

Appendix 2: Line Listing of Serious Adverse Reactions (SARs)

SARs from AXAFA-AFNET 5 study, only. Data are sorted according to patient ID and ascending date of onset.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
3	be	Male	VKA	59	SAE.1	25	25	Chest pain	30.03.2015	Not related	Not related	Resolved		
5	dk	Female	VKA	70	SAE.2	35	35	Pericardial effusion	21.04.2015	Not related	Not related	Resolved		
17	be	Male	VKA	64	SAE.3	12	12	Haematuria; Haemorrhage	28.04.2015	Not related	Not related	Resolved	Yes	Acc. to RSI, section 4.8 of phenprocoumon: haematuria related to the renal or urinary tract are frequently observed undesirable effects. Thus, this related SA is expected.
5	dk	Female	VKA	70	SAE.2.2	43	43	Haemorrhagic stroke; Death; Haemorrhage intracranial	29.04.2015	Warfarin	Warfarin	Death	Yes	Acc. to section 4.8 of the warfarin-RSI \Nervous system disorders - Cerebral haemorrhage" is described as expected undesirable effect. Thus, this related SAE is expected."
3	be	Male	VKA	59	SAE.4	60	60	Scleroderma	04.05.2015	Not related	Not related	Did not resolve		No modification of sec. assessment necessary due to changes of SAE data.
8	be	Male	VKA	69	SAE.6	57	57	Pneumonia	22.05.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
35	dk	Female	Apixaban	67	SAE.13	7	7	Infection	16.06.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
28	dk	Female	Apixaban	59	SAE.10	31	30	Non-cardiac chest pain	18.06.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data
33	dk	Male	Apixaban	69	SAE.11	22	22	Death	23.06.2015	Not related	Not related	Death		
31	be	Female	VKA	64	SAE.8	36	36	Pericarditis	03.07.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
21	be	Male	Apixaban	65	SAE.7	71	71	Haemorrhage; Haematuria	07.07.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data
50	de	Male	Apixaban	55	SAE.76	12	12	Atrial fibrillation	29.07.2015	Not related	Not related	Resolved		
39	be	Male	VKA	73	SAE.15	46	46	Hydronephrosis; Calculus urinary	01.08.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
10	be	Male	Apixaban	64	SAE.12	140	126	Coronary artery stenosis	17.08.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
28	dk	Female	Apixaban	59	SAE.14	94	93	Chest pain	20.08.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
60	de	Male	Apixaban	65	SAE.17	10	9	Atrial fibrillation	03.09.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data
58	dk	Male	Apixaban	65	SAE.16	28	24	Pneumonia	10.09.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
52	dk	Male	Apixaban	62	SAE.32	45	45	Atrial fibrillation	11.09.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
56	be	Male	Apixaban	61	SAE.18	37	36	Catheter site haemorrhage	16.09.2015	Apixaban (5.0 mg, provided as study drug)	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	Acc. to RSI (4.8), post procedural haemorrhage (including post procedural haematoma, wound haemorrhage, vessel puncture site haematoma and catheter site haemorrhage) is expected with uncommon frequency (=1/1,000 to < 1/100).
68	de	Male	Apixaban	65	SAE.19	12	9	Angina pectoris	19.09.2015	Not related	Not related	Resolved		PVI is not considered an IMP in this trial. No modification of sec. assessment necessary due to changes of SAE data.
59	be	Male	VKA	63	SAE.21	35	35	Phlebitis	22.09.2015	Phenprocoumon	Phenprocoumon	Resolved		PVI is not considered an IMP in this trial. No modification of sec. assessment necessary due to changes of SAE data.
