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SUPPLEMENTARY MATERIAL:

Systematic Review

Clinical Outcomes of Second- versus First-Generation Carotid Stents: A Systematic Review and Meta-Analysis

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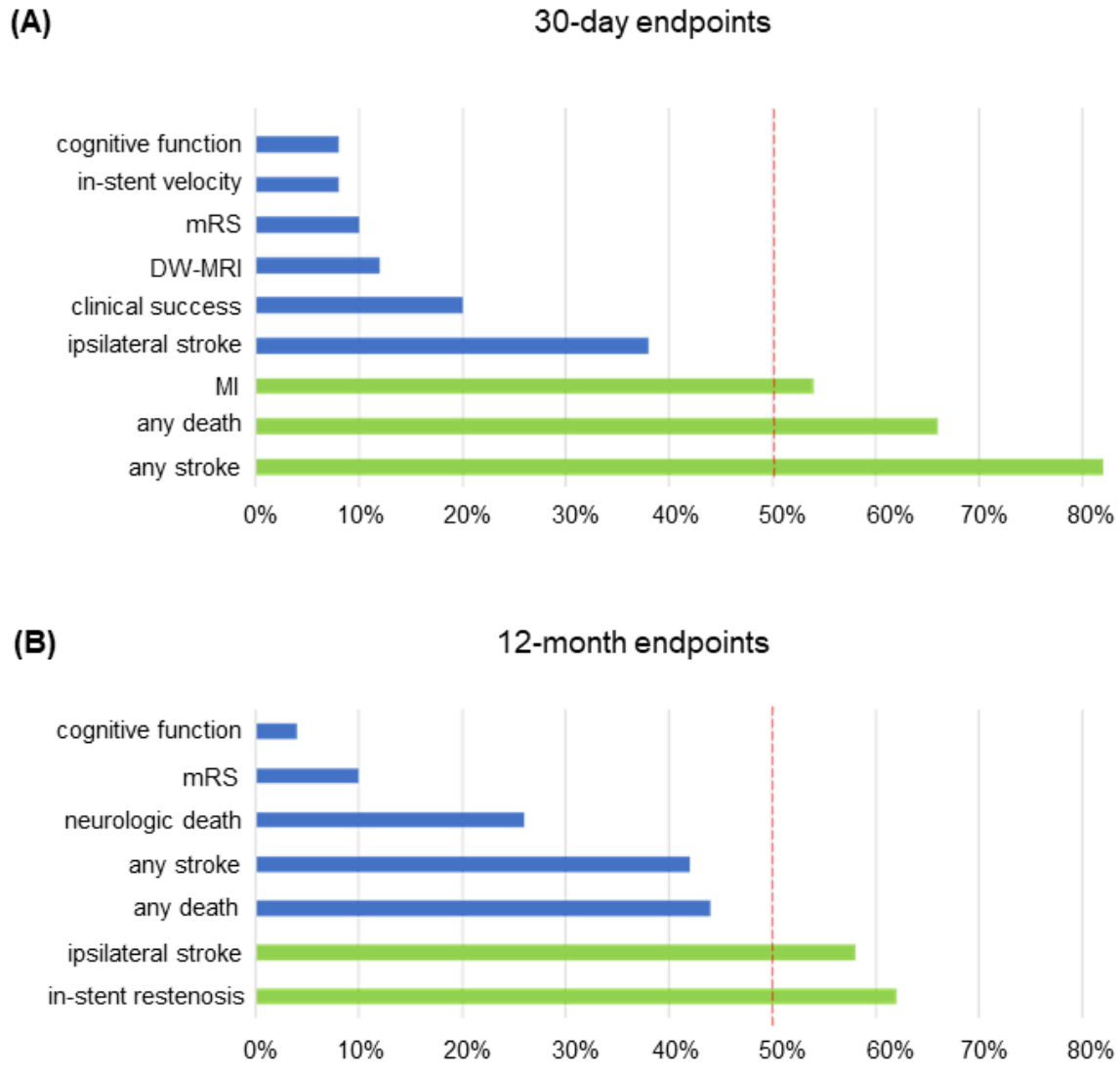


Figure S1. Random Sample CAS Study Endpoints. (A) for 30-day endpoints (n=50), and (B) for 12-month endpoints (n=50).

