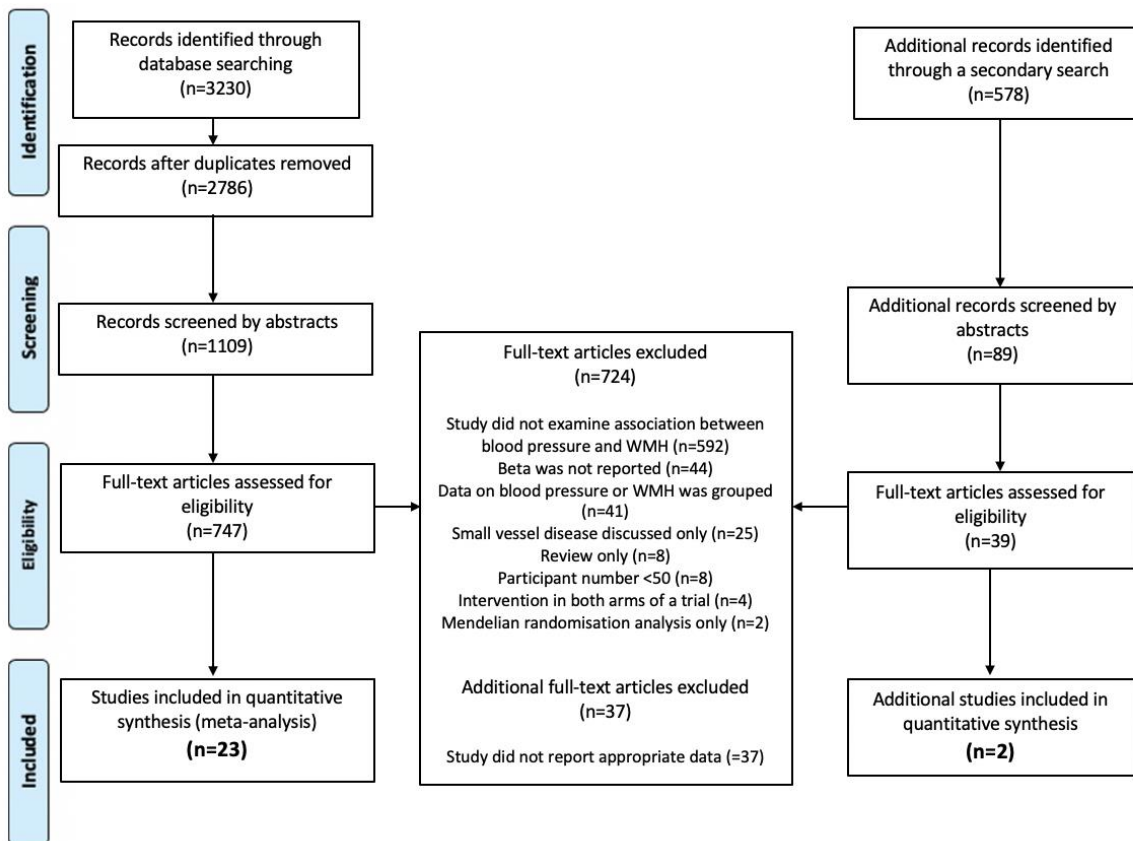


**Consistency of associations of systolic and diastolic blood pressure with white matter  
hyperintensities: a meta-analysis**

