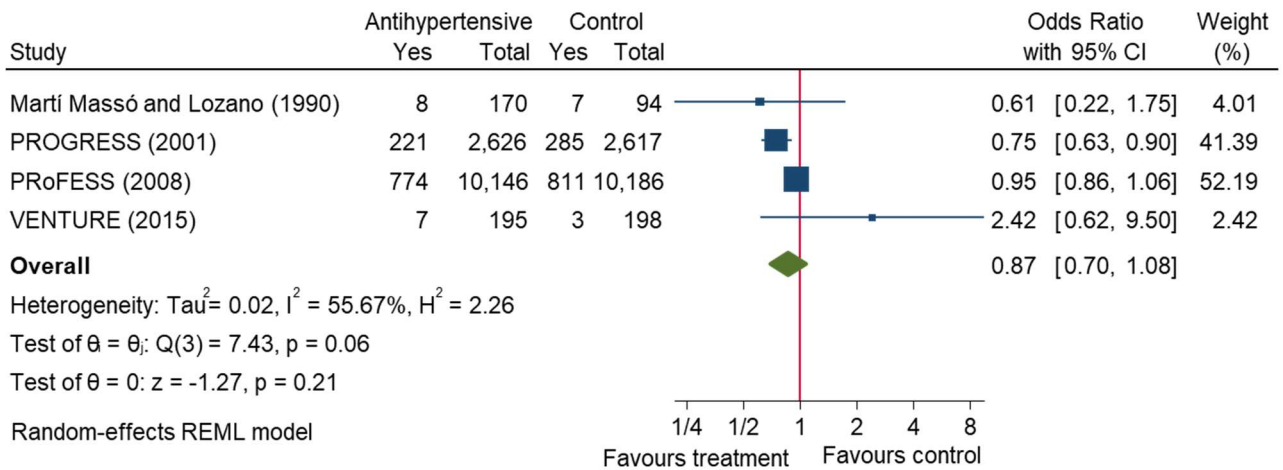


SUPPLEMENTAL MATERIAL

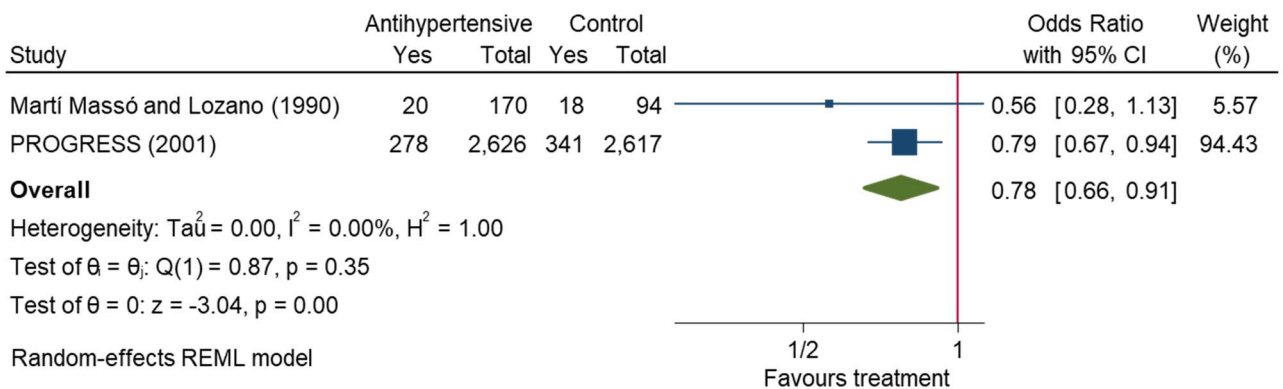
S Figure I. Forest plots of meta-analysis estimates of any BP-lowering drug against placebo/no treatment for secondary outcomes Ischemic stroke (A) and Ischemic stroke or TIA (B).