47	dk	Male	Apixaban	65	SAE.26	84	83	Atrial fibrillation	29.09.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
78	dk	Male	VKA	66	SAE.24	26	26	Catheter site haemorrhage; Vascular pseudoaneurysm	13.10.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
78	dk	Male	VKA	66	SAE.24.2	27	27	Pneumonia	14.10.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
104	de	Male	Apixaban	63	SAE.27	1	1	Burn oesophageal	21.10.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
63	dk	Female	Apixaban	59	SAE.77	60	60	Atrial fibrillation	26.10.2015	Not related	Not related	Resolved		
78	dk	Male	VKA	66	SAE.30	42	42	Pneumonia	29.10.2015	Not related	Not related	Resolved		Therapeutic action of all VKAs is measured by an increase of INR, thus, an increased INR is per se expected when VKAs are taken. VKAs have to be dosed individually for each pt., thus, repeating INR measures are necessary to adapt dosing. Thus, even largely increased INR measures can be expected. No modification of sec. assessment necessary due to changes of SAE data. The SAE did not lead to any symptom or medical discomfort and was just noticed as abnormal laboratory value.
95	dk	Female	VKA	58	SAE.44	31	31	Chest pain; Dizziness	12.11.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
84	de	Female	VKA	72	SAE.38	53	53	Atrial fibrillation	17.11.2015	Not related	Not related	Resolved		
118	nl	Male	Apixaban	64	SAE.12.2	26	25	Transient ischaemic attack	07.12.2015	Not related	Not related	Resolved		MRI shows mild ischemic lesion but no bleeding. Lack of therapeutic effect is not an adverse effect of the IMP.
80	dk	Male	VKA	59	SAE.34	86	86	Catheter site haemorrhage; Vascular pseudoaneurysm	16.12.2015	Not related	Not related	Resolved		Index PVI is not an IMP. No modification of sec. assessment necessary due to changes of SAE data.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
112	nl	Male	VKA	71	SAE.72	55	49	Colon cancer	24.12.2015	Not related	Not related	Did not resolve		
132	dk	Male	VKA	59	SAE.41	27	27	Atrial fibrillation	29.12.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
128	dk	Female	Apixaban	77	SAE.35	35	35	Pericarditis	30.12.2015	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
154	de	Female	Apixaban	57	SAE.49	6	6	Catheter site haemorrhage; Vascular pseudoaneurysm	05.01.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
126	nl	Female	VKA	67	SAE.36	54	54	Atrial fibrillation	12.01.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
151	nl	Male	VKA	60	SAE.39	17	8	Angina pectoris	14.01.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
156	dk	Female	Apixaban	71	SAE.37	10	10	Infection	14.01.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
140	dk	Male	VKA	69	SAE.42	39	39	Cardiac failure	23.01.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
179	de	Female	VKA	76	SAE.43	3	3	Catheter site haemorrhage; Arteriovenous fistula; Vascular pseudoaneurysm	25.01.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
159	dk	Male	Apixaban	63	SAE.40	21	21	Ischaemic stroke	26.01.2016	Not related	Not related	Resolved		Ischemic stroke is not a related side effect of an anticoagulant drug. Lack of therapeutic effect is no side effect. A hemorrhagic stroke would be related as undesirable effect of the anticoagulant drug but this was excluded here by MRI.
172	de	Male	Apixaban	48	SAE.73	15	15	Supraventricular extrasystoles	02.02.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
164	be	Male	Apixaban	51	SAE.45	23	23	Catheter site haemorrhage; Vascular pseudoaneurysm	04.02.2016	Apixaban (5.0 mg, provided as study drug)	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	According to SmPC of apixaban, section 4.8, application site bleeding is an uncommon ($\approx 1/1,000$ to $< 1/100$) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
153	nl	Female	Apixaban	29	SAE.46	41	41	Catheter site haemorrhage; Vascular pseudoaneurysm	08.02.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
187	de	Female	VKA	74	SAE.48	5	5	Atrial fibrillation	08.02.2016	Not related	Not related	Resolved		
112	nl	Male	VKA	71	SAE.55	103	97	Diarrhoea	10.02.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
195	de	Male	Apixaban	41	SAE.50	1	1	Catheter site haemorrhage	18.02.2016	Apixaban (5.0 mg, provided as study drug)	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	According to SmPC (RSI) of apixaban, section 4.8, post-procedural haemorrhage is an uncommon (=1/1,000 to < 1/100) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
182	de	Male	VKA	61	SAE.51	28	24	Haemorrhage; Haematuria	23.02.2016	Phenprocoumon	Phenprocoumon	Resolved	Yes	According to SmPC (RSI) of phenprocoumon, section 4.8, macrohaematuria is a very common (>= 10%) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
200	de	Male	VKA	60	SAE.52	6	6	Pericardial haemorrhage	24.02.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
178	nl	Male	Apixaban	64	SAE.53	35	32	Abdominal pain	26.02.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
197	es	Female	VKA	61	SAE.58	14	14	Gastroenteritis	02.03.2016	Not related	Not related	Resolved		
177	dk	Female	VKA	65	SAE.197	44	39	Atrial fibrillation	04.03.2016	Not related	Not related	Resolved		
151	nl	Male	VKA	60	SAE.68	71	62	Asthma	08.03.2016	Not related	Not related	Resolved		
189	be	Male	VKA	48	SAE.54	32	32	Urinary retention	08.03.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
190	es	Male	VKA	77	SAE.57	31	31	Vascular pseudoaneurysm; Catheter site haemorrhage	10.03.2016	Acenocoumarol	Acenocoumarol	Resolved	Yes	According to SmPC of acenocoumarol, section 4.8, haemorrhage is a common (=1/100 to < 1/10) undesirable effect. Thus, this IMP related event is not unexpected.