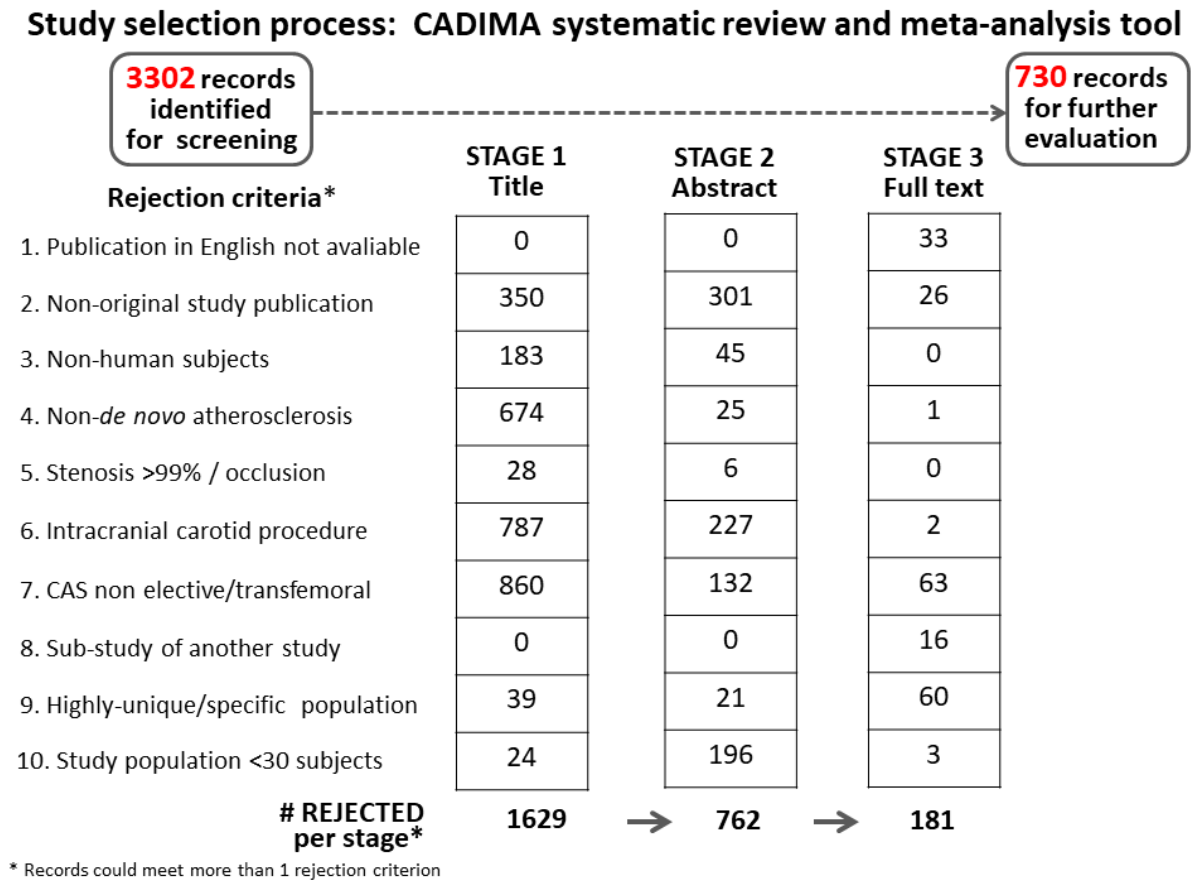
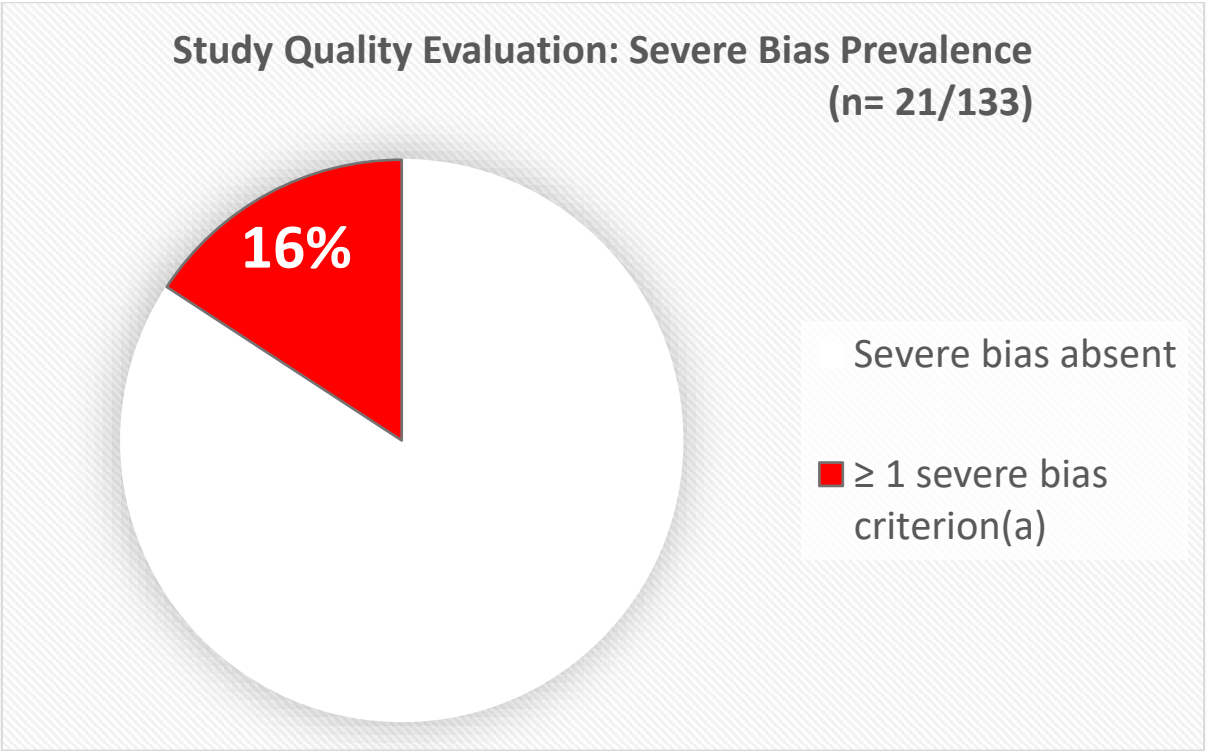
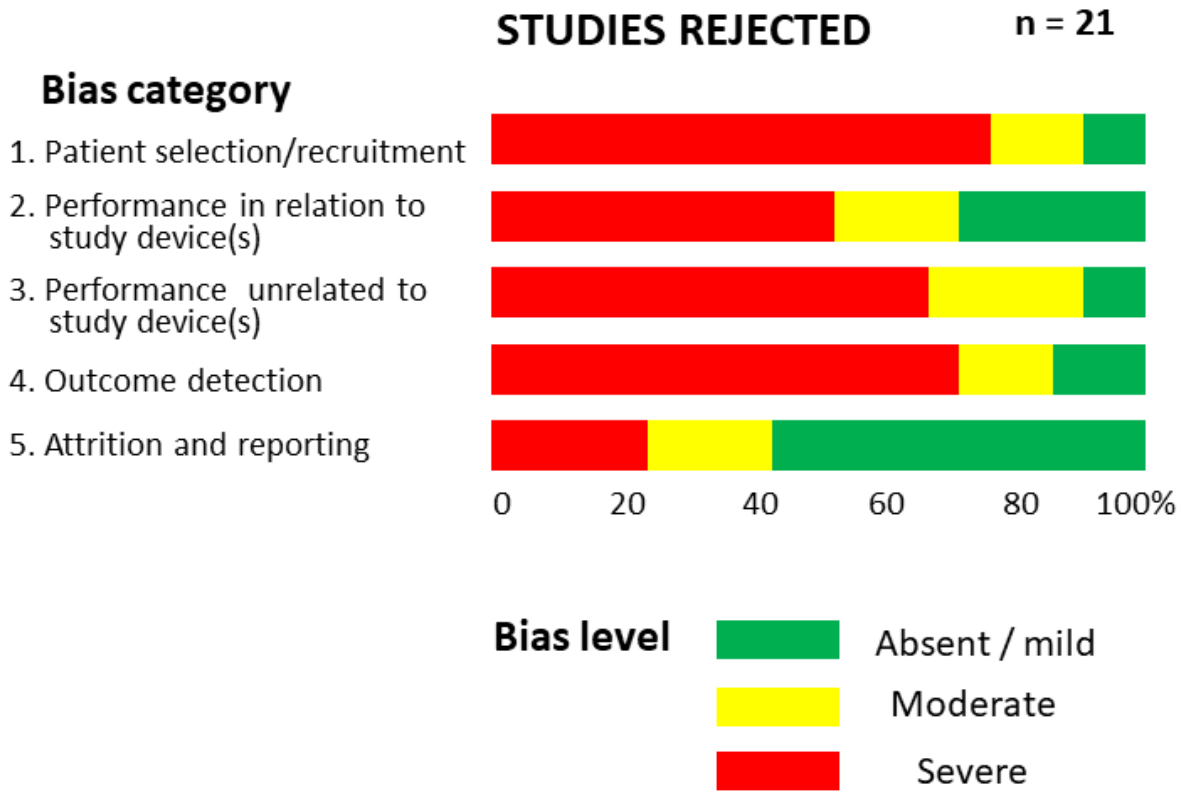


