

Supplementary Table 8. Overview of the study characteristics and reported prevalence of strictly lobar microbleeds in patients with AD

Author	Year	Country	Area	Definition domain	Study acronym/ name of cohort	n	Age: mean (SD) or median (range)	Female (%)	Hypertension (%)	MRI parameters (field strength [T]/sequence/ slice thickness)	Prevalence MBs strictly lobar/strictly deep/mixed (%)	QA
Benedictus ¹⁴³	2013	The Netherlands	West	Probable AD (NINCDS-ADRDA)	ADC	371	69 (9)	55.0	34.8	3/T2*/3	18/3/5	0
Boyano ¹⁴⁴	2018	Spain	West	AD (NINCDS-ADRDA)	ACRSF	152	81	NR	NR	3/T2*/2.4	15/13/16	1
Chang ¹²⁴	2021	China	East Asia	Probable AD (NINCDS-ADRDA)	Chinese PLA General Hospital	15	76	40.0	60.0	NR/SWI/1.2	53/NR/NR	5
Charidimou ¹⁴⁵	2016	USA	West	Clinically diagnosed AD	Memory clinic, MGH	86	NR	NR	NR	3/NR/5	29/NR/NR	3
Chiang ¹²⁵	2015	USA	West	Probable AD (NINCDS-ADRDA)	ADNI-2 and ADNI-GO	86	NR	NR	NR	3/T2*/4	35/3/3	1
Chiu ¹⁴⁶	2020	Taiwan	East Asia	Mild to moderate AD (DSM-IV) no comorbidities (such as obvious vascular insults, vitamin B12/folate deficiency, and metabolic disorders)	Shuang Ho Hospital	112	76 (8)	70.5	32.1	1.5 or 3/T2*/2.4 (1.5 T) or 2 (3 T)	6/5/17	6.5
De Kort ¹⁴⁷	2021	The Netherlands	West	Probable AD (NINCDS-ADRDA)	Radboud University Medical Center	17	74	NR	NR	1.5 or 3.0/ either T2* or SWI/NR	18/NR/NR	8.5
Donaghy ¹²⁶	2020	UK	West	Probable AD (NINCDS-ADRDA)	Secondary care services in the North of England	18	75.8 (7.1)	11.1	61.1	3/SWI/3	44/0/6	4
Ikeda ¹⁴⁸	2021	Japan	East Asia	Probable AD (NINCDS-ADRDA)	Gunma University Hospital, Geriatrics Research Institute and Hospital, Maebashi Red Cross Hospital	85	69.8 (8.4)	57.6	21.2	1.5 or 3/T2*/5 or 5.5	31/NR/NR	11.5
Inoue ¹⁴⁹	2016	Japan	East Asia	AD (NINCDS-ADRDA)	Kumamoto University Hospital	162	75 (9)	65.4	41.4	3/combined T2* and SWI/2	25/3/19	1
Kuroda ¹⁵⁰	2020	Japan	East Asia	Probable AD (NINCDS-ADRDA)	Showa University School of Medicine, Japan	40	78.9 (7.9)	55.0	NR	1.5/T2*/6	50/NR/NR	4.5
Mendes ¹⁵¹	2020	Switzerland	West	Probable/Possible AD (NINCDS-ADRDA)	Geneva University Hospitals	114	82	67.5	57.0	3/T2*/NR	9/NR/NR	2.5
Nagasawa ¹⁵²	2014	Japan	East Asia	AD (NINCDS-ADRDA)	Toho University Hospital	559	78.4 (7.7)	57.4	36.0	1.5/T2*/5	13/11/0	0
Nakata-Kudo ¹³⁴	2006	Japan	East Asia	32 Probable AD, 10 Possible AD (NINCDS-ADRDA). 42 AD patients without CVD and 8 with CVD	Kyoto University Hospital	50	74.5	66.0	48.0	1.5/T2*/5	16/0/0	1
Noguchi-Shinohara ¹⁵³	2017	Japan	East Asia	Probable AD (NINCDS-ADRDA)	Kanazawa University Hospital	88	68 (8.3)	42.0	38.6	1.5/T2*/6	17/18/3	2.5
Shams ¹⁵⁴	2016	Sweden	West	AD (ICD-10 classification)	KIDS	423	68 (8)	45.2	35.7	1.5/NR/NR	16/4/NR	3
Sparacia ¹⁵⁵	2017	Italy	West	Probable AD (NINCDS-ADRDA)	University Hospital Palermo	54	76.8 (5.2)	63.0	NR	1.5/SWI/1.2	70/24/6	1
van der Vlies ¹⁵⁶	2012	Netherlands	West	Probable AD (NINCDS-ADRDA)	VUMC memory clinic	221	68 (9)	49.3	30.8	NR/T2*/5	10/3/5	3

Supplementary Table 8. Continued

Author	Year	Country	Area	Definition domain	Study acronym/ name of cohort	n	Age: mean (SD) or median (range)	Female (%)	Hypertension (%)	MRI parameters (field strength [T]/sequence/ slice thickness)	Prevalence MBs strictly lobar/strictly deep/mixed (%)	QA
Zhang ¹⁵⁷	2016	China	East Asia	Probable AD (NINCDS-ADRDA)	Weihai Municipal Hospital, China	146	72.1 (7.4)	56.8	26.7	3/SWI/1.2	20/4/8	0

