# EJVES1865R\_REV2\_SUPPLEMENTARY MATERIAL (SECOND REVISION)

## 5 Supplementary Table S1: Full search strategy

PubMed	Scopus	Cochrane Library 6
	(Endovascular repair	(Endovascular repair OR 7
(((((((endovascular	OR Endovascular	Endovascular treatment*) :ti,ab,kw 8
repair[Title/Abstract]) OR	treatment*) AND	AND ( fenestrated endograft* OR
(endovascular	(fenestrated	branched endograft*):ti,ab,kw AND
treatment[Title/Abstract])) OR	endograft* OR	(aortic arch OR arch of the aorta OR
(total endovascular repair)) OR	branched endograft*)	arch aneurysm* OR aortic arch 11
(fenestrated endograft)) OR	AND (aortic arch OR	syndrome*): ti,ab,kw
(branched endograft)) OR (inner	arch of the aorta OR	13
branch)) OR (chimney)) AND	arch aneurysm* OR	
((((aortic arch[Title/Abstract]) OR	aortic arch	14
(arch of the aorta[Title/Abstract]))	syndrome*)	15
OR (arch		16
aneurysm[Title/Abstract])) OR		17
(aortic arch syndromes[MeSH		
Terms]))		18
		19

#### 27 Supplementary Table S2: Indication for aortic arch intervention

Authors et al	n of patients	Degenerative Aneurysms N (%)	Chronic Dissections N (%)	PAU N (%)	Pseudo- aneurysms N (%)	Other N (%)	Urgent/Em ergent cases N (%)
Tsilimparis et al	108	49 (45.4)	42 (38.9)	17 (15.7)	0	0	16 (14.8)
Li et al	16	0	16 (100)	0	0	0	0
Hanna et al	38	17 (44.7)	13 (34.2)	3 (7.9)	5 (13.2)	0	1(3)
Dake et al	31	31 (100)	0	0	0	0	0
Tenorio et al	39	14 (36)	25 (64)	0	0	0	0
Planer	18	-	-	-	-	-	0
Kuzniar et al*	12	0	12 (100)	0	0	0	0
Zhang et al	51	0	51 (100)	0	0	0	0
Verscheure et al	70	0	70 (100)	0	0	0	0
Kudo et al	28	22 (78.6)	6 (21.4)	0	0	0	0
Sato et al	37	33 (89.2)	4 (10.8)	0	0	0	0
Fernandez et al	14	1 (7.1)	2 (14.3)	8 (57.2)	1 (7.1)	2 (14.3)	0
van der Weijde et al	11	8 (72.7)	1 (9)	0	2 (18.2)	0	0
Ferrer er al	24	13 (3)	2 (8.3)	9 (37.5)	0	0	0
Tsilimparis et al	54	24 (45)	26 (48)	4 (7)	0	0	11 (20)
Toya et al	8	3 (37.5)	3 (37.5)	0	2 (25)	0	0
Law et al	5	0	3 (60)	0	0	2 (40)	2 (40)
Tan et al	7	4 (57.1)	1 (14.3)	0	1(14.3)	1 (14.3)	0
Total	571	219/553 (39.6)	277/553 (50.1)	41/553 (7.4)	11/553 (2)	5/553 (0.9)	30/571 (5.3)

Missing data are marked with -. Studies are presented in chronological order, from the latest to the oldest one included in the Systematic Review.

