Supplementary Table 1.

	BEST (2019)	BASICS (2021)	ATTENTION (2022)	BAOCHE (2022)
Trial design	Multicenter, prospective, open-label, randomized, controlled, blinded- endpoint 1:1	Multicenter, prospective, open-label, randomized, controlled, blinded- endpoint 1:1	Prospective, open-label, randomized, blinded outcome assessment 2:1	Multicenter, prospective, open-label, randomized, controlled, blinded- endpoint 1:1
Main inclusion criteria	 BAO (CTA/MRA/DSA), Age 18 years or older, Pre-stroke mRS score 0-2, no ICH, significant cerebellar mass effect, acute hydrocephalus, or extensive bilateral brainstem ischemia (CT/MRI), Symptom onset to randomization: 8 hours. 	mass effect; or acute hydrocephalu evident on neuroimaging,Symptom onset to randomization:	score 0-2, PC-ASPECTS \geq 6, • If age > 80 years: pre-stroke mRS	 BAO or intracranial segments of both vertebral arteries (CTA/MRA/DSA), Age 18-80 years, Baseline NIHSS ≥ 6, Pre-stroke mRS score 0-1, PC-ASPECTS ≥ 6, Pons-midbrain-index ≤ 2, No ICH, significant cerebellar mas effect, or unilateral or bilateral thalamic infarction on neuroimaging, Symptom onset to randomization: 6-24 hours.

Intervention group (Endovascular group)	Mechanical thrombectomy with stent retriever (preferred) /thromboaspiration devices + standard medical therapy	Endovascular thrombectomy with angioplasty or stenting + standard medical treatment	Mechanical thrombectomy with stent retrievers, thromboaspiration, balloon angioplasty, stent deployment or intra- arterial thrombolysis + best medical management	Mechanical embolectomy (Solitaire FR or AB device) with or without adjunctive manual aspiration + best medical treatment
Control group	Standard medical therapy ^a	Standard medical care ^b	Best medical management °	Best medical treatment ^d
Primary outcome	mRS \leq 3 at 90 days	mRS \leq 3 at 90 days	mRS \leq 3 at 90 days	mRS \leq 3 at 90 days
Centers (n)	China (28)	German (4), Italy (5), Holland (10), Norway (2), Switzerland (1)	China (29)	China (36)
Sample size (Intervention;	131 (66; 65)	300 (154; 146)	342 (226; 114)	217 (110; 107)
Control)				

Notes: a. according to the AHA/ASA guidelines. b. according to local protocols and national guidelines. c. according to national and institutional guidelines.

d. according to latest Chinese guidelines for acute ischemic stroke (which are very similar to the AHA/ASA guidelines).

Abbreviations: BAO, basilar artery occlusion; ICH, Intracerebral hemorrhage; PC-ASPECTS, posterior circulation Acute Stroke Prognosis Early CT Score(range, 0-10); mRS, modified Rankin scale (range, 0-6 [most severe]); n, number; NIHSS, National Institutes of Health Stroke Scale (range, 0-42 [most severe]); AHA/ASA, American Heart Association/American Stroke Association.