Legend: CI, confidence interval; θ , treatment effect

A. Ischemic stroke



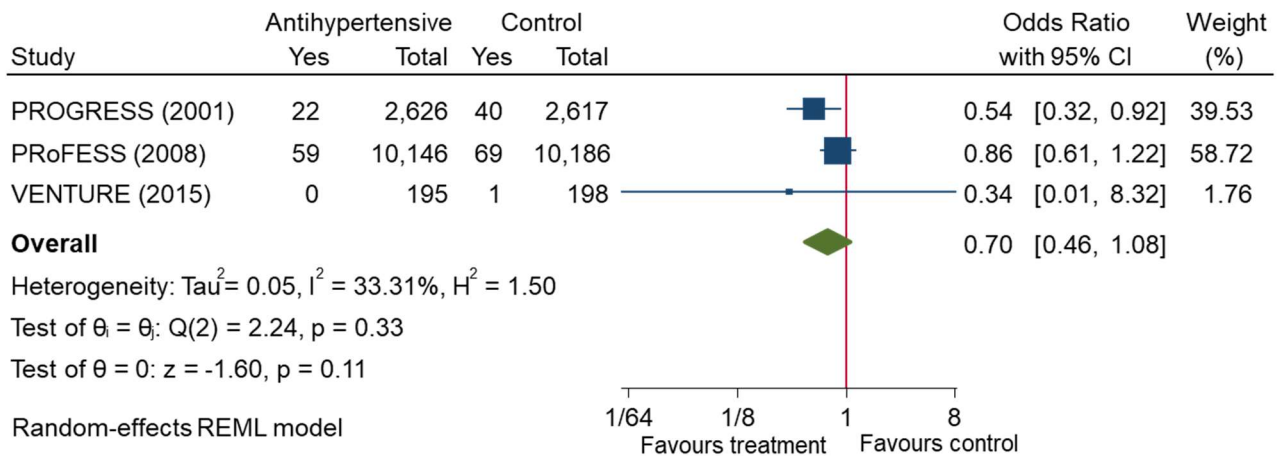
B. Ischemic stroke or TIA



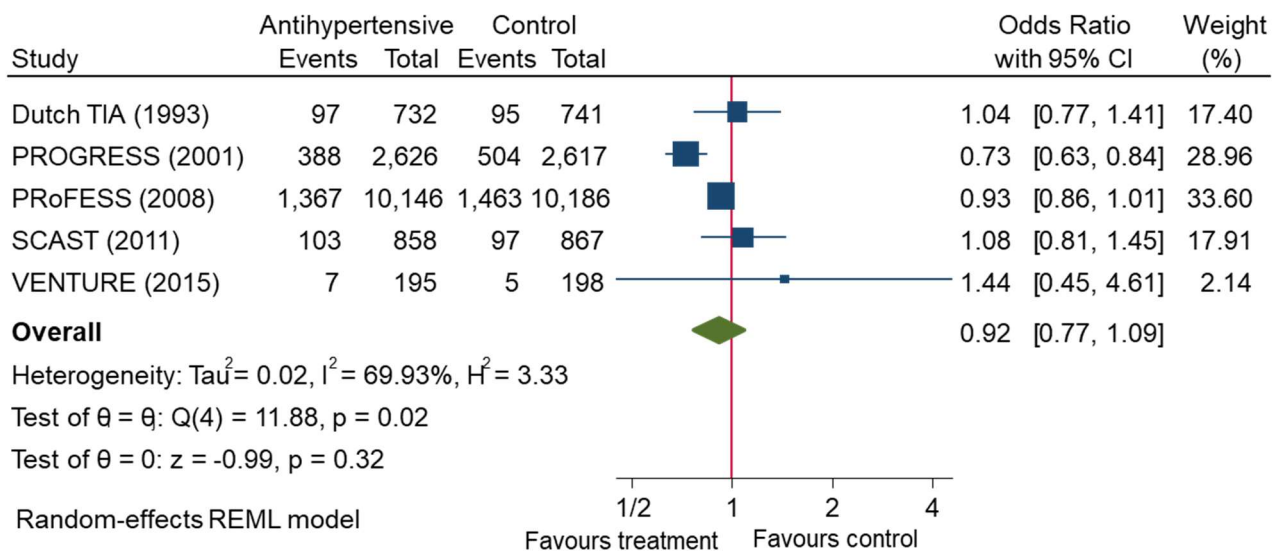
S Figure II. Forest plots of meta-analysis estimates of any BP-lowering drug against placebo/no treatment for secondary outcomes Hemorrhagic stroke (A), Cardiovascular event (B) and Fatal cardiovascular event (C).