215	dk	Male	VKA	69	SAE.82	7	7	Epididymitis	11.03.2016	Not related	Not related	Resolved		
112	nl	Male	VKA	71	SAE.63	134	128	Diarrhoea	12.03.2016	Not related	Not related	Resolved		
125	dk	Male	Apixaban	49	SAE.56	116	116	Renal failure	14.03.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
151	nl	Male	VKA	60	SAE.69	83	74	Lower respiratory tract infection	20.03.2016	Not related	Not related	Resolved		
100	nl	Male	VKA	62	SAE.62	159	122	Cardiac ablation	23.03.2016	Not related	Not related	Resolved		
100	nl	Male	VKA	62	SAE.62	159	122	Cardiac ablation	23.03.2016	Not related	Not related	Resolved		
125	dk	Male	Apixaban	49	SAE.61	128	128	Syncope	26.03.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
213	de	Male	VKA	73	SAE.59	27	27	Hernia repair	30.03.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
168	de	Male	VKA	55	SAE.65	83	83	Catheter site haemorrhage	05.04.2016	Not related	Not related	Resolved		

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168	de	Male	VKA	55	SAE.65.2	85	85	Atrial fibrillation	07.04.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
223	us	Male	VKA	83	SAE.66	24	22	Hypotension	09.04.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
234	de	Female	VKA	74	SAE.67	6	6	Electrocardiogram change	13.04.2016	Not related	Not related	Resolved		
239	be	Male	Apixaban	72	SAE.70	11	10	Bradycardia	19.04.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
250	de	Female	VKA	56	SAE.75	1	1	Atrial fibrillation	20.04.2016	Not related	Not related	Resolved		
156	dk	Female	Apixaban	71	SAE.78	109	93	Back pain	22.04.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
251	de	Male	VKA	77	SAE.74	4	4	Atrial fibrillation	23.04.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
227	nl	Male	VKA	59	SAE.119	43	39	Atrial fibrillation	07.05.2016	Not related	Not related	Resolved		
231	dk	Male	VKA	65	SAE.118	37	37	Atrial fibrillation	07.05.2016	Not related	Not related	Resolved		
229	nl	Male	Apixaban	63	SAE.79	43	43	Urosepsis	13.05.2016	Not related	Not related	Resolved		
273	de	Female	VKA	65	SAE.84	9	8	Pneumonia	15.05.2016	Not related	Not related	Resolved		
264	nl	Male	Apixaban	61	SAE.80	18	18	Respiratory tract infection	20.05.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
273	de	Female	VKA	65	SAE.84.2	17	16	Atrial fibrillation	23.05.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
215	dk	Male	VKA	69	SAE.86	81	81	Pneumonia	24.05.2016	Not related	Not related	Resolved		
260	be	Female	VKA	61	SAE.88	27	27	Atrial fibrillation	24.05.2016	Not related	Not related	Resolved		The recurrence of AF can not be considered as related to the antiarrhythmic therapy to treat AF, e.g. PVI. Lack of therapeutic effect is not an adverse event. No modification of sec. assessment necessary due to changes of SAE data.
