

Table 1- Supplementary material- Literature Review of demographic of patient, imaging and management of reported cases of Eagle Syndrome

Case Report	Demographics	Presentation	Acute Imaging findings	Definitive Management
Selvadurai et al 2021	17 Male- no comorbidities	L arm and leg hemiparesis. One recurrent episode.	MRI head/ CTA- R ICA Dissection with R MCA infarct.	Intravenous thrombolysis, oral anticoagulation and unilateral external approach styloidectomy
Xhaxho et al 2021	64 Male- no comorbidities	LOC, headache, R hemiparesis	CTA- L ICA Dissection + temporal infarct	Medical stroke management. Delayed Styloidectomy
Mattioli et al 2021	56 Male- hypertension, metabolic syndrome	LOC, confusion, blurred vision, dysarthria	CTA- L ICA dissection	Oral anticoagulant therapy
Brassart et al 2020	53 Female- hyperlipidaemia	L hemiplegia, tinnitus, palpitations	CT head- R frontal ischaemia. CTA- R ICA dissection and L carotid pseudoaneurysm	Oral anticoagulation therapy
Horio et al 2020	46 Female- no comorbidities	Reduced consciousness, R hemiparesis, aphasia	CT head- L Frontal infarct. MRA- Bilateral ICA Dissection	Intravenous Thrombolysis, Oral antiplatelet therapy. Delayed Styloidectomy.
Duarte-Celada et al 2021	43 Female- no comorbidities	Headache, Horner's syndrome	MRA- L cervical ICA Dissection	Bilateral endovascular stenting, antiplatelet therapy. Elective Bilateral Styloidectomy
Ikenouchi et al 2020	30 Male- Ehlers-Danlos Syndrome	Sudden L hemiparesis	MRA- Old L ICA dissection, new R ICA dissection	Oral antiplatelet therapy
Baldino et al 2020	41 Female- rheumatic fever, recurrent migraine, tonsillectomy	Not documented	CTA- R ICA dissection with wide-necked false lumen aneurysm	Endovascular stent and oral antiplatelet therapy
Baldino et al 2020	48 Male- previous tonsillectomy, hernia repair	Acute R hemiparesis	CTA- L ICA dissection distal to carotid bulb	Anticoagulant therapy. Delayed external approach Styloidectomy. Lifelong Antiplatelet therapy.
Baldino et al 2020	45 Male- no comorbidities	L amaurosis fugax and intense headache	CTA- R ICA small intimal flap, L ICA dissection with false lumen thrombosis.	Anticoagulant therapy. Bilateral external approach Styloidectomy. Lifelong Antiplatelet therapy
Baldino et al 2020	49 Male- no comorbidities	Transient aphasia, tonsillar fossae pain, new hypertension	CTA- Bilateral cervical ICA dissection	Anticoagulation- Bilateral external approach Styloidectomy. Life-long Anti-platelet therapy.
Baldino et al 2020	56 Male- hypertension	Transient LOC, and confusion	CTA- L cervical ICA dissection	Anticoagulation therapy. Await Styloidectomy.
Galletta et al 2019	53 Male- no comorbidities	L hemiplegia, dysarthria, facial palsy	MRA- bilateral ICA/ MCA thrombus. CTA bilateral ICA dissections	Endovascular thrombectomy. Partial extra-oral approach removal of C1 process