Legend: CI, confidence interval; θ , treatment effect

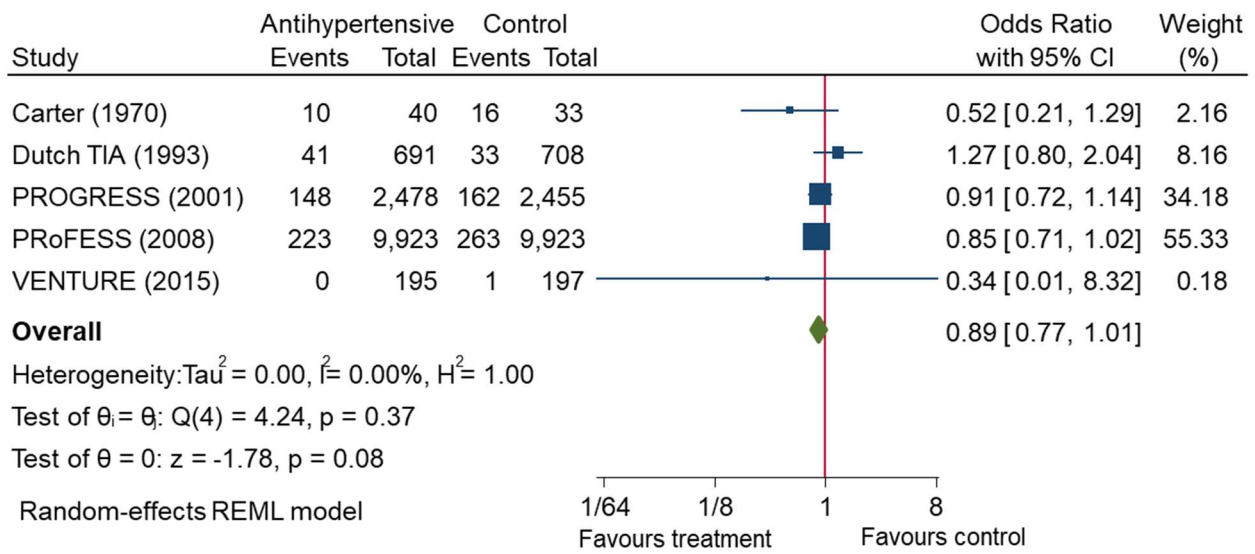
A. Hemorrhagic stroke



B. Cardiovascular event

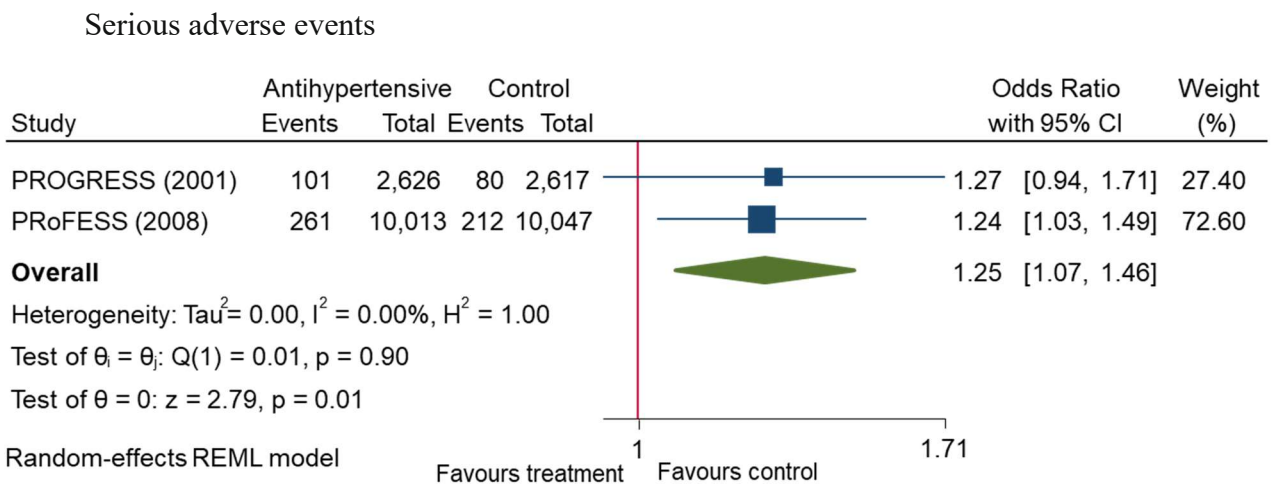


C. Fatal cardiovascular event



S Figure III. Forest plots of meta-analysis estimates of any BP-lowering drug against placebo/no treatment for secondary outcome Serious adverse events.