132	dk	Male	VKA	59	SAE.87	175	146	Atrial fibrillation	25.05.2016	Not related	Not related	Resolved		
239	be	Male	Apixaban	72	SAE.90	48	47	Angina pectoris	26.05.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
274	be	Female	Apixaban	72	SAE.94	17	17	Cardiac failure	26.05.2016	Not related	Not related	Resolved		
277	be	Female	VKA	60	SAE.89	18	17	Vascular pseudoaneurysm; Catheter site haemorrhage	27.05.2016	Phenprocoumon	Phenprocoumon	Resolved	Yes	According to SmPC (RSI) of phenprocoumon, section 4.8, hematoma following injury is a very common (>= 10%) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
125	dk	Male	Apixaban	50	SAE.92	194	194	Atrial fibrillation	31.05.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
253	nl	Female	VKA	78	SAE.91	40	40	Transfusion; Haemorrhoidal haemorrhage	31.05.2016	Apixaban (non-study drug)	Apixaban (non-study drug)	Resolved	Yes	According to SmPC (RSI) of acenocoumarol, section 4.8, haemorrhage is a common (1/100, <1/10%) undesirable effect: \Haemorrhage, in various organs, is the most common side-effect associated with acenocoumarol. its occurrence is related to the dosage of the drug, the patient's age and the nature of the underlying disease (but not the duration of treatment). Fatalities have been reported. Possible sites of haemorrhage include the gastro-intestinal tract, brain, urogenital tract, uterus, liver, gall bladder and the eye.\\" Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data."
268	dk	Female	Apixaban	70	SAE.93	31	31	Atrial flutter	03.06.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
212	dk	Male	Apixaban	69	SAE.116	99	99	Osteoarthritis	08.06.2016	Not related	Not related	Resolved		
237	de	Female	Apixaban	53	SAE.106	67	67	Musculoskeletal pain	13.06.2016	Not related	Not related	Resolved		
300	be	Female	VKA	70	SAE.95	15	15	Vascular pseudoaneurysm; Catheter site haemorrhage	16.06.2016	Apixaban (non-study drug)	Apixaban (non-study drug)	Resolved	Yes	According to SmPC (RSI) of phenprocoumon, section 4.8, hematoma following injury is a very common (>= 10%) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
311	de	Female	Apixaban	54	SAE.97	2	2	Atrial fibrillation	16.06.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
194	de	Female	Apixaban	72	SAE.103	122	104	Troponin increased	17.06.2016	Not related	Not related	Resolved		
194	de	Female	Apixaban	72	SAE.103	122	104	Troponin increased	17.06.2016	Not related	Not related	Resolved		
207	gb	Male	Apixaban	59	SAE.110	117	115	Atrial tachycardia	20.06.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
290	be	Male	VKA	57	SAE.96	28	6	Vascular pseudoaneurysm; Catheter site haemorrhage	20.06.2016	Not related	Not related	Resolved		The pseudoaneurysm is more likely to be related to the index ablation procedure than to the anticoagulation treatment. No modification of sec. assessment necessary due to changes of SAE data.
250	de	Female	VKA	56	SAE.112	66	66	Atrial fibrillation	24.06.2016	Not related	Not related	Resolved		No additional SAE. SAE No. 2 represents the major event.
