Supplementary Table 1. Exclusion criteria

Transient ischemic attack or severe (National Institutes of Health Stroke Scale >16) infarction
Infarcts that are not considered to be caused by atrial fibrillation (AF), or associated with two or more causes; e.g., lacunar infarction and AF, or ipsilateral significant (>50%) steno-occlusion and AF
Significant hemorrhagic transformation (grade I or II in European Cooperative Acute Stroke Study criteria) on screening magnetic resonance imaging (MRI)
Mechanical valve replacement or rheumatic heart disease
Intracranial hemorrhage within 3 months of study initiation
Active internal bleeding or clinically significant bleeding
Severe anemia (hemoglobin <10 g/dL) or hemorrhagic tendency (platelets <100,000/μL or prothrombin time/international normalized ratio >1.7); however, hemoglobin <9 g/dL or platelet count <70,000/μL were allowed when there was no sign of active bleeding
Bleeding-prone conditions such as recent gastric ulcer, hemorrhagic malignant tumor, recent head trauma, recent surgery on the brain, spinal cord, or the eye
Esophageal varices, arteriovenous malformation in the brain or spinal cord, or cerebral vascular aneurysm of >3.5 mm
Persistent systolic blood pressure (BP) >180 mm Hg or diastolic BP >110 mm Hg
Terminal medical diseases or cancer with a life expectancy of <6 months
Severe renal dysfunction (creatinine clearance <30 mL/min)
Those who needed to intake drugs that are known to influence the efficacy of edoxaban, e.g., carbamazepine, dexamethasone, doxorubicin, nefazodone, pentobarbital, phenobarbital, prazosin, rifampin, trazodone, vinblastine
Those who could not undergo brain MRI for any reason
Pregnant or planning pregnancy or lactation
Participating in another clinical trial
Those who needed to receive anticoagulants such as heparin, warfarin, or other non-vitamin K-dependent oral anticoagulants for any reason