Supplemental Tables for Apixaban compared with warfarin to prevent thrombosis in thrombotic antiphospholipid syndrome: a randomized trial

Scott C. Woller MD^{1,2}, Scott M. Stevens MD^{1,2}, David Kaplan MD², Tzu-Fei Wang MD³, D. Ware Branch⁴, Danielle Groat MS⁵, Emily L. Wilson MS⁵, Brent Armbruster BA⁵, Valerie T. Aston MBA⁵, James F. Lloyd BS⁴, Matthew T. Rondina MD², C. Greg Elliott, MD^{1,2}

ID	Ag e	Sex	BM I	Study Arm (dose, mg)	Clinical History	Antibod Y Positivit Y	APS Categor Y	Outcom e Event	Days to Even t	Warfari n Days	Apixaba n 2.5 mg BID Days	Apixaba n 5.0 mg BID Days
1	43	Femal e	36. 9	Apixaba n 2.5	DVT	Triple	Definite	Stroke	67	0	67	0
2	47	Femal e	19. 4	Apixaba n 2.5	Stroke, TIA, DVT, pregnancy loss	Double	Likely	Stroke	37	0	37	0
3	69	Femal e	23. 2	Apixaba n 2.5	Stroke, pregnancy loss	N/A	Historic al	Stroke	6	0	6	0
4	51	Femal e	25. 5	Apixaba n 2.5 & 5.0	Stroke, other arterial thrombosi s, DVT, PE	Triple	Definite	Stroke	316	0	234	82
5	40	Femal e	39. 3	Apixaba n 2.5 & 5.0	Stroke, DVT, PE, pregnancy loss	Single	Likely	Stroke	156	0	123	33
6	66	Male	39. 3	Apixaba n 5.0	DVT	N/A	Historic al	Stroke	104	0	0	104
7	62	Femal e	30. 5	Warfari n	Stroke, DVT, PE	N/A	Historic al	Major Bleed	319	319	0	0
8	60	Male	38. 9	Apixaba n 2.5 & 5.0	DVT, PE	Double	Definite	none	-	0	204	161
9	29	Femal e	24. 4	Apixaba n 2.5 & 5.0	DVT, pregnancy loss	Double	Definite	none	-	0	204	161
1 0	53	Femal e	22. 4	Apixaba n 2.5 & 5.0	DVT, PE	Double	Likely	none	-	0	183	182
1 1	47	Femal e	29. 9	Apixaba n 2.5 & 5.0	Stroke	Single	Likely	none	-	0	209	156
1 2	45	Male	30. 9	Apixaba n 2.5 & 5.0	DVT, PE	Single	Likely	none	-	0	182	183
1 3	36	Femal e	20. 5	Apixaba n 2.5 & 5.0	PE	Single	Likely	none	-	0	154	211
1 4	47	Femal e	35. 9	Apixaba n 2.5 & 5.0	DVT, PE	N/A	Historic al	none	-	0	124	241