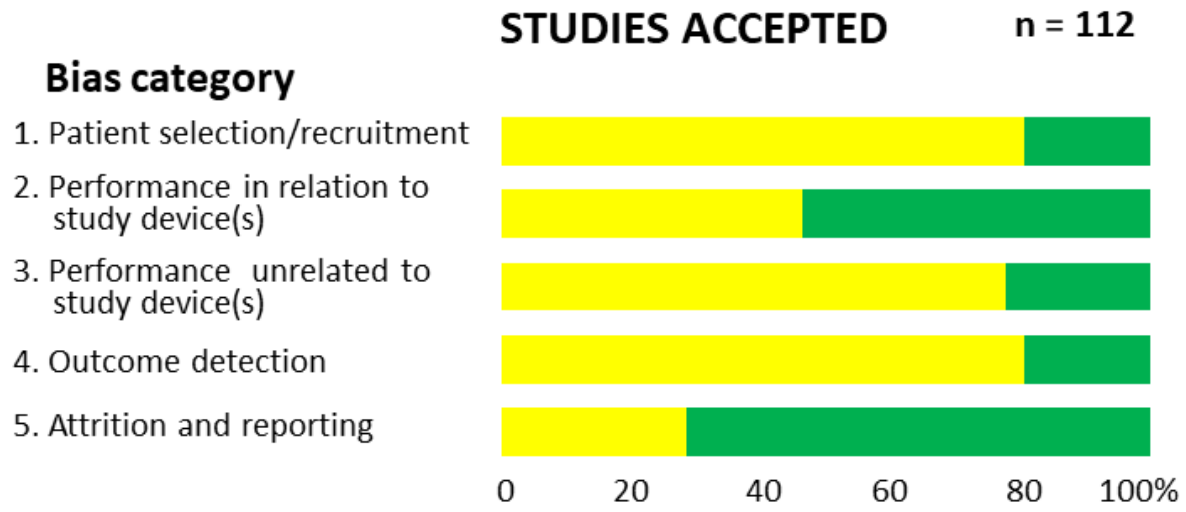
Figure S2. Study selection process: CADIMA systematic review and mata-analysis tool.


