Supplementary Table 2. Profiles of antithrombotics at discharge

	2013	2014	2016	2018	2020/2021	2022/2023	P_{trend}
Ischemic stroke, all							
No treatment	2.3	2.4	2.3	1.9	1.8	1.7	<0.001
Aspirin mono	14.0	12.0	9.8	8.4	5.2	4.2	<0.001
Other antiplatelets mono	7.3	6.9	4.9	4.0	3.8	3.6	<0.001
Clopidogrel	5.6	5.1	3.8	2.9	2.9	2.9	<0.001
Cilostazol	0.8	0.9	0.8	0.8	0.7	0.5	<0.001
Triflusal	0.3	0.5	0.2	0.2	0.1	0.1	<0.001
Ticlopidine	0.6	0.3	0.2	0.1	0.1	0.04	<0.001
Other	0.0	0.0	0.01	0.0	0.0	0.0	0.861
Antiplatelets dual or above	55.4	59.5	62.7	65.2	66.8	67.2	<0.001
Aspirin+clopidogrel	40.0	44.2	48.9	51.3	54.7	56.9	<0.001
Aspirin+cilostazol	6.2	5.6	4.6	3.9	3.3	2.2	<0.001
Clopidogrel+cilostazol	0.7	0.6	0.5	0.6	0.5	0.4	<0.001
Other combination of dual	1.5	1.7	1.1	1.1	0.8	0.8	<0.001
Other combination of triple or above	7.1	7.3	7.4	8.2	7.4	6.9	0.142
Anticoagulants without antiplatelets	5.5	5.1	5.6	6.3	6.7	7.3	<0.001
Warfarin	5.3	5.0	1.7	1.2	0.9	0.9	<0.001
Dabigatran	0.2	0.1	1.3	1.0	0.7	0.4	0.142
Rivaroxaban	0.1	0.2	1.3	1.2	1.0	1.2	<0.001
Edoxaban	0.0	0.0	0.5	1.1	1.6	2.1	<0.001
Apixaban	0.0	0.04	1.8	2.5	3.7	3.9	<0.001
Anticoagulants with antiplatelets	15.5	14.3	14.7	14.2	15.8	16.1	<0.001
Aspirin+warfarin	5.5	4.4	1.1	0.7	0.5	0.4	<0.001
Aspirin+NOAC	0.5	0.1	3.6	3.9	4.0	3.7	<0.001
Other combination	9.5	9.8	10.0	9.6	11.3	12.0	<0.001

Values are percent. P_{trend} was calculated using the Cochran-Armitage test for categorical variables across the six assessment rounds.
NOAC, non-vitamin K antagonist oral anticoagulant.

https://doi.org/10.5853/jos.2026.00360