Supplement Table 1: Detailed patient characteristics with study outcomes

1 5	36	Male	49. 6	Apixaba n 2.5 & 5.0	DVT, PE	N/A	Historic al	none	-	0	91	274
1 6	30	Femal e	46. 5	Apixaba n 5.0	DVT, PE	Triple	Definite	none	-	0	0	365
1 7	43	Femal e	27. 7	Apixaba n 5.0	PE, pregnancy loss	Triple	Definite	none	-	0	0	365
1 8	45	Femal e	29. 3	Apixaba n 5.0	DVT, pregnancy loss	Triple	Likely	none	-	0	0	365
1 9	44	Femal e	28. 9	Apixaba n 5.0	DVT	Triple	Definite	none	-	0	0	365
2 0	32	Femal e	25. 7	Apixaba n 5.0	DVT, pregnancy loss	Triple	Definite	none	-	0	0	365
2 1	61	Femal e	27. 1	Apixaba n 5.0	DVT	Single	Likely	none	-	0	0	365
2 2	52	Femal e	27. 6	Apixaba n 5.0	МІ	N/A	Historic al	none	-	325	0	40
2 3	27	Femal e	38. 8	Apixaba n 5.0	DVT	N/A	Historic al	none	-	0	0	365
2 4	56	Femal e	30. 8	Apixaba n 5.0	PE	N/A	Historic al	none	-	0	0	365
2 5	60	Femal e	37. 1	Warfari n	Stroke, TIA	Triple	Definite	none	-	365	0	0
2 6	20	Male	29. 8	Warfari n	DVT, PE	Triple	Definite	none	-	365	0	0
2 7	57	Femal e	33. 4	Warfari n	Stroke, TIA, pregnancy loss	Triple	Definite	none	-	365	0	0
2 8	35	Male	30. 1	Warfari n	Other arterial thrombosi s	Triple	Definite	none	-	365	0	0
2 9	61	Femal e	31. 6	Warfari n	MI, DVT, PE, pregnancy loss	Triple	Definite	none	-	365	0	0
3 0	34	Femal e	33. 1	Warfari n	DVT	Triple	Likely	none	-	365	0	0
3 1	25	Femal e	44. 6	Warfari n	DVT	Triple	Definite	none	-	365	0	0
3 2	47	Femal e	33. 8	Warfari n	TIA, DVT	Double	Definite	none	-	365	0	0
3 3	42	Femal e	30. 8	Warfari n	Stroke, TIA	Double	Definite	none	-	365	0	0
3 4	43	Femal e	26. 2	Warfari n	DVT	Single	Definite	none	-	365	0	0
3 5	54	Male	32. 6	Warfari n	DVT, PE	Single	Definite	none	-	365	0	0
3 6	66	Femal e	31. 2	Warfari n	PE	Single	Likely	none	-	365	0	0
3 7	41	Femal e	45. 1	Warfari n	Stroke, pregnancy loss	Single	Likely	none	-	365	0	0

3 8	42	Femal e	20. 7	Warfari n	Stroke, TIA	Single	Likely	none	-	365	0	0
3 9	31	Femal e	26. 1	Warfari n	DVT	Single	Definite	none	-	365	0	0
4 0	47	Femal e	37. 5	Warfari n	DVT	Single	Definite	none	-	365	0	0
4 1	61	Femal e	28	Warfari n	Stroke, TIA, pregnancy loss	N/A	Historic al	none	-	365	0	0
4 2	55	Femal e	41	Warfari n	DVT	N/A	Historic al	none	-	365	0	0
4 3	52	Femal e	22	Warfari n	DVT	N/A	Historic al	none	-	365	0	0
4 4	70	Femal e	27. 1	Warfari n	DVT	N/A	Historic al	none	-	365	0	0
4 5	73	Male	31. 1	Warfari n	Other arterial thrombosi s, DVT, PE	N/A	Historic al	none	-	365	0	0
4 6	40	Femal e	35. 9	Warfari n	DVT, PE	N/A	Historic al	none	-	365	0	0
4 7	63	Femal e	36	Warfari n	DVT	N/A	Historic al	none	-	365	0	0
4 8	32	Femal e	31. 6	Warfari n	Other arterial thrombosi s, DVT, pregnancy loss t twice daily; B	N/A	Historic al	none	-	365	0	0

APS: antiphospholipid syndrome; BID: twice daily; BMI: body mass index; DVT: Deep vein thrombosis; MI: myocardial infarction; PE: pulmonary embolism; TIA: transient ischemic attack

*Dose of apixaban the time of the outcome event

^Patients with APS where characterized as having *definite APS* defined as radiology verified thrombosis plus a qualifying laboratory result[#] *likely APS* was defined as radiology verified thrombosis plus at least 1 qualifying laboratory result; or *historical APS* was defined as a report of a qualifying thrombosis event along with a reported history of abnormal laboratory testing, but results were not available for confirmation

