

Supplementary Material

References for Table 1

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Supplementary Table 1: Definitions of severe stroke, large infarction, malignant brain edema, and critically severe stroke.

Concepts	Definition	Other terms reported
Severe stroke		
Severe stroke	NIHSS $\geq 8^{[1]}$; $\geq 10^{[2]}$; $\geq 11^{[3-5]}$; $\geq 15^{[6-17]}$; $\geq 16^{[18-20]}$; $\geq 17^{[21]}$; $\geq 18^{[22]}$; $\geq 20^{[13, 23, 24]}$; $\geq 21^{[25, 26]}$; $> 25^{[8, 15]}$ GCS $\leq 12^{[5, 27]}$, GCS $\leq 8^{[21, 22]}$	
Large cerebral/cerebellar infarction		
Large hemispheric infarction	Infarction >total or subtotal ($>2/3$) MCA territory ^[28, 29]	Large MCA infarction [30]
Massive MCA infarction		
		[31]
Massive		

	cerebral
	infarction
	[32]
Infarction >both the anterior and posterior divisions of MCA territory ^[33]	Large MCA infarction
	[34]
Infarction >1/2 MCA territory ^[35, 36]	Large MCA infarction
	[37–40]
	Malignant t MCA infarction
	[41]
Infarction >82 cm ³ on DWI <10 h ^[42]	
Infarction >1/2 MCA territory or >82 cm ³ on DWI <24 h ^[43]	

Large MCA infarction	Infarction $>145 \text{ cm}^3$ on DWI ^[22] $<14 \text{ h}$ ^[44]	
Large cerebral infarction	Infarction $>1/2 \text{ MCA territory}$ or $>145 \text{ cm}^3$ on DWI $<48 \text{ h}$ ^[45]	
Large cerebral infarction	Infarction \geq one division of MCA territory ^[46]	
Large cerebral infarct	Infarction $\geq 1/2 \text{ MCA, ACA, or PCA territory}$ ^[47]	
Space-occupying cerebral infarction	Infarction $>2/3 \text{ MCA territory}$ and space-occupying edema ^[48, 49]	Large space-occupying MCA infarction [49]
	Infarction $>1/2 \text{ MCA territory}$ and local brain swelling ^[50]	Malignant brain edema ^[51]

Massive cerebellar infarction

Large cerebellar infarction

Malignant brain edema

	Clinical signs	Imaging evidence	
Malignant MCA infarction	A severe hemispheric stroke syndrome including hemiplegia, forced eye and head deviation, and progressive deterioration of consciousness, leading to herniation and death ^[54]	Complete MCA infarction ^[54]	
	Fatal midbrain herniation ^[55]	MCA infarction with mass effect ^[55]	Space-occupying MCA infarction
			[55]

Raised intracranial pressure, and brain herniation and brain death ^[56]	Mass effect with midline shift ^[56]	Malignant t hemispheric infarction [56]
Deterioration of neurological and consciousness status with clinical signs of uncal herniation ^[44]	Mass effect leading to early death or hemicraniectomy ^[44]	
Clinical signs of herniation ^[37, 57]	Space-occupying brain edema with a midline shift >2 mm at the level of the septum pellucidum on CT corresponds to >5.54 mm <i>in situ</i> ^[37, 57]	
Signs of clinical deterioration (deteriorating level of consciousness, anisocoria) ^[58]	Large (total or subtotal) MCA with progressive brain swelling ^[58]	
Neurological deterioration (decrease in the level of consciousness to somnolence or stupor) ^[31]	Infarction >2/3 MCA territory with midline shift and basal cisterns compression ^[31]	
Signs of herniation (unilateral fixed and dilated pupils) ^[38, 59]	Space-occupying brain edema with a midline shift >5 mm at the level of septum pellucidum ^[38, 59]	

Decreased arousal, pupillary changes, and a rapid decline in neurological status ^[60]	Space-occupying brain edema with a midline shift >5 mm ^[60]	Malignant t infarction ^[60]
Clinical signs of uncal herniation ^[61]	Infarction >1/2 MCA territory with a midline shift >5 mm (<i>in situ</i>) at the level of the septum pellucidum ^[61]	
Decrease of consciousness to NIHSS 1a ≥1 or clinical deterioration of NIHSS ≥4; anisocoria or death attributable to herniation ^[62]	Midline shift >5 mm (<i>in situ</i>) at the level of the septum pellucidum ^[62]	
Severe MCA syndrome (dense hemiplegia, head and eye deviation, hemi-neglect and aphasia, impaired and progressively deteriorating consciousness) ^[63]	Infarction >2/3 MCA territory ^[63]	
NIHSS >15 (or >20) ^[64]	Infarction >2/3 of MCA territory, without perfusion–diffusion mismatch ^[64]	Malignant t supratentorial/brai