**Imogen Wilkinson BA<sup>†</sup>, Alastair John Stewart Webb<sup>†</sup> DPhil**

## Supplementary Figure 1. Prisma Flow Chart



**Supplementary Table 1. Characteristics of included studies**

Study	N	Mean Age	SD of age	% Male	Mean WMHV (cm <sup>3</sup> )	Median WMHV (cm <sup>3</sup> )
Shi	56	67.8	8.3	40.0	-	10.74
Cheng	60	31.7	6.3	32.0	0.174	-
Wolfson	67	85.8	3.8	39.0	n/a	n/a
White	71	82.1	3.9	40.0	13.9	-
Vesperman	107	64.2	5.9	34.6	2.9	-
Shimizu	133	69.7	3.2	48.0	6.5	-
Alkan	164	60.1	7.9	40.9	0.98	-
White, Jalil	199	81.2	4.1	45.7	n/a	n/a
Sander	227	n/a	n/a	n/a	9.3	-
Heye	264	66.9	11.8	35.0	n/a	n/a
Shokouhi	265	64.0	n/a	35.0	n/a	n/a
Lane	468	70.7	0.7	51.1	3.1	-
Maillard	579	39.2	8.4	40.4	1.7	-
Schwartz	610	62.9	n/a	35.4	-	6.8
Cui	663	68.6	5.7	43.4	-	2.75
Fuhrmann	667	54.6	18.5	n/a	2.15	-
Aribisala	694	69.6	0.8	53.0	0.012	-
Cloonan	809	65.6	14.7	53.0	-	6.25
Gutierrez	1009	64.0	8.0	41.0	n/a	n/a
Tsao	1118	61.0	9.0	44.0	n/a	n/a
King	1270	51.4	9.4	44.3	1.6	-
Godin	1391	72.0	n/a	39.3	5.4	-
Jeerakathil	1814	61.7	9.4	47.0	0.96	-
Lampe	1825	52.5	13.2	43.6	2.835	-
Wartolowska	37026	55.3	7.5	47.0	-	2.796

**Supplementary Table 2. Quality assessment of factors that differed between included studies. 0 = no; 1 = yes.**

Study	Question 3	Question 5	Question 6	Question 10	Question 12	Question 13	Total
Alkan	0	0	1	0	0	1	2
Aribisala	0	0	1	1	0	0	2
Cheng	1	0	0	0	0	1	2
Cloonan	0	0	1	0	0	1	2
Cui	1	0	1	0	1	1	4
Fuhrmann	1	0	1	0	0	0	2
Godin	1	0	1	1	0	0	3
Gutierrez	0	0	1	1	0	0	2
Habes	0	0	0	1	0	0	1
Jeerakathil	0	0	1	0	1	1	3
King	0	0	1	0	0	1	2
Lampe	0	0	1	0	0	0	1
Lane	0	0	1	1	0	1	3
Maillard	0	0	1	0	0	1	2
Sander	1	0	0	0	1	1	3
Schwartz	0	0	1	1	0	1	3
Shi	0	1	0	0	1	1	3
Shimizu	0	0	0	0	0	1	1
Shokouhi	0	0	1	1	0	0	2
Tsao	0	0	1	0	1	1	3
Vesperman	0	0	0	0	0	1	1
Wartolowska	0	0	1	1	0	1	3
White	1	0	1	1	1	0	4
White, Jalil	0	0	1	0	0	0	1
Wolfson	1	0	1	1	1	0	4

**Question 3:** Was the participation rate of eligible persons at least 50%?

**Question 5:** Was a sample size justification, power description or variance and effect estimates provided?

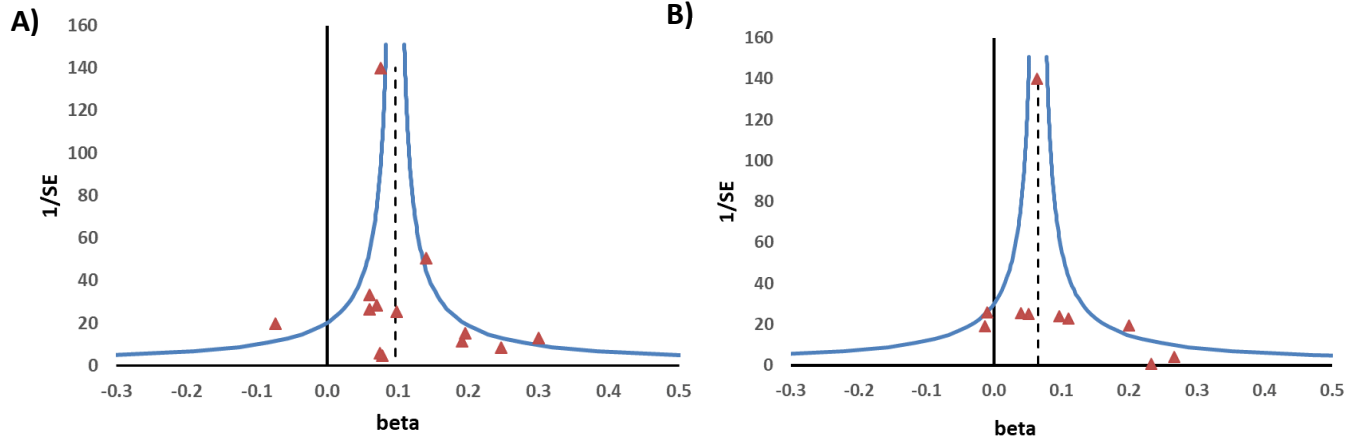
**Question 6:** For the analyses in this paper, were the exposure(s) of interest measured prior to the outcome(s)?

