Table S1. Prior AIS characteristics, antithrombotic management and outcomes during follow-up in our study population

Case Num.	AIS Num.	Pattern of acute findings on DWI	Antithrombotic treatment at time of AIS	Presumed AIS etiology(ies)	Post LAAC OAC use	Primary outcome and safety outcome during follow - up
1	1	Single cortico-subcortical	Warfarin	AF	Kept on OAC	No events for 12.2 months
	2	Single cortical	Apixaban+ASA	AF		
2	1	Single cortical	None	AF	- Kept on OAC	No events for 39.2 months
	2	Single subcortical < 15mm (corona radiata infarct)	ASA	AF or cSVD		
	3	Multiple lesions in multiple territories - anterior and posterior circulation	Xarelto+ASA	AF		
	4	Multiple lesions in multiple territories - anterior and posterior circulation	Xarelto	AF		
3	1	CRAO	Apixaban+ASA	AF	OAC stopped 6 weeks after LAAC	No events for 29.1 months
4	1	Multiple lesions in multiple territories - anterior and posterior circulation	Apixaban+ASA	AF	OAC stopped 6 months after LAAC	No events for 23.9 months
5	1	Single subcortical ≥ 15 mm	Rivaroxaban	AF	OAC stopped 6	No events for
	2	Single subcortical ≥ 15 mm	Rivaroxaban	AF	weeks after LAAC	26.1 months
6	1	Single subcortical > 15 mm	Apixaban+ASA	AF	OAC stopped 3 months after LAAC	No events for 13.6 months
7	1	Multiple lesions in multiple territories - anterior and posterior circulation	ASA	AF	– Kept on OAC	No events for 1.5 months
	2	Multiple lesions in multiple territories - unilateral anterior circulation	Warfarin	AF		
8	1	BRAO	Rivaroxaban	AF	OAC stopped 6 weeks after LAAC	No events for 19.6 months
9	1	Single cortico-subcortical	Apixaban+ASA	AF	OAC stopped 6 weeks after LAAC	No events for 14.6 months
10	1	One vascular territory - two or more scattered lesions	Apixaban+ASA	AF		No events for
	2	Multiple lesions in multiple territories - unilateral anterior circulation	Apixaban+ASA	AF	Kept on OAC	15.6 months
11	1	Single subcortical < 15 mm (pontine infarct)	Aspirin	AF, MGUS or cSVD	_	AIS (single
	2	Single cortico-subcortical	Rivaroxaban	AF or MGUS	_	subcortical
	3	Single cortico-subcortical	Dabigatran	AF or MGUS	Kept on OAC	infarct < 15 mm in corona
	4	Multiple lesions in multiple territories - anterior and posterior circulation	Dabigatran+ASA	AF or MGUS	-	radiata) 6.3 months after

	5	Single subcortical < 15 mm (internal capsule infarct)	Dabigatran+ASA	AF, MGUS or cSVD		LAAC while on apixaban
12 -	1	Single subcortical ≥ 15 mm	Warfarin	AF	OAC stopped 6 weeks after LAAC	No events for 15.0 months
	2	CRAO	Warfarin+ASA	AF		
13	1	Multiple lesions in multiple territories - bilateral anterior circulation	Dabigatran	AF or Hemochromat- osis	Kept on OAC	No events for 49.1 months
14	1	One vascular territory - two or more scattered lesions	Rivaroxaban	AF	OAC stopped 6 weeks after LAAC	No events for 17.6 months
15	1	Multiple lesions in multiple territories - anterior and posterior circulation	None	AF	OAC stopped 6 weeks after LAAC	No events for 46.6 months
	2	Single cortico-subcortical	Warfarin	AF		
16	1	Single subcortical < 15 mm (thalamic infarct)	Warfarin+ASA	AF or cSVD	OAC stopped 6 weeks after LAAC	No events for 17.4 months
17 -	1	Multiple lesions in multiple territories - bilateral posterior circulation	Apixaban	AF	On DAPT only after LAAC	No events for 15.4 months follow – up
1/ -	2	One vascular territory - two or more scattered lesions	Apixaban	AF		
	1	Single cortico-subcortical	Warfarin+ASA	AF		Intracerebral hemorrhage 21.9 months after LAAC while on Apixaban+ASA
-	2	Single subcortical ≥ 15 mm	Warfarin+ASA	AF	Kept on OAC	
18	3	Single cortical	Apixaban+ASA	AF		
-	4	Single cortico-subcortical	Apixaban	AF		
40	1	Single cortical	Aspirin	AF or HFrEF	- Kept on OAC	No events for 6.0 months
19	2	Single cortico-subcortical	Apixaban+ASA	AF or HFrEF		
20	1	One vascular territory - two or more scattered lesions	Apixaban+ASA	AF	Kept on OAC	No events for 41.4 months
21 -	1	Multiple lesions in multiple territories - unilateral anterior circulation	None	AF	On DAPT only after LAAC	No events for 16.5 months
21 -	2	Multiple lesions in multiple territories - anterior and posterior circulation	Apixaban	AF		
	1	Single cortico-subcortical	Warfarin	AF		
22	2	Single subcortical < 15 mm (medial medullary infarct)	Warfarin	AF vs cSVD	OAC stopped 6 weeks after LAAC	No events for 12.0 months
	1	No MRI available	Warfarin	AF	OAC stopped 3 months after LAAC	No events for 14.4 months
23 -	2	Single cortical	Dabigatran+ASA	AF		
24	1	No MRI available	Apixaban	AF	OAC stopped 6 months after LAAC	No events for 35.9 months follow – up
25	1	No MRI available	Rivaroxaban+ASA	AF	OAC stopped 6 weeks after LAAC	No events for 13.6 months
26	1	Multiple lesions in multiple territories - anterior and posterior circulation	Rivaroxaban	AF	OAC stopped 6 weeks after LAAC	No events for 21.2 months
27	1	Multiple lesions in multiple territories - bilateral anterior circulation	Apixaban	AF	OAC stopped 6 weeks after LAAC	No events for 12.8 months

28	1	Single subcortical ≥ 15 mm	Apixaban	AF	OAC stopped 6 weeks after LAAC	No events for 37.3 months
29	1	CRAO	Apixaban	AF	Kept on OAC	No events for 14.4 months

Events are listed in chronological order if the patient had more than one acute ischemic stroke prior to the left atrial appendage closure. AIS, acute ischemic stroke; DWI, diffusion weighted imaging; LAAC, left atrial appendage closure; OAC, oral anticoagulant; AF, atrial fibrillation; ASA, aspirin; cSVD, cerebral small vessel disease; CRAO, central retinal artery occlusion; BRAO, branch artery occlusion; MGUS, monoclonal gammopathy of undetermined significance; DAPT, dual antiplatelet; HFrEF, heart failure with reserved ejection fraction