		n/cerebra
	NIHSS ≥15 with NIHSS 1a ≥1 ^[65]	1
	NIHSS score ≥16 with NIHSS 1a ≥1 ^[66, 67]	infarction [64]
	NIHSS >18 (or >20) with NIHSS 1a ≥1 ^[68]	Infarction >2/3 MCA territory, with ventricle compression or midline shift ^[65]
	NIHSS >18 with NIHSS 1a ≥1 ^[49]	Infarction >1/2 MCA territory, or, infarction >145 cm ³ ^[66, 67]
	NIHSS 1a ≥1 ^[69]	Infarction >2/3 MCA territory, including basal ganglia ^[68]
	NIHSS ≥20 with NIHSS 1a ≥1 ^[70]	Infarction >2/3 MCA territory, with ventricle compression or midline shift ^[49]
Malignant brain edema	Neurological deterioration (NIHSS increase by >2) and decrease in the level of consciousness (NIHSS 1a ≥1) ^[71]	Infarction >2/3 MCA territory, with ventricle compression or midline shift ^[69] Complete MCA infarction (>1/2 MCA territory with brain swelling of sulcal effacement and compression of the lateral ventricle), and midline shift >5 mm

Clinical signs of herniation (decrease in consciousness and/or anisocoria) ^[72]	with obliteration of basal cisterns ^[71]
Syndrome of clinical worsening, or death, or requirement for DHC ^[73, 74]	Brain swelling (midline shift of brain structure or effacement of basal cisterns) ^[72]
Decompressive craniectomy, discharge in coma, or in-hospital death attributed to symptomatic brain swelling (neurological deterioration, increase in NIHSS ≥ 2) ^[47]	Brain swelling ^[73, 74]
Clinical signs of herniation (decrease in consciousness and/or anisocoria) ^[40, 75]	Compression of lateral ventricle, midline shift, or compression of basal cistern ^[47]
Need for DHC and/or death ^[76, 77]	Midline shift ≥ 5 mm ^[40, 75]
Edema requiring hemicraniectomy or osmotic drug therapy,	Midline shift ≥ 5 mm ^[76, 77]
	Potentially lethal malignant edema ^[75, 78]

	with death or decline in GCS ≥ 2 ^[79]	
	Decreased consciousness, unilateral dilated pupil, and severe neurological deficit, need for decompressive surgery or death ^[80]	Midline shift ≥ 5 mm ^[80]
Severe brain edema	Clinical signs of uncal herniation or rapid deterioration of neurological and consciousness status, clinical symptoms of increased intracranial pressure (nausea or vomiting) ^[81]	Mass effect leading to hemicraniectomy ^[81]
Life-threatening edema	Decrease in consciousness ^[82] Decrease of consciousness to NIHSS 1a ≥ 1 or clinical deterioration of NIHSS ≥ 4 ^[83]	Infarction >2/3 MCA territory with space-occupying edema ^[82] Midline shift ≥ 5 mm ^[83]
Fatal brain swelling	Death caused by brain herniation with documented evidence of brain stem compression (enlarged pupil, coma, or loss of other brain stem reflexes) ^[33] Progressive neurological deterioration leading to coma and death ^[84]	Infarction >both anterior and posterior divisions of MCA territory ^[33] Anterior circulation strokes ^[84]

Critically severe stroke

Critical cerebral infarction	A critical condition after cerebral infarction accompanied with malignant brain edema, or other conditions that require neurocritical care including the need for intubation and/or mechanical ventilation due to decreased level of consciousness or respiratory failure, persistent unstable blood pressure, or severe dysfunction in other vital organs such as renal failure or cardiac dysfunction ^[85]
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Local brain swelling (also known as space-occupying brain edema or mass effect) refers to the imaging signs of effacement of cortical sulci, compression of ventricles, shift of midline structure, and effacement of basal cisterns.

ACA: Anterior cerebral artery; DHC: Decompressive hemicraniectomy; DWI: Diffusion-weighted imaging; GCS: Glasgow coma score; ICA: Internal carotid artery; MCA: Middle cerebral artery; NHISS: National Institutes of Health Stroke Scale score; PCA: Posterior cerebral artery.

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