**Question 10:** Was the exposure(s) assessed more than once over time?

**Question 12:** Were the outcome assessors blinded to the exposure status of the participants?

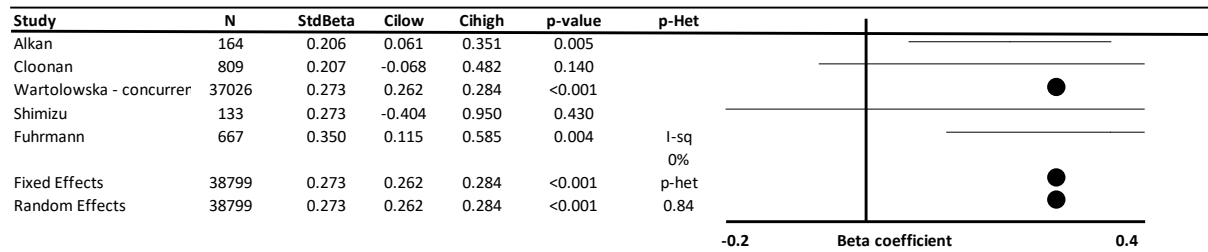
**Question 13:** Was loss to follow-up after baseline 20% or less?

**Supplementary figure 2. Funnel Plots for standardised beta-coefficients for systolic (A) and diastolic (B) blood pressure with white matter hyperintensity volume. SE = standard error, blue lines represent upper and lower confidence limits.**

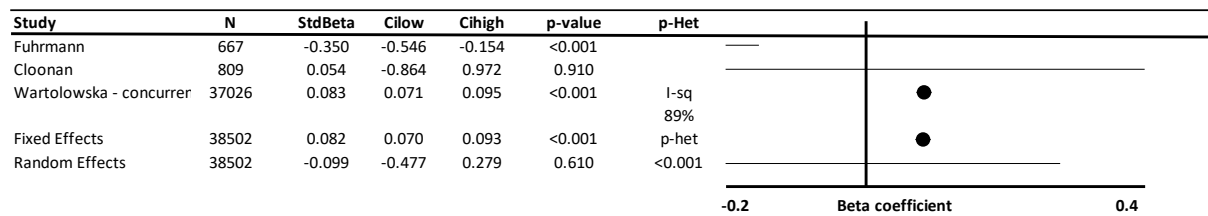


**Supplementary figure 3. Unadjusted, standardised associations between SBP and DBP with WMHV.** Results are combined by fixed and random effects meta-analysis, weighted by the inverse variance, with heterogeneity presented as  $I^2$  statistics ( $I^2$ ), and the p-value for heterogeneity (p-het) determined by chi-squared test. StdBeta = standardised beta; N= number;