- \*This study reports a total of 13 interventions performed on 12 patients. The results are reported as number (N)
- 35 and percentage (%)
- 36 PAU: penetrating aortic ulcer

## 40 Supplementary Table S3: Definitions adopted by authors of neurological events

## 41 (cerebrovascular events and spinal cord ischemia)

Study	Definition	Reported outcomes		
Tsilimparis et al				
Stroke	Society for Vascular Surgery reporting standards for TEVAR (2010)	Minor and major strokes		
SCI	Society for Vascular Surgery reporting standards for TEVAR (2010)	Transitory and permanent SCI		
Li et al	out i d	a 1		
Stroke	Clinical presentation	Stroke		
SCI Hanna et al	-	-		
Hanna et al Stroke	Society for Vascular Surgery reporting standards for TEVAR (2010). Confirmed by a neurologist and imaging of the brain in accordance with Neurologic Academic Research Consortium reporting standards, with disability graded according to the modified Rankin Scale for stroke.	Disabling strokes (modified Rankin Scale <2 at 90-day follow up)		
SCI	Society for Vascular Surgery reporting standards for TEVAR (2010). Confirmed by a neurologist and imaging of the cord and defined by Society for Vascular Surgery reporting guidelines for SCI	Transitory and permanent SCI		
Dake et al				
Stroke	Clinical assessment with disability graded with the modified Rankin Scale at 1 months	Disabling strokes		
SCI	Clinical presentation of paraplegia	Transitory and permanent SCI		
Tenorio et al				
Stroke	Clinical presentation	Minor strokes/TIA and major strokes		
SCI	Clinical presentation of paraplegia	Transitory and permanent SCI		
Planer et al				
Stroke	Clinical presentation. All serious adverse events were recorded and adjudicated by an independent Clinical Events Committee (CEC) according to the DEFINE group and the VARC-2 definitions	Disabling and non-disabling strokes		
SCI	Clinical presentation of paraplegia. All serious adverse events were recorded and adjudicated by an independent Clinical Events Committee (CEC) according to the DEFINE group and the VARC-2 definitions	Transitory and permanent SCI		
Kuzniar et al				
Stroke	Clinical presentation	Transitory and permanent stroke		
SCI	Clinical presentation of paraplegia	Transitory and permanent SCI		
Zhang et al	ND	NID		
Stroke SCI	NR NR	NR NR		
Verscheure et al	INK	INK		
Stroke	Society for Vascular Surgery reporting standards for TEVAR (2010)	Minor and major strokes		
SCI	Society for Vascular Surgery reporting standards for TEVAR (2010)	NR		
Kudo et al				
Stroke	Clinical presentation	Transient neurologic dysfunction and disabling stroke		
SCI	Clinical presentation of paraplegia	Transient neurologic dysfunction and disabling stroke		

Sato et al			
Stroke	NR	NR	
SCI	Clinical presentation of paraplegia	Transitory and permanent SCI	
Fernandez et al			
Stroke	Clinical presentation	Minor and major strokes	
SCI	Clinical presentation of paraplegia	Transitory and permanent SCI	
Van der Weijde et al			
Stroke	Clinical presentation	Minor and major strokes	
SCI	Clinical presentation of paraplegia	Transitory and permanent SCI	
Ferrer et at			
Stroke	Clinical presentation, with neurologic assessment carried out by a cardiovascular surgeon with a consulting neurologist called when needed.	TIA and major strokes.	
SCI	Clinical presentation of paraplegia, assessed by a cardiovascular surgeon, with a consulting neurologist called when needed.	Transitory and permanent SCI	
Tsilimparis et al			
Stroke	Clinical presentation	Minor and major strokes	
SCI	Clinical presentation of paraplegia	Transitory and permanent SCI	
Toya et al			
Stroke	-	-	
SCI	NR	NR	
Law et al			
Stroke	Clinical presentation	Minor and major strokes	
SCI	Clinical presentation of paraplegia	Transitory and permanent SCI	
Tan et al			
Stroke	Clinical presentation	Minor and major strokes	
SCI	Clinical presentation of paraplegia	Transitory and permanent SCI	

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- Studies are presented in chronological order, from the latest to the oldest one included in the
- 45 Systematic Review.
- SCI: spinal cord ischemia; TIA: transitory ischemic attack. NR: definition of the outcome *not* reported in the article; (-): outcome not investigated by in the article; 48