Torikoshi et al 2019	46 Male- no comorbidities	Reduced consciousness, L hemiplegia,	MRI head- R frontal and parietal infarct. MRA/ CTA- Bilateral extracranial ICA dissection	Bilateral Endovascular stenting. Bilateral external approach Styloidectomy. Lifelong Antiplatelet therapy.
Zammit et al 2018	45 Male- no comorbidities	R headache, tongue paraesthesia and Horner's.	MRI head /CTA- bilateral ICA dissection with R subacute MCA infarct	Oral antiplatelets only.
Jelodar et al 2018	40 male- recurrent ischaemic stroke	R hemi paresis and dysphasia.	CTA- bilateral ICA dissection	Antiplatelet therapy. Bilateral external approach Styloidectomy.
Smoot et al 2017	60 Male- diabetes, hypertension, childhood seizures	R headache, L hemiparesis, dysarthria	MRI head/ CTA- R ICA dissection with multiple MCA microinfarcts.	Anticoagulation and R ICA stenting.
Hebant et al 2017	57 Male- no comorbidities	Dysphasia	MRI head/ CTA- L ICA dissection and L MCA infarct	Oral antiplatelet therapy only
Subedi et al 2017	47 Female- diet controlled diabetes	Slurred speech and L arm hypaesthesia	MRI / CTA- R ICA dissection and hyperacute R MCA infarct.	Intravenous thrombolysis, balloon angioplasty. Awaiting surgical intervention
Jo et al 2017	38 Female- no comorbidities	L headache and perioral numbness	CTA- R ICA dissection. No infarct on MRI.	Oral antiplatelet therapy. Unilateral external approach Styloidectomy
Aydin et al 2015	57 Female- no comorbidities	L hemiparesis, hemifacial paralysis and dizziness	MRI head / CTA- R ICA dissection and R MCA infarct.	Oral anticoagulation only.
Ogura et al 2015	80 Male- hypertension, prostate hypertrophy	Odynophagia	CTA- L ICA dissection	Unilateral external approach Styloidectomy
Ogura et al 2015	55 Male- no comorbidities	L hemiparesis	MRI head/ CTA- R ICA dissection and R MCA infarct	Endovascular thrombectomy, R ICA stenting, anticoagulation, antiplatelet therapy.
Ogura et al 2015	55 Male- no comorbidities	L visual field loss.	MRI head / CTA- bilateral ICA dissection and multiple small L cerebral infarcts	Intravenous anticoagulation. Bilateral external approach Styloidectomy and ICA stenting
Yamamoto et al 2013	51 Male- no comorbidities	R orbital pain and Horner syndrome	MRI head/ MRA- R ICA dissection	Antiplatelet therapy only.
Sviesson et al 2013	38 Male- no comorbidities	R hemiparesis, dysarthria and bifrontal headache.	CT head/CTA- L dense MCA sign and ICA dissection	Intravenous thrombolysis, thombectomy and ICA stenting. Unilateral external approach Styloidectomy.
Sviesson et al 2013	41 Female- no comorbidities	R sudden onset headache.	CTA- R ICA dissection/ pseudo-aneurysm	Anticoagulation therapy only.

Vodopivec et al 2013	53 Male- no commodities	Occipital headache and sixth nerve palsy	CTA/ MRA- bilateral cervical ICA dissection.	Not included in report.
O'Hara et al 2012	43 Male- no comorbidities	Headache and dysarthria	MRI head/ CTA- R ICA dissection, no cerebral infarct	Intravenous anticoagulation and oral antiplatelets.
Todo et al 2012	57 Male- no comorbidities	Dysphasia	CTA- bilateral ICA dissections	Oral anticoagulation, Thrombectomy and carotid artery stent.
Razak et al 2014	41 Male-no comorbidities	L hemiparesis and L visual field deficit	MRI head/ CTA- R ICA dissection and R MCA infarct	Intra-arterial thrombolysis, partial ICA recanalization. Unilateral external approach Styloidectomy.
Cano et al 2010	45 Female- ulcerative colitis	L orbital pain, R hemiparesis and dysarthria.	MRI head /CTA- L ICA dissection	Oral anticoagulation only.
Faivre et al 2009	60 Male- no comorbidities	L hemiparesis and frontal headache	MRI head/CTA- R ICA dissection and R MCA infarct	Intravenous thrombolysis, oral anticoagulation. Planned Styloidectomy
Soo et al 2004	41 Female- no comorbidities	Transient visual field loss.	MRI head/ MRA- R ICA dissection and no cerebral infarct	Oral anticoagulation only.
Zuber et al 1999	43 Male- no comorbidities	Transient visual field loss and dysarthria	CTA- L ICA dissection.	Oral anticoagulation only.
<i>L- Left, R- Right, LOC- Loss of consciousness, CT- Computerised Tomography, MRI- Magnetic Resonance Imaging, CTA- Computer Tomography Angiography, MRA- Magnetic Resonance Angiography, ICA- Internal Carotid Artery, MCA- Middle Cerebral Artery</i>				