**A) SBP**

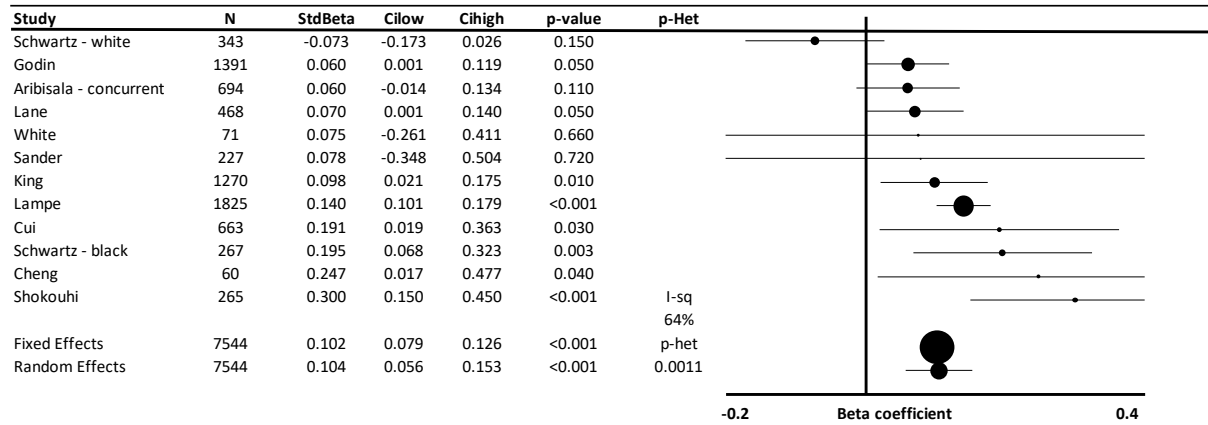


**B) DBP**

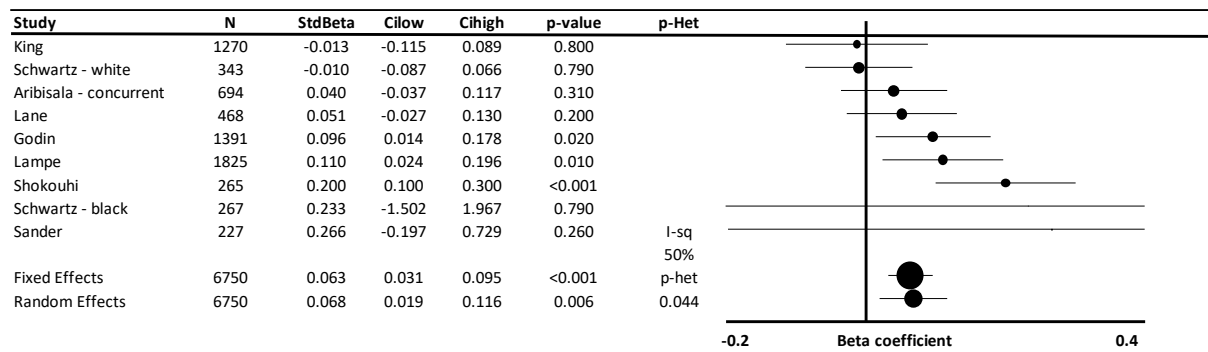


**Supplementary Figure 4. Standardised associations between SBP or DBP with WMH, excluding the largest study.** Results are combined by fixed and random effects meta-analysis, weighted by the inverse variance, with heterogeneity presented as  $I^2$  statistics( $I$ -sq), and the p-value for heterogeneity (p-het) determined by chi-squared test  
 StdBeta = standardised beta; N= number;