Study Quality Evaluation: Severe Bias Prevalence
(n= 21/133)
16%
Severe bias absent
≥ 1 severe bias criterion(a)

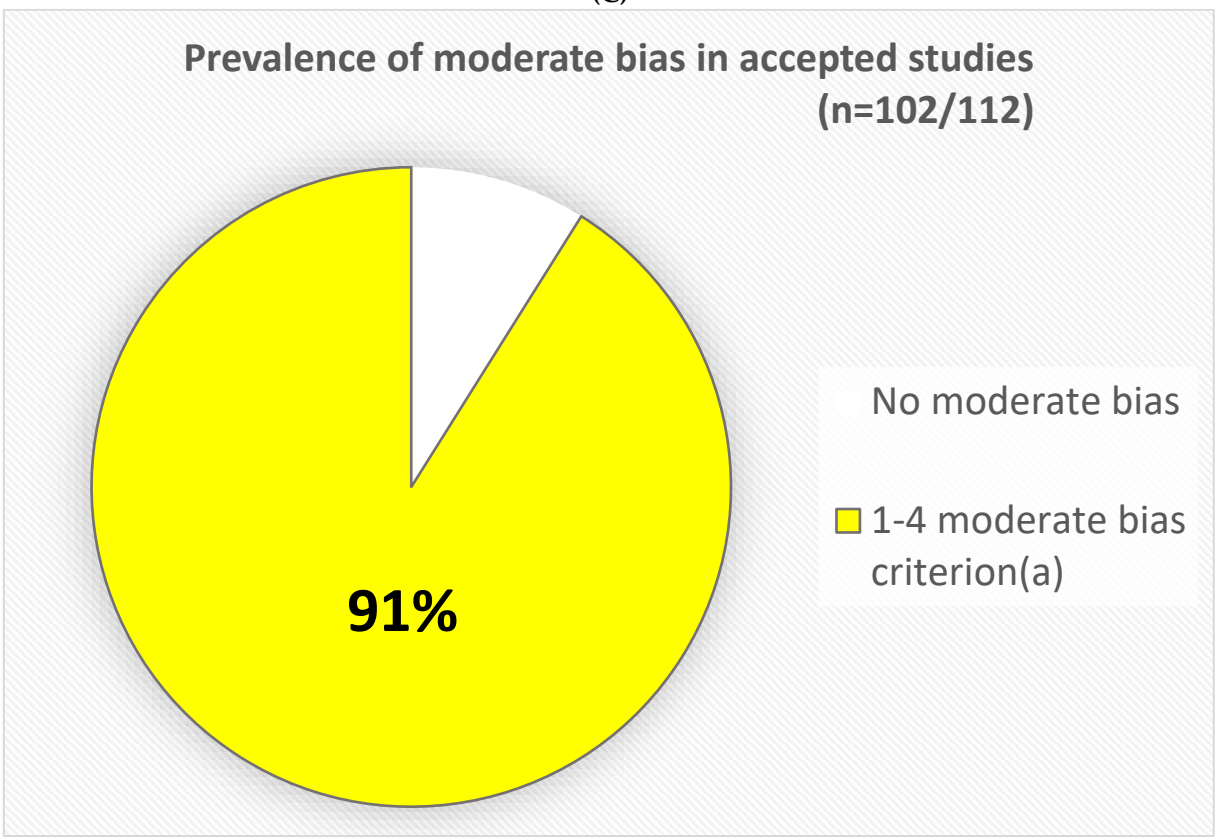
(A)