\$Derived from Sapporo Criteria: the presence of lupus anticoagulant or anticardiolipin IgG or IgM or anti- β -2-glycoprotein-1 IgG or IgM >40 IgG phospholipid Units (GPL) or IgM Phospholipid Units (MPL) or > the 99th percentile, on 2 separate occasions at least 12 weeks apart

N/A: not applicable as patient with historical APS

Supplemental Table 2: Unscheduled encounters and adverse outcomes during the study

Event type	Apixaban, n	Warfarin, n
Encounter type		
Emergency department	11	8
Unplanned doctor visit	10	10
Outcome		
Nuisance bleeding*	1	2
New cancer diagnosis	0	2
Isolated distal DVT	1	0

Supplemental Table 3: Details for each participant that experienced a thrombotic *or major bleed* event during the study

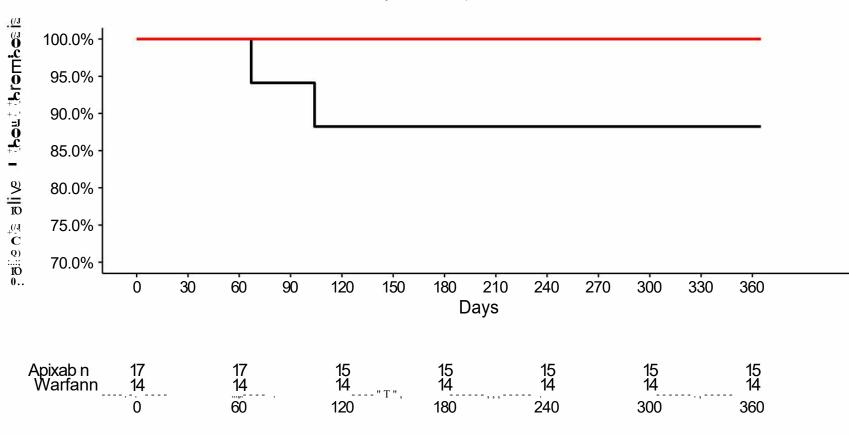
Patient Study	24	16	12	2	32	3	27
Identification	24	TO		2	52	5	21
Demographic							
Information							
Sex	Female	Female	Female	Female	Male	Female	Female
Age	40	43	47	51	66	69	62
BMI	39.3	36.9	19.4	25.5	39.3	23.2	30.5
Treatment	Apixaban	Apixaban	Apixaban	Apixaban	Apixaban	Apixaban	Warfarin
Level	Single	Triple	Double	Triple	-	-	-
Туре	Likely^	Definite^	Likely^	Definite^	Historical ^	Historical ^	Historical ^
Adverse Events							
Outcome Event Type	Stroke	Stroke	Stroke	Stroke	Stroke	Stroke	Major Bleed
Days to event	156	67	37	316	104	6	319
Stroke Distribution	Right anterior frontal lacunar	Anterior and posterior, unilateral	Bilateral anterior	Right frontal	Multifoca l left frontal	Right parietal	-
Single v. Multiple Lesions on MRI	Single	Multiple	Multiple	Single with multiple chronic infarcts	Multiple	Single	-
MRI DWI (Normal or Abnormal)	Abnormal DWI	Abnormal DWI	Abnormal DWI	Abnormal DWI	Abnormal DWI	Abnormal DWI	-
Hemorrhage Present	No	Yes T2W on MRI	No	No	No	No	
TOAST Classification	Undeter mined etiology	Undeter mined etiology	Undeter mined etiology	Undeter mined etiology	Cardioem bolic (atrial fibrillatio n)	Undeter mined etiology	-
Laboratory Diagnostics Lupus Anticoagulant Detected	x	х	х				
Anticardiolipin IgG positive*		Х	Х	Х			