**A) SBP**

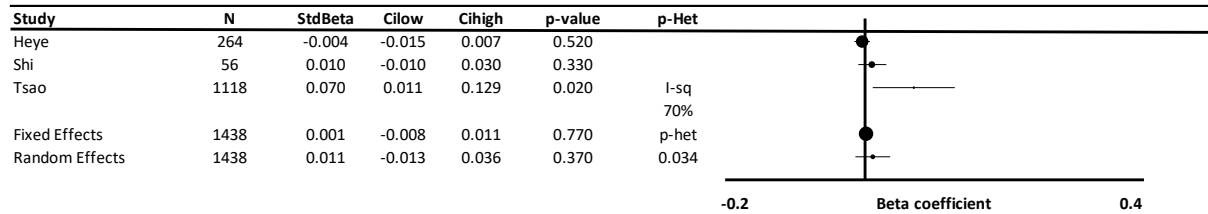


**B) DBP**

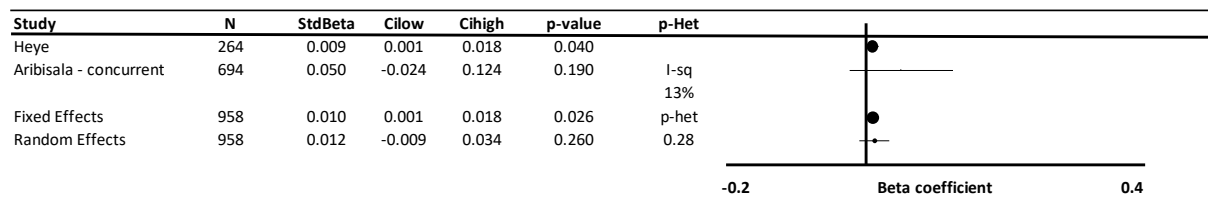


**Supplementary Figure 5. Association between mean blood pressure (MBP) or pulse pressure (PP) with white matter hyperintensity volume.** Results are combined by fixed and random effects meta-analysis, weighted by the inverse variance, with heterogeneity presented as  $I^2$  statistics( $I$ -sq), and the p-value for heterogeneity (p-het) determined by chi-squared test StdBeta = standardised beta; N= number;

**A) MBP**



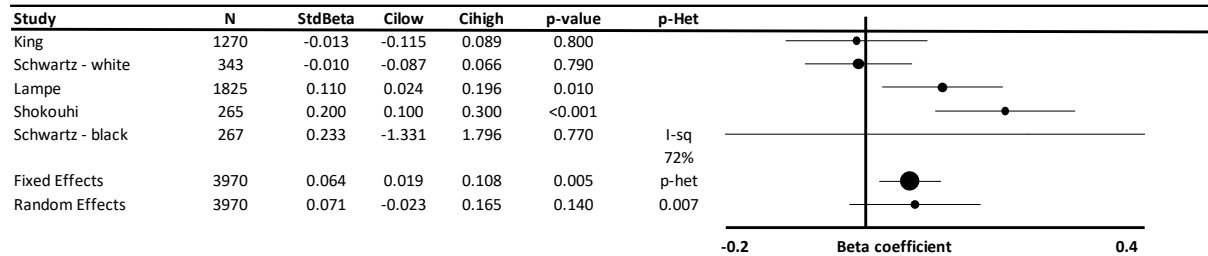
**B) PP**



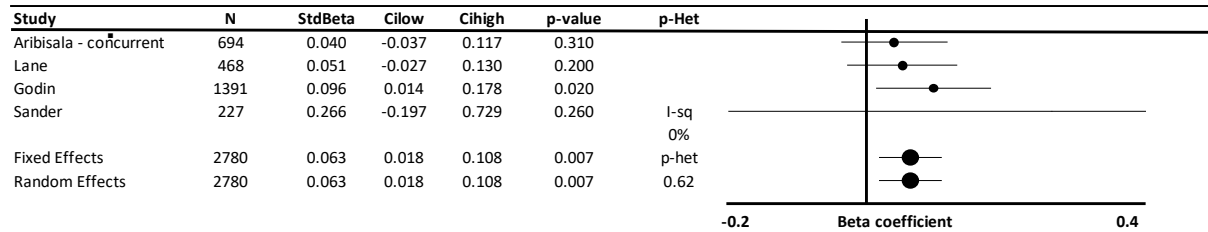


**Supplementary Figure 6. Associations between DBP and WMH in studies with a mean age of less than 65 compared to greater than 65.** Results are combined by fixed and random effects meta-analysis, weighted by the inverse variance, with heterogeneity presented as  $I^2$  statistics (I-sq), and the p-value for heterogeneity (p-het) determined by chi-squared test. StdBeta = standardised beta; N= number;