STUDIES REJECTED
n = 21
Bias category
1. Patient selection/recruitment
2. Performance in relation to study device(s)
3. Performance unrelated to study device(s)
4. Outcome detection
5. Attrition and reporting
0
20
40
60
80
100%
Bias level
Absent / mild
Moderate
Severe

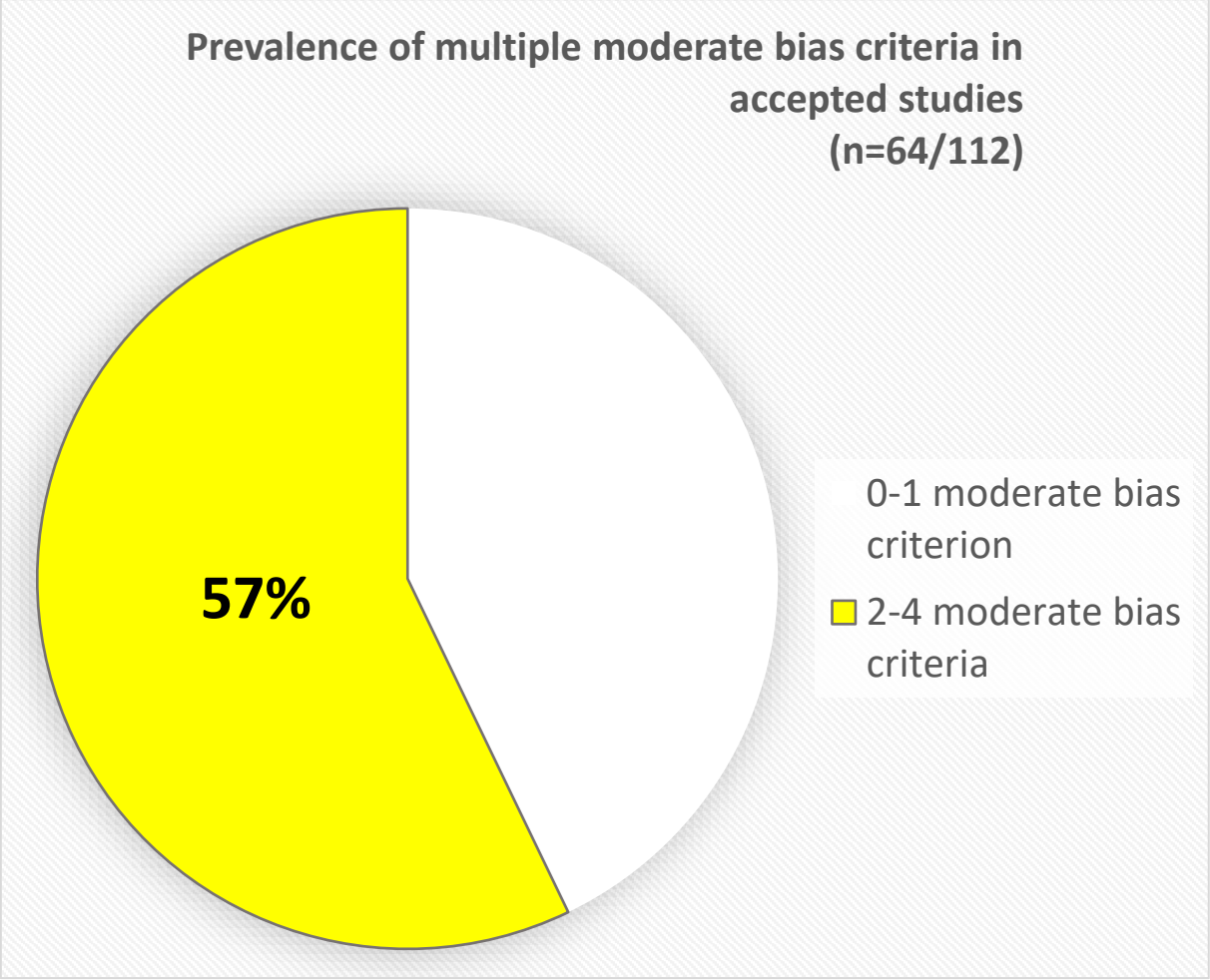
(B)


STUDIES ACCEPTED
n = 112
Bias category
1. Patient selection/recruitment
2. Performance in relation to study device(s)
3. Performance unrelated to study device(s)
4. Outcome detection
5. Attrition and reporting
0
20
40
60
80
100%

(C)


Prevalence of moderate bias in accepted studies (n=102/112)
91%
No moderate bias
1-4 moderate bias criterion(a)

(D)



(E)

Figure S3. Bias systematic assessment.