300	be	Female	VKA	70	SAE.98	26	26	Vascular pseudoaneurysm; Catheter site haemorrhage	27.06.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
311	de	Female	Apixaban	54	SAE.14 4	13	13	Syncope; Medical device implantation	27.06.2016	Not related	Not related	Resolved		
269	nl	Male	Apixaban	52	SAE.10 0	57	57	Ischaemic stroke	30.06.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
281	dk	Female	Apixaban	71	SAE.10 1	48	47	Catheter site haemorrhage; Vascular pseudoaneurysm	30.06.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
285	it	Male	Apixaban	66	SAE.99	41	41	Urinary tract infection	30.06.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
158	dk	Male	VKA	64	SAE.10 4	179	126	Urosepsis	02.07.2016	Not related	Not related	Resolved		
324	be	Male	Apixaban	55	SAE.11 1	3	3	Tibia fracture	02.07.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
298	de	Male	VKA	66	SAE.14 3	5	5	Atrial fibrillation	03.07.2016	Not related	Not related	Resolved		
253	nl	Female	VKA	78	SAE.10 5	74	47	Cardiac ablation; Atrial fibrillation	04.07.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
294	be	Female	VKA	60	SAE.10 7	39	39	Catheter site haemorrhage; Vascular pseudoaneurysm	05.07.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
228	dk	Female	VKA	68	SAE.12 3	104	104	Malignant breast lump removal	11.07.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
318	dk	Male	VKA	66	SAE.11 7	20	19	Haemorrhagic stroke; Haemorrhage intracranial	11.07.2016	Warfarin	Warfarin	Resolved	Yes	According to SmPC of warfarin, section 4.8, cerebral haemorrhage is a known undesirable effect. Thus, this IMP related event is not unexpected.
269	nl	Male	Apixaban	52	SAE.11 4	70	58	Chest pain	13.07.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
300	be	Female	VKA	70	SAE.11 3	42	42	Catheter site haemorrhage; Vascular pseudoaneurysm	13.07.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
168	de	Male	VKA	56	SAE.10 9	184	184	Sensation of foreign body	15.07.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
228	dk	Female	VKA	68	SAE.12 4	114	114	Malignant breast lump removal	21.07.2016	Not related	Not related	Resolved		
199	nl	Female	Apixaban	71	SAE.13 3	155	145	Cardiac failure	22.07.2016	Not related	Not related	Resolved		Missing data. No second assessment yet possible.
215	dk	Male	VKA	69	SAE.12 8	142	142	Syncope	24.07.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
228	dk	Female	VKA	68	SAE.125	126	126	Mastectomy	02.08.2016	Not related	Not related	Resolved		
322	be	Female	VKA	60	SAE.115	36	36	Pericardial effusion	03.08.2016	Not related	Not related	Resolved		
301	gb	Female	Apixaban	69	SAE.127	71	69	Pericardial haemorrhage; Transfusion	11.08.2016	Not related	Not related	Resolved		
125	dk	Male	Apixaban	50	SAE.120	271	271	Atrioventricular block; Cardiac pacemaker insertion	16.08.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
341	nl	Male	VKA	68	SAE.121	35	35	Renal failure	16.08.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
250	de	Female	VKA	56	SAE.126	120	100	Atrial fibrillation; Cardiac ablation	17.08.2016	Not related	Not related	Resolved		
327	de	Male	Apixaban	74	SAE.150	49	49	Dyspnoea	18.08.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
317	dk	Male	Apixaban	70	SAE.161	63	63	Atrial fibrillation; Cardioversion	22.08.2016	Not related	Not related	Resolved		
354	de	Male	VKA	64	SAE.129	23	23	Pericardial haemorrhage	24.08.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
260	be	Female	VKA	61	SAE.137	124	103	Chest pain	29.08.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
367	de	Male	Apixaban	70	SAE.138	17	17	Atrial flutter	31.08.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
382	de	Male	VKA	57	SAE.141	4	4	Atrial fibrillation; Cardioversion	04.09.2016	Not related	Not related	Resolved		
357	at	Male	VKA	58	SAE.131	32	32	Pericardial haemorrhage	06.09.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
366	us	Male	Apixaban	70	SAE.132	26	25	Haemorrhage; Haematuria	07.09.2016	Apixaban (5.0 mg, provided as study drug)	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	According to SmPC of apixaban, section 4.8, haematuria is a common ($\geq 1\%$ and $< 10\%$) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
