Supplementary Table 3. Quality assessment of included studies

Study	Selection	Comparability	Outcome	Overall
Carrazco et al. (2018)[20]	3*	NA	3*	6/7
Cotter et al. (2013)[22]	3*	NA	3*	6/7
CRYSTAL-AF (2014)[23]	4*	NA	3*	7/7
Dion et al. (2010)[26]	3*	NA	2*	5/7
Etgen et al. (2013)[27]	3*	NA	2*	5/7
Israel et al. (2017)[28]	4*	NA	2*	6/7
Jorfida et al. (2016)[29]	4*	NA	2*	6/7
Makimoto et al. (2017)[33]	3*	NA	2*	5/7
Poli et al. (2016)[37]	4*	NA	3*	7/7
Ritter et al. (2013)[39]	3*	NA	3*	6/7
Rojo-Martinez et al. (2013)[41]	3*	NA	3*	6/7
SURPRISE (2014)[44]	3*	NA	3*	6/7
TRACK-AF (2018)[45]	3*	NA	3*	6/7
Ziegler et al. (2015)[46]	3*	NA	2*	5/7
Ziegler et al. (2017)[47]	46/56	NA	36/42	82/98

NA, not applicable; CRYSTAL-AF, Cryptogenic Stroke and underlying Atrial Fibrillation; SURPRISE, Stroke Prior to Diagnosis of Atrial Fibrillation Using Long-term Observation with Implantable Cardiac Monitoring Apparatus Reveal; TRACK-AF, Follow-up of Kryptogenic Stroke Patients With Implantable vs. Non-invasive Devices to Detect Atrial Fibrillation.
*Number of stars awarded for each category.

Supplementary Table 4. Univariate and multivariate meta-regression analyses of fully published studies on the association of monitoring duration and individual patient characteristics with the rate of atrial fibrillation detection using implantable cardiac monitoring

Variable	Univariate meta-regression analysis			Multivariate meta-regression analysis		
	Number	Coefficient (95% CI)	P	Number	Coefficient (95% CI)	P
Age	22	0.011 (−0.003 to 0.025)	0.110	16	0.037 (0.013 to 0.062)*	0.007
Male sex	22	−0.008 (−0.019 to 0.003)	0.136	–	–	
Hypertension	16	0.005 (0.001 to 0.010)	0.029	16	−0.006 (−0.019 to 0.007)	0.353
Diabetes mellitus	16	0.013 (0.001 to 0.024)	0.033	16	−0.001 (−0.007 to 0.005)	0.775
CHA_2DS_2VASc score	12	0.094 (−0.028 to 0.216)	0.118	–	–	
Duration of monitoring	22	0.007 (0.001 to 0.014)	0.049	16	0.009 (0.003 to 0.015)	0.006
Time from event to cardiac monitor implantation	16	0.001 (−0.001 to 0.002)	0.492	–	–	

CI, confidence interval.
*Mean patient age was included in the multivariate analysis as an *a priori* potential confounder.