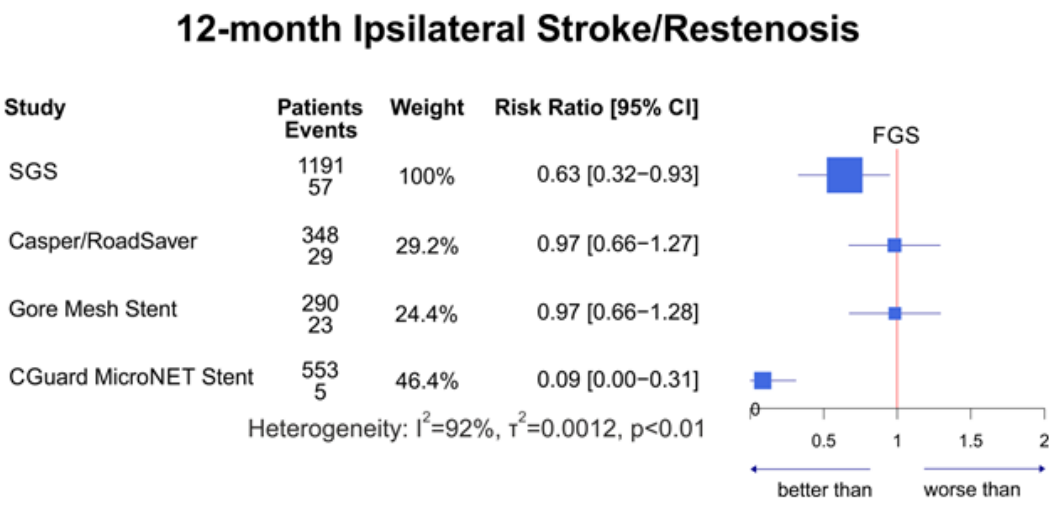
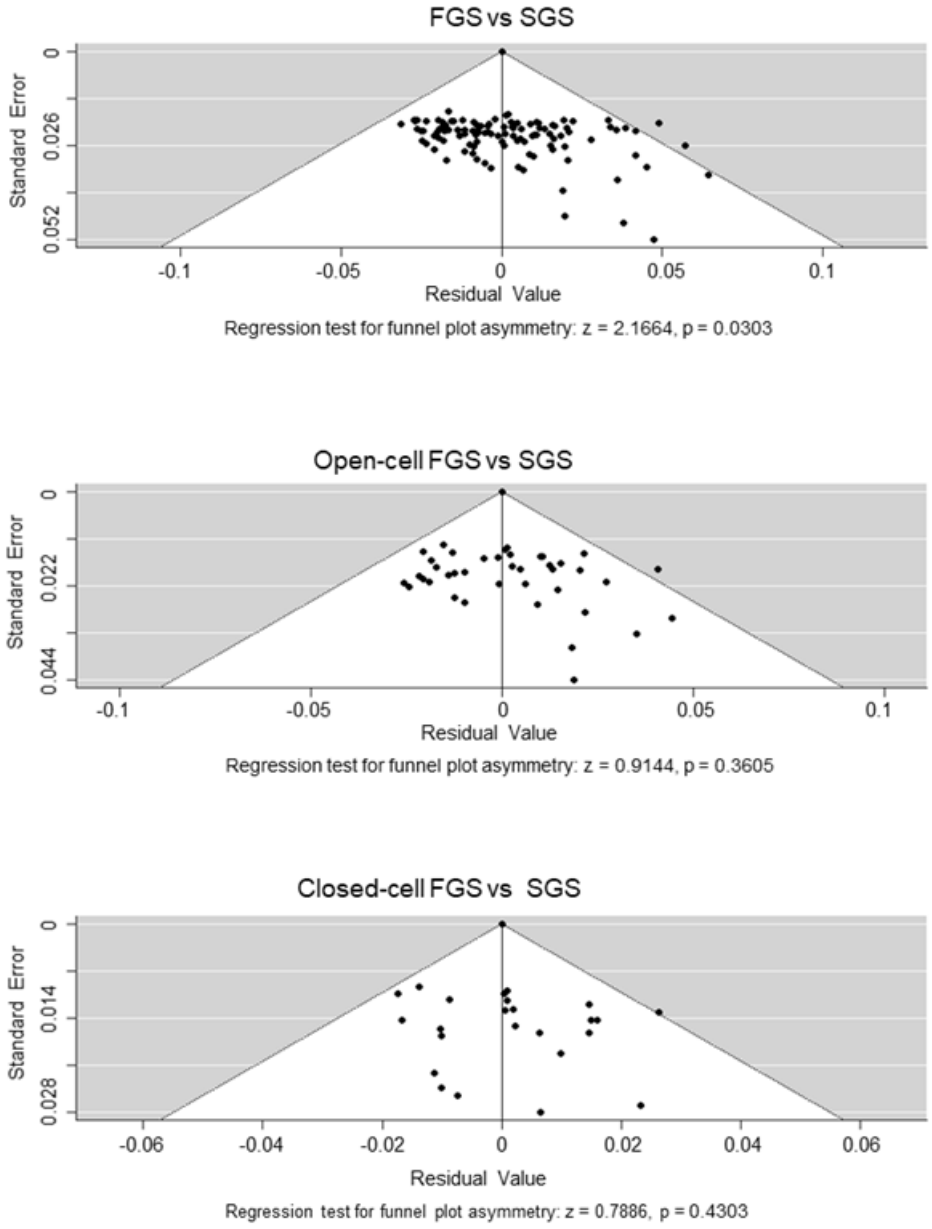