Patient Study Identification	24	16	12	2	32	3	27
Anticardiolipin IgM							
positive*		Х		Х			
Anti-beta-2-							
Glycoprotein-1 IgG		Х	Х	Х			
positive*							
Anti-beta-2-							
Glycoprotein-1 IgM		Х		Х			
positive*							
Previous Thrombotic	х	Х	х	х	Х	х	х
Events		Λ		Λ	Л	Л	
Arterial Events	Х		Х	Х		Х	Х
Myocardial infarction							
Stroke	Х		Х	Х		Х	Х
Other				Х			
Venous Events	Х	Х	Х	Х	Х		Х
Deep vein	Х	х	х	х	х		х
thrombosis	٨	٨	۸	۸	٨		Ā
Pulmonary embolism	Х			Х			Х
Pregnancy morbidity	Х		Х			Х	
Risk Factors							
Smoking	Х		Х				
Hypertension		Х				Х	
Diabetes							
Dyslipidemia						Х	
Heritable							
thrombophilia				Х			Х
Charlson comorbidity	r		1	e	7	Λ	r
index	2		1	6	7	4	2
Comorbidities							
Systemic lupus							
erythematosus							
Autoimmune disease		Х		Х			
Depression/Anxiety			Х	Х			Х
Migraine/Headache			Х	Х			Х
GERD		Х		Х		Х	Х
Reactive airway/COPD			Х				
Chronic pain syndrome						Х	х
TIA/Stroke	Х					-	
Medications							

Patient Study	24	16	12	2	32	3	27
Identification	24	TO		Ζ.	52	5	Ζ1
Aspirin							
Statin						Х	
Hydroxychloroquine	Х	Х					Х
Other immunosuppressant	х	х					х
Antihypertensive	Х	Х		Х	Х		
Calcium		Х		Х			
Vitamin D	х	х		х		х	
Antidepressant/Anxiolyti			х			Х	
с							
Prescription analgesic		Х				Х	Х
Other vitamin			х	х		х	
supplement			Λ	Λ		~	
Diabetic medication							
Asthma/Reactive			х		Х		
airway			Λ		Λ		
Oral Contraceptive							
APS: antiphospholipid sync	drome; COP	D: chronic	obstructive	pulmonary	disease; GE	RD: gastroe	esophagea
reflux disease; SD: standar	d deviation	; TIA: transi	ient ischemi	c attack			
MRI: magnetic resonance i	maging						
DWI: Diffusion weighted in	naging						
*At the time of enrollment	:						
^Patients with APS where o	characteriz	ed as havin	g definite Al	PS defined a	as radiologic	ally verified	ł
thromhosis plus a qualifyin	o laborator	w rocult [#] lik	OLV ADS Was	defined as	radiological	ly vorified	

thrombosis plus a qualifying laboratory result[#] *likely APS* was defined as radiologically verified thrombosis plus at least 1 qualifying laboratory result; or *historical APS* was defined as a report of a qualifying thrombosis event along with a reported history of abnormal laboratory testing, but results were not available for confirmation

