Injury (%)							
Subdural hematoma	9,018	(96.4)	340	(3.6)	<0.001	<0.001	
Contusion	4,495	(97.1)	135	(2.9)	0.40	0.79	
Subarachnoid haemorrhage	5,553	(96.6)	193	(3.4)	<0.001	0.002	
Intraventricular haemorrhage	503	(95.8)	22	(4.2)	0.039	0.20	
Epidural haematoma	2,132	(97.9)	45	(2.1)	0.036	0.22	
Intracerebral haemorrhage	1,913	(97.0)	60	(3.0)	0.39	1.00	
Diffuse axonal injury	700	(96.8)	23	(3.2)	0.46	0.46	
Base of skull fracture	4,809	(97.9)	104	(2.1)	0.001	0.007	
Vault fractures	2,641	(97.7)	62	(2.3)	0.11	0.45	
AIS head					<0.001		
3	4,972	(98.8)	60	(1.2)			
4	5,402	(97.6)	134	(2.4)			
5-6	4,362	(95.2)	222	(4.8)			
Injury Severity Score (ISS)					<0.001		
Median (IQR)	21.0	(16-26)	25.0	(17- 26)			
Glasgow coma scale - head injury severity (%)					<0.001		
Mild (13-15)	9,948	(97.7)	237	(2.3)	<0.001	<0.001	
Moderate (9-12)	1,202	(96.1)	49	(3.9)	0.008	0.023	
Severe (≤8)	2,808	(96.3)	107	(3.7)	<0.001	0.001	
Missing	778	(97.1)	23	(2.9)			
Any neurosurgery (%)	2,084	(94.5)	121	(5.5)	<0.001		

Craniotomy	459	(93.1)	34	(6.9)	<0.001	<0.001
Burr hole	192	(91.4)	18	(8.6)	<0.001	<0.001
EVD/ICP	1,686	(94.5)	98	(5.5)	<0.001	<0.001

AIS, abbreviated injury scale; EPS, early posttraumatic seizure; EVD, external ventricular drain; ICP, intracranial pressure; IQR, interquartile range; TBI, traumatic brain injury.

<sup>^</sup>p-values from pairwise comparisons were corrected for multiple comparisons using Holm-Bonferroni method. All p values for categories compared to those not in that category.

eTable 4. Health services and vital characteristics								
Variable	No	EPS	E					
Variable	N=1	4,736	N:	<i>p</i> -value				
Outcome hospital (%)					<0.001			
Major	12,082	(82)	375	(90)				
Others	2,654	(18)	41	(10)				
Time to primary centre - hrs	n=14	4,384	n=	=403	0.003			
Median (IQR)	1.62	(1.08-3.80)	1.77	(1.13-14.5)				
Time to head CT - hrs	n=1:	2,865	n=358		0.74			
Median (IQR)	3.58	(2.33-8.50)	3.58	(2.10-17.3)				
Heart rate - beats/min	n=14	4,249	n=401		0.71			
Median (IQR)	85	(72-100)	85	(73-100)				
Blood pressure - mmHg	n=14	4,220	n=400		<0.001			
Median (IQR)	140	(125-160)	147	(130-166)				
Hypotension - bp≤90 mmHg (%)					0.14			
No	13,743	(93)	392	(94)				
Yes	477	(3)	8	(2)				
Missing	516	(4)	16	(4)				
Respiratory rate - breaths/min	n=12,939 n=359		=359	0.75				
Median (IQR)	18	(16-20)	18	(16-20)				
bp, blood pressure; CT, computed tomogr	raphy; EPS, ear	ly posttraumatic se	eizure; IQR, inte	erquartile range.				

eTable 5. Hospital	morbidi	ity and m	ortality			
	No EPS N=14,736		EPS			
Variable			N	N=416		Corrected <i>p</i> -value <sup>^</sup>
ICU admission					<0.001	
No	9,324	(63)	154	(37)		
Yes	5,412	(37)	262	(63)		
ICU ventilated	n=	5,412	n	1=262	<0.001	
No	1,129	(21)	32	(12)		
Yes	4,283	(79)	230	(88)		
ICU length of stay - days	n=5,394		n=262		<0.001	
Median (IQR)	5	(2-11)	8	(4-14)		
ICU ventilated length of stay - days	n=4,281		n=230		<0.001	
Median (IQR)	4	(1-9)	6	(2-12)		
Hospital length of stay - days	n=1	4,394	n=403		<0.001	
Median (IQR)	7	(4-13)	17	(9-29)		
In-Hospital Mortality*					<0.001	<0.001
No	12,416	(84)	323	(78)		
Yes	2,320	(16)	93	(22)		
Discharge destination					<0.001	
Home	5,514	(37)	36	(9)	<0.001	<0.001
Rehabilitation	5,529	(38)	232	(56)	<0.001	<0.001
Others	1,372	(9)	55	(13)	<0.001	<0.001
Missing	1	(0.01)	0	(0)		

EPS, early posttraumatic seizure; ICU, intensive care unit; IQR, interquartile range.

<sup>^</sup>p-values from pairwise comparisons were corrected for multiple comparisons using Holm-Bonferroni method. \*1 result missing for EPS group.

eTable 6. Follow-up outcomes among patients survived the initial TBI admission and due for 24-month follow-up								
	No	EPS	E					
Variable	n=11	1,071	n=	p-value^				
Glasgow outcome scale at 24 months post-injury					<0.001			
Good recovery	2,686	(24)	40	(13)				
Moderate disability	2,384	(22)	45	(14)				
Severe disability	1,765	(16)	80	(25)				
Vegetative state	21	(0.2)	3	(1)				
Deceased	1,462	(13)	68	(22)				
Unable to determine/missing	2,753	(25)	75	(24)				
PTE by 24 months post- injury					<0.001			
No	1,306	(12)	10	(3)				
Yes	314	(3)	35	(11)				
Incomplete#	492	(4)	18	(4)				
Missing	8,959	(81)	260	(81)				
Use of ASM within 24 months					<0.001			
No	2,335	(21)	22	(7)				
Yes	543	(5)	46	(15)				
Incomplete#	1,287	(12)	23	(7)				
Missing	6,906	(62)	220	(71)				

ASM, antiseizure medication; EPS, early posttraumatic seizure; IQR, interquartile range.

#Patients did not report development of posttraumatic epilepsy or use of ASM at 6- and/or 12-month follow-up, but missing 24-month follow-up.

### eReference

1. Cameron PA, Finch CF, Gabbe BJ, Collins LJ, Smith KL, McNeil JJ. Developing Australia's first statewide trauma registry: what are the lessons? *ANZ J Surg*. 2004 Jun 8;74(6):424–8.

<sup>^</sup>p-value from complete case analysis, i.e. excluded missing or incomplete data.