

THE LANCET

Neurology

Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to: Bonati LH, Gregson J, Dobson J, et al. Restenosis and risk of stroke after stenting or endarterectomy for symptomatic carotid stenosis in the International Carotid Stenting Study (ICSS): secondary analysis of a randomised trial. *Lancet Neurol* 2018; published online May 31. [http://dx.doi.org/10.1016/S1474-4422\(18\)30195-9](http://dx.doi.org/10.1016/S1474-4422(18)30195-9).

Supplementary Material

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Methods for time-updated Cox proportional hazards models

To model the effect of restenosis on subsequent stroke or vascular death, we used Cox proportional hazards models with a time updated covariate, a well-established statistical method (see for example “Andersen, Encyclopedia of Biostatistics, 2005, Chapter: Time-Dependent covariates”). This is achieved by splitting records for an individual into relevant segments of follow up and then running a proportional hazards model on the modified data.

For example, suppose a patient has restenosis after 69 days and subsequently has a stroke after 300 days. Their original record is:

Subject ID	Stroke	Start of Follow up	End of follow up	Time to restenosis
1	1	0	300	69

To fit a model with a time-varying covariate the data are modified to:

Subject ID	Stroke	Start of Follow up	End of follow up	Time to restenosis	After restenosis
1	0	0	69	69	0
1	1	69	300	69	1

The covariate in the “after restenosis” column can now be used to compare the rate of stroke before and after restenosis. From a technical standpoint, the new hazard function becomes:

$$h_{0i}(t) = \exp(\alpha(t) + \beta_1 x_{i1} + \beta_2 x_{i2}(t))$$

where $\alpha(t)$ is the baseline hazard function, x_{i1} represents a “normal” covariate (i.e. one that does not change over time), and $x_{i2}(t)$ represents a covariate that is allowed to vary over time. β_2 then represents the log hazard ratio per unit change in the time-dependent covariate.

Further explanation can be found in “Andersen, Encyclopedia of Biostatistics, 2005, Chapter: Time-Dependent covariates”. The method is readily implemented with a range of statistical software (e.g. “stsplit” in Stata, “survival” package in R).

Supplementary Table 1: Duplex ultrasound velocity criteria used for grading the degree (%) of carotid stenosis.

The degree of stenosis is expressed in values considered equivalent to NASCET angiography measures. PSV indicates peak systolic velocity; EDV, end diastolic velocity; ICA, internal carotid artery; CCA, common carotid artery. Velocity measurements are in meters/second. In cases where the flow velocity criteria spanned more than one category of stenosis, the higher category of stenosis was chosen if the PSV ICA and either the EDV ICA or the PSV ICA / PSV CCA ratio were within the higher band.

Band of stenosis (%)	PSV ICA (m/s)	EDV ICA (m/s)	PSV ICA / PSV CCA
0 – 29	<1.1	<0.4	<3.2
30 – 49	1.1 – 1.3	<0.4	<3.2
50 – 59	>1.3 – 2.1	<0.4	<3.2
60 – 69	>1.3 – 2.1	0.4 – 1.1	3.2 – 4.0
70 – 79	>2.1	>1.1 – 1.4	>4.0
80 – 95	>2.1	>1.4	>4.0
96 – 99	String Flow	String Flow	String Flow
100	Occluded	Occluded	Occluded

Supplementary Table 2: Multivariate predictors of restenosis chosen using forward stepwise variable selection

	HR	95% CI		P-value
Risk factors for $\geq 50\%$ restenosis				
Stenting (vs. endarterectomy)	1.38	1.14	1.69	0.001
Degree of contralateral stenosis				<0.0001
50-69%	1.50	1.15	1.95	
>70%	2.25	1.73	2.92	
Occlusion	3.06	2.09	4.49	
Female sex	1.54	1.25	1.91	<0.0001
Cholesterol (per mmol/l)	0.87	0.80	0.94	0.001
Systolic blood pressure (per mmHg)	1.01	1.01	1.02	<0.0001
Diastolic blood pressure (per mmHg)	0.99	0.98	1.00	0.006
Smoking status				<0.0001
Current smoker	2.22	1.64	2.98	
Ex-smoker	1.68	1.30	2.16	
Non-insulin dependent diabetes	1.35	1.05	1.74	0.018
Age (per year)	1.01	1.00	1.03	0.027
History of angina	1.53	1.12	2.08	0.007
Risk factors for $\geq 70\%$ restenosis				
Stenting (vs. endarterectomy)	1.17	0.83	1.67	0.36
Degree of contralateral stenosis				<0.0001
50-69%	1.14	0.68	1.91	
>70%	2.17	1.40	3.36	
Occlusion	2.23	1.21	4.12	
Non-insulin dependent diabetes	1.60	1.06	2.40	0.025