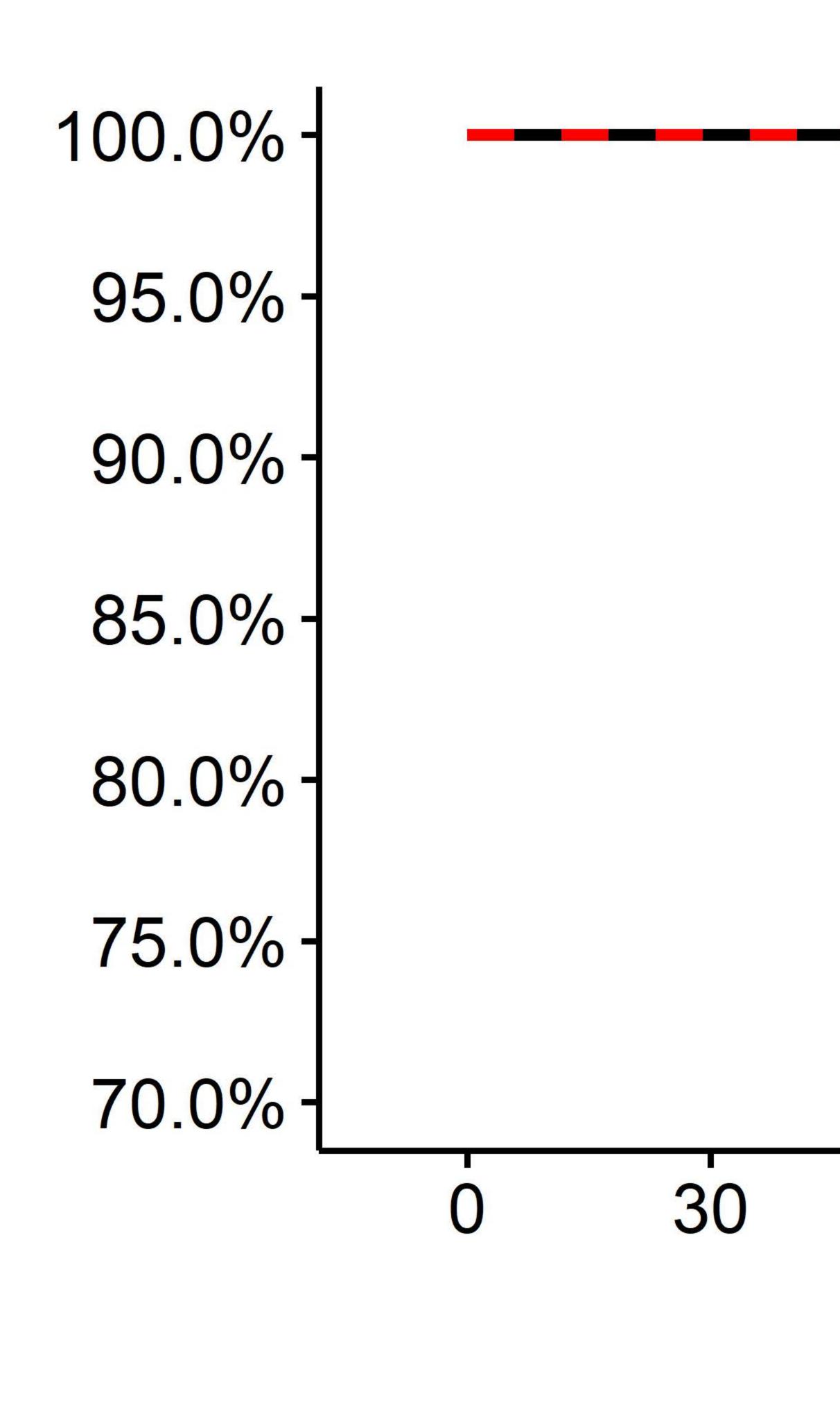
[#]Derived from Sapporo Criteria: the presence of lupus anticoagulant or anticardiolipin IgG or IgM or anti- β -2-glycoprotein-1 IgG or IgM >40 IgG phospholipid Units (GPL) or IgM Phospholipid Units (MPL) or > the 99th percentile, on 2 separate occasions at least 12 weeks apart Study Arm - Apixaban - Warfarin



Supplemental Figure 1: Kaplan–Meier cumulative event rate for major bleeding The solid black line is for apixaban and solid red line is for warfarin.



Supplemental Figure 2: Kaplan–Meier cumulative event rate of thrombosis and vascular death in the subgroup that did not have a history of arterial thrombosis. This Kaplan-Meier figure represents the 1-year event rate of thrombosis outcome (stroke) among only subjects enrolled with no prior history of arterial thrombosis. The black and red lines display apixaban and warfarin; respectively.



Apixaban -Warfarin -17 14

60	90	120	180 Days	210	240	270	300	330	360
17 14 60		17 14 120	17 14 180		17 14 240		17 14 300		17 14 360



Supplemental Figure 3: Kaplan–Meier cumulative event rate of major and clinically relevant non-major bleeding in the subgroup that did not have a history of arterial thrombosis. This Kaplan-Meier figure represents the 1-year event rate of major bleeding outcome among only subjects enrolled with no prior history of arterial thrombosis. The black and red lines display apixaban and warfarin; respectively.