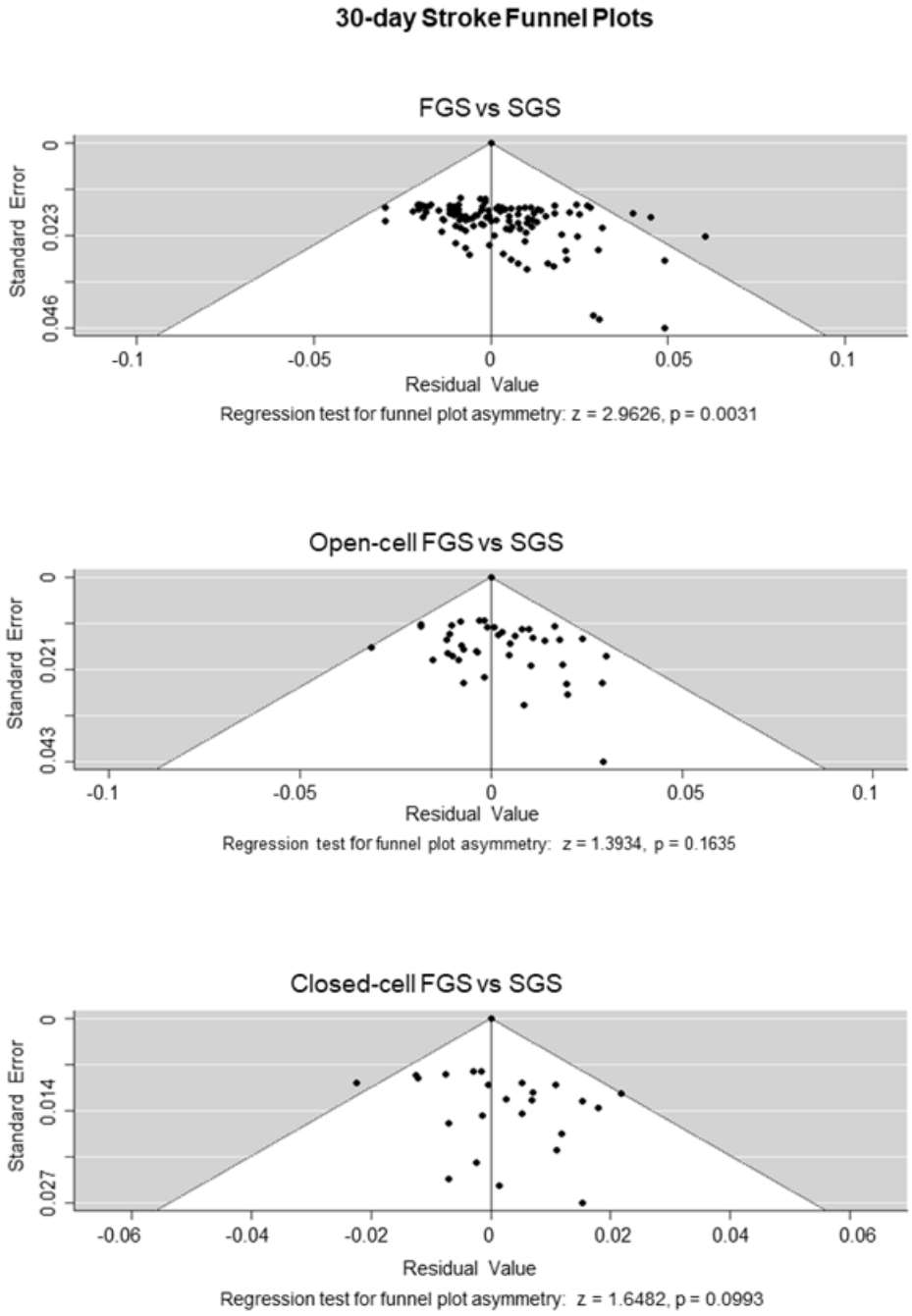
Figure S4. Forrest-plot presenting meta-analytic data for the combined 12-month endpoint of ipsilateral stroke and restenosis.