Prevalence of microbleeds shows the prevalence of (1) strictly lobar microbleeds, (2) strictly deep microbleeds, and (3) mixed microbleeds. ACRSF, Alzheimer's Center Reina Sofia Foundation-CIEN Foundation; ADC, Amsterdam Dementia Cohort; ADNI-2, Alzheimer's Disease Neuroimaging Initiative-2; ADNI-GO, Alzheimer's Disease Neuroimaging Initiative-GO; CMBs, cerebral microbleeds; KIDS, Karolinska Imaging Dementia Study; MGH, Massachusetts General Hospital; VUMC, Vrije Universiteit Medisch Centrum, Amsterdam, the Netherlands; AD, Alzheimer's disease; CAA, cerebral amyloid angiopathy; CDR, clinical dementia rating; CMBs, cerebral microbleeds; CVD, cerebrovascular disease; ICD-10, International Statistical Classification of Diseases and Related Health Problems-10; MBs, microbleeds; MRI, magnetic resonance imaging; NR, not reported; NINCDS-ADRDA, neurological and communicative disorders and stroke Alzheimer disease and related disorders association; QA, total score of quality assessment; SWI, susceptibility-weighted imaging; USA, United States of America.

Supplementary Table 9. Overview of the study characteristics and reported prevalence of strictly lobar microbleeds in patients with intracerebral hemorrhage

Author	Year	Country	Area	Definition domain	Study acronym/ name of cohort	n	Age: mean (SD) or median (range)	Female (%)	Hypertension (%)	MRI parameters (field strength [T]/sequence/ slice thickness)	Prevalence MBs strictly lobar/strictly deep/mixed (%)	QA
Biffi ¹⁵⁸	2016	USA	West	Spontaneous ICH	MGH ICH LS	522	NR	NR	NR	NR/NR/NR	26/25/10	2.5
Fazekas ⁹²	1999	Austria	West	Fatal ICH	University Hospital Graz	11	72	45.5	63.6	1.5/T2*/5	18/9/36	1
Ghelmez ¹⁵⁹	2013	Romania	West	ICH, not further specified	NINND, Bucharest	24	NR	NR	NR	NR/combined T2* and SWI/ NR	17/13/21	10.5
Haussen ¹⁶⁰	2012	USA	West	Spontaneous ICH	BIDMC, Boston	163	68.4 (15.2)	40.5	66.3	NR/T2*/NR	24/13/15	0
Jolink ¹⁶¹	2020	The Netherlands	West	Spontaneous ICH	FETCH	31	60 (12)	29.0	61.3	7/T2*/0.35	16/NR/NR	5
Laible ¹⁶²	2015	Germany	West	Spontaneous ICH	University Hospital Heidelberg	97	65.9 (13.9)	44.3	76.3	3/SWI/NR	19/9/30	3
Marti- Fabregas ¹⁶³	2013	Spain	West	Spontaneous supratentorial ICH	6 University hospitals in Spain	44	68.9 (11.1)	29.5	63.6	NR/T2*/NR	39/32/30	4
Schwarz ¹⁶⁴	2022	UK	West	Spontaneous non-cerebellar ICH	CROMIS-2 ICH	153	69	38.6	56.2	NR/either T2* or SWI/NR	30/NR/NR	6
Tsai ¹⁶⁵	2017	Taiwan	East Asia	Spontaneous ICH	National Taiwan University Hospital	57	65.7 (13.4)	43.9	NR	3/SWI/1.6	14/19/49	0
Wang ¹⁶⁶	2019	China	East Asia	Spontaneous ICH	Beijing Tiantan Hospital	306	56 (13.3)	28.4	73.2	3/SWI/1.6	4/21/NR	0
Xu ¹⁶⁷	2019	China	East Asia	Spontaneous ICH (first-ever [139] or recurrent [45])	West China Hospital	184	61 (12.5)	24.5	66.3	3/SWI/NR	15/24/34	2.5

Prevalence of microbleeds shows the prevalence of (1) strictly lobar microbleeds, (2) strictly deep microbleeds, and (3) mixed microbleeds. ATACH-2, Antihypertensive Treatment of Acute Cerebral Haemorrhage 2; BIDMC, Beth Israel Deaconess Medical Center; CMBs, cerebral microbleeds; DECI-PHER, DiffErenCes in the Imaging of Primary Haemorrhage based on Ethnicity or Race; MGH ICH LS, Massachusetts General Hospital Intracerebral Haemorrhage Longitudinal Study; NINND, National Institute of Neurology and Neurovascular Diseases; BOMBS, Brain Observer MicroBleed Scale; ICH, intracerebral hemorrhage; MBs, microbleeds; MRI, magnetic resonance imaging; NR, not reported; QA, total score of quality assessment; SWI, susceptibility-weighted imaging; SBP, Systolic Blood Pressure; T, tesla; USA, United States of America.