Legend: CI, confidence interval; θ , treatment effect



S Table I. Characteristics of the studies included in the qualitative synthesis only

Legend: HP, hypertensive patients; NA, not available

Study (year)	Index event (patients, n)	Intervention and control	Country	Time to randomization	Follow up, mean	HP only	Age, mean	Males, %
HSCSG (1974) ²⁰	Undetermined stroke, TIA (452)	Deserpidine/ methyclothiazide 0.5/5.0 mg/day for 6 weeks then, if well tolerated, 1/10 mg/day vs. Placebo	USA	< 1 year	3 years	Yes	59	60
TEST (1995) ²¹	Ischaemic, haemorrhagic or undetermined stroke, TIA (720)	Atenolol 50 mg/day vs. Placebo	Sweden	< 21 days	30 months	Yes	70	60
ALLHAT (2000) ²²	Undetermined stroke (NA)	Clorthalidone 12,5 to 25 mg/day vs. Doxasorzin 2 to 8 mg/day	USA and Canada	> 6 months	3 years	Yes	67	53
HOPE (2000) ²³	Undetermined stroke, TIA (1,013)	Ramipril 2,5 mg/day for one week, 5 mg/day for the next 3 weeks, and then 10 mg/day vs. Placebo	World	NA	5 years	No	66	73
SCOPE (2003) ²⁴	Undetermined stroke (194)	Candesartan 8 mg/day vs. Placebo	Europe	> 6 months	4 years	Yes	76	35
MOSES (2005) ²⁵	Ischaemic or haemorrhagic stroke, TIA (1,405)	Eprosartan 600 mg/day vs. Nitrendipine 10 mg/day for the first 3 weeks, then increased if required	Germany and Austria	< 2 years	30 months	Yes	68	54
FEVER (2005) ²⁶	Undetermined stroke, TIA (1,438)	Felodipine 5 mg/day vs. Placebo	China	> 6 months	40 months	Yes	61	61

S Table II. Pairwise meta-analysis estimates of any BP-lowering drug vs placebo from analysis of all studies, subgroup analyses and sensitivity analyses for each primary outcome.

Legend: OR, odds ratio; CI, confidence interval; NA, not applicable

	All-cause mortality		All strokes	
	<i>OR (95% CI)</i> <i>[number of studies]</i>	<i>I²; Test for heterogeneity</i>	<i>OR (95% CI)</i> <i>[number of studies]</i>	<i>I²; Test for heterogeneity</i>
Overall	1.01 (0.92-1.10) [n=6]	0%; p=0.42	0.79 (0.66-0.94) [n=6]	61%; p=0.01
Subgroup analyses				
Hypertension at inclusion		p=0.44*		p=0.92*
Hypertensive patients only	0.61 (0.17-2.19) [n=2]	30%; p=0.23	0.73 (0.14-3.82) [n=2]	79%; p=0.03
Hypertensive and normotensive patients	1.02 (0.93-1.11) [n=4]	0%; p=0.87	0.80 (0.68-0.95) [n=4]	68%; p=0.01
Time from ischemic stroke to randomization		p=0.57*		p=0.19*
Acute patients	2.04 (0.18-22.70) [n=1]	NA	1.81 (0.52-6.27) [n=1]	NA
Stabilized	1.01 (0.92-1.10) [n=5]	0%; p=0.33	0.77 (0.65-0.93) [n=5]	67%; p=0.00
Type of stroke				
Cardioembolic and non-cardioembolic	0.97 (0.81-1.16) [n=2]	0%; p=0.54	0.92 (0.42-2.01) [n=2]	50%; p=0.16
Non-cardioembolic	1.02 (0.92-1.13) [n=4]	0%; p=0.23	0.77 (0.60-0.99) [n=4]	69%; p=0.01
Sensitivity analyses				
Studies at low risk of bias	1.02 (0.93-1.11) [n=3]	0%; p=0.71	0.84 (0.70-1.01) [n=3]	66%; p=0.04

*Test of group differences