With FGS used as a reference, the benefit of Casper/Roadsaver in reducing 12-month ipsilateral stroke rate was neutralized by its relative harm—increased restenosis rate. For separate presentation of the individual (rather than combined) endpoints see Figure 2.

30-day Death/Stroke/MI Funnel Plots



(A)



(B)

Figure S5. Funnel plots of different stent type comparisons - 30-day-outcomes. (A) 30-day composite endpoint for death/stroke/MI, (B) 30-day stroke.

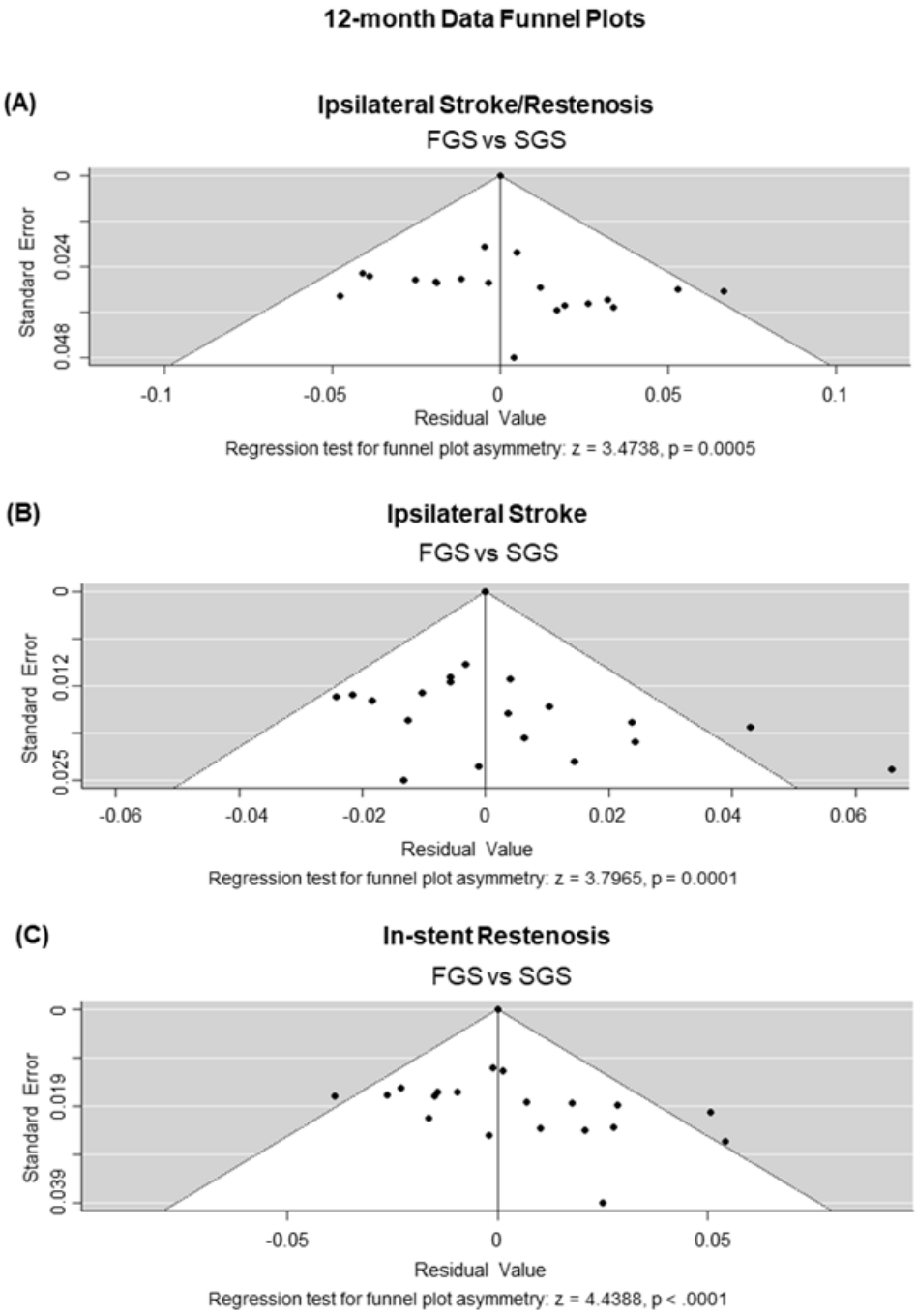


Figure S6. Funnel plots of different stent type comparisons - 12-month outcomes.

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