**Supplementary methods**

**Clinical and laboratory variables**

Hypertension was considered as being present when the patient had been taking blood pressure-lowering agents, or had a resting systolic blood pressure ≥140 mm Hg or a diastolic blood pressure ≥90 mm Hg on repeated measurements. Diabetes mellitus was diagnosed when the patient had a fasting blood glucose level ≥7.0 mmol/L, or was being treated with oral glucose-lowering medications or insulin. Hyperlipidemia was diagnosed if the patient had total cholesterol level ≥6.2 mmol/L, low-density lipoprotein cholesterol level ≥4.1 mmol/L, or if the patient had taken lipid-lowering medications after the diagnosis of hyperlipidemia. Patients were defined as smokers if they were current smokers or had stopped smoking within 1 year before the index stroke. Coronary artery disease was defined as a history of myocardial infarction, unstable angina, or angiographically confirmed coronary artery occlusive disease. Metabolic syndrome was diagnosed when the patient had more than three components of abdominal obesity (waist circumference >102 cm for men, >88 cm for women); triglyceride level ≥1.7 mmol/L; low level of high-density lipoprotein (<1.04 mmol/L for men, <1.30 mmol/L for women); or blood pressure greater than 130/85 mm Hg; or fasting glucose level ≥6.1 mmol/L. Subjects whose recent mean weekly alcohol intake had regularly exceeded 300 g of ethanol were classified as heavy drinkers.1

**REFERENCE**