**A) Studies in patients with a mean age <65**

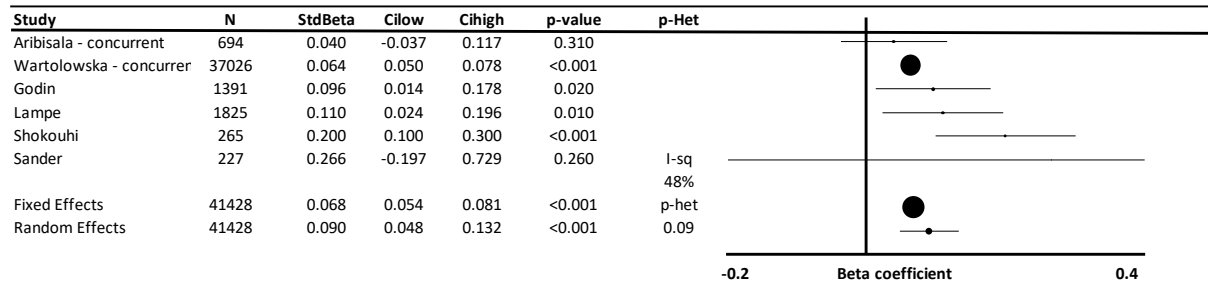


**B) Studies in patients with a mean age >65**

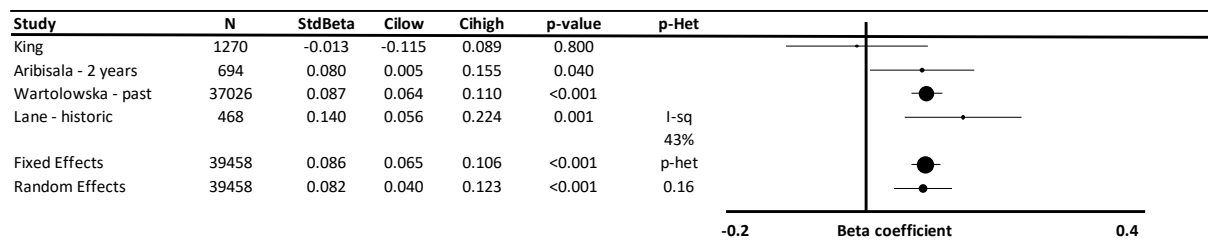


**Supplementary Figure 7. Associations between DBP and WMH, stratified by time of exposure.** Results are combined by fixed and random effects meta-analysis, weighted by the inverse variance, with heterogeneity presented as  $I^2$  statistics (I-sq), and the p-value for heterogeneity (p-het) determined by chi-squared test. StdBeta = standardised beta; N= number;

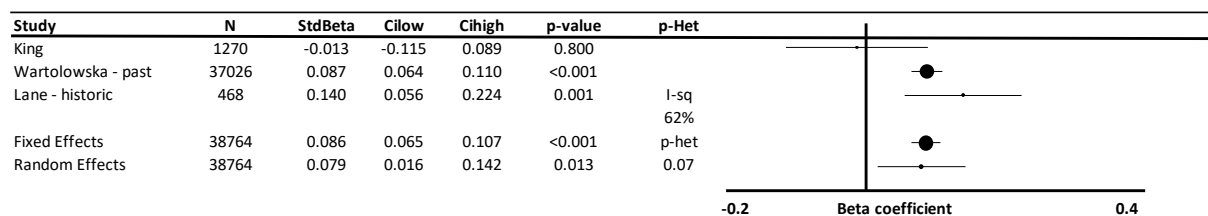
### A) Concurrent DBP



### B) DBP measured > 2 years previously



### C) DBP measured >5 years previously



## Search strategy

### 1. Primary Search

((“white matter hyperintensities” OR “leukoaraiosis” OR “leukoencephalopath\*” OR “arteriosclerotic encephalopathy” OR “white matter hyperintensity” OR “white matter lesion\*” OR “white matter disease” OR “white matter changes” OR “white matter damage” OR “ischaemic white matter disease” OR “binswanger disease” OR “hypertensive arteriopathy” OR “small vessel disease” OR “cerebral microangiopathy”) AND (“blood pressure” OR “systolic” OR “diastolic” OR “arterial pressure” OR “pulse pressure” OR “pulse wave velocity” OR “pulse transit time” OR “pulse wave transit time” OR “BP” OR “ABP” OR “pulsatile pressure” OR “cerebral blood flow” OR “cerebral blood velocity”))

### 2. Secondary Search Strategy

(“*Study Name*”) AND (“MRI” OR “Magnetic Resonance”)

Eg: (“Rotterdam Study” OR “Rotterdam Scan Study”) AND (“MRI” OR “Magnetic Resonance”)

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