377	be	Female	VKA	75	SAE.134	13	13	Pericarditis	07.09.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
382	de	Male	VKA	57	SAE.141.2	11	11	Cardiac arrest; Cardiac pacemaker insertion	11.09.2016	Not related	Not related	Resolved		
324	be	Male	Apixaban	55	SAE.139	75	75	Atrial flutter; Cardioversion	12.09.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
370	us	Male	VKA	64	SAE.136	25	25	Coagulation time abnormal	12.09.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
304	de	Male	Apixaban	68	SAE.210	62	61	Cardiac failure	14.09.2016	Not related	Not related	Resolved		
324	be	Male	Apixaban	55	SAE.142	82	82	Atrial flutter	19.09.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
231	dk	Male	VKA	65	SAE.147	174	132	Cardioversion; Atrial fibrillation	21.09.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
300	be	Female	VKA	70	SAE.148	121	96	Atrial fibrillation	30.09.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
304	de	Male	Apixaban	68	SAE.210.2	78	77	Atrial fibrillation; Cardiac pacemaker insertion	30.09.2016	Not related	Not related	Resolved		
350	at	Male	VKA	50	SAE.145	70	69	Atrial fibrillation	30.09.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
375	be	Male	VKA	57	SAE.146	42	42	Catheter site haemorrhage; Haematoma	05.10.2016	Phenprocoumon	Phenprocoumon	Resolved	Yes	According to SmPC of phenprocoumon, section 4.8, bleeding and hematoma related to lesions are a common (>= 1% and < 10%) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
380	dk	Male	Apixaban	69	SAE.149	37	35	Atrial fibrillation; Cardioversion	05.10.2016	Not related	Not related	Resolved		
287	de	Male	Apixaban	75	SAE.154	140	125	Atrial fibrillation; Cardioversion	07.10.2016	Not related	Not related	Resolved		
304	de	Male	Apixaban	68	SAE.210.3	91	90	Neoplasm malignant	13.10.2016	Not related	Not related	Resolved		
338	de	Male	VKA	53	SAE.151	97	97	Pericardial haemorrhage	13.10.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
420	be	Female	Apixaban	73	SAE.153	16	15	Pericarditis	20.10.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
383	nl	Male	VKA	63	SAE.200	50	50	Syncope; Atrial fibrillation; Cardioversion	21.10.2016	Not related	Not related	Resolved		
420	be	Female	Apixaban	73	SAE.153.2	20	19	Melaena; Haemorrhage	24.10.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
367	de	Male	Apixaban	70	SAE.178	74	74	Cardioversion; Atrial flutter	27.10.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
394	dk	Female	VKA	72	SAE.155	44	44	Phrenic nerve paralysis	27.10.2016	Not related	Not related	Did not resolve		No modification of sec. assessment necessary due to changes of SAE data.
403	it	Female	Apixaban	77	SAE.156	36	36	Atrial flutter	28.10.2016	Not related	Not related	Resolved		
408	it	Male	Apixaban	59	SAE.160	33	33	Atrial fibrillation	29.10.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
395	es	Male	Apixaban	65	SAE.157	50	47	Catheter site haemorrhage; Vascular pseudoaneurysm	03.11.2016	Apixaban (5.0 mg, provided as study drug)	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	SAE 157 No. 1 was overwritten with SAE 157 No. 2 and No. 2 was deleted. Thus, second assessment of No. 2 has to be transferred to No. 1. Now, SAE 157 No. 1 is related: According to SmPC of apixaban, section 4.8, traumatic haemorrhage, post procedural haemorrhage, incision site haemorrhage is an uncommon (=1/1,000 to < 1/100) undesirable effect. Thus, this IMP related event is not unexpected.
393	be	Female	Apixaban	62	SAE.222	57	57	Pericarditis	08.11.2016	Not related	Not related	Resolved		
409	de	Female	Apixaban	81	SAE.188	43	43	Hypotension	09.11.2016	Not related	Not related	Resolved		
403	it	Female	Apixaban	77	SAE.158	50	50	Atrial flutter	11.11.2016	Not related	Not related	Resolved		
454	be	Male	VKA	56	SAE.159	11	11	Catheter site haemorrhage	11.11.2016	Phenprocoumon	Phenprocoumon	Resolved	Yes	According to SmPC of phenprocoumon, section 4.8, bleeding and hematoma related to lesions are a common (>= 1% and < 10%) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
304	de	Male	Apixaban	68	SAE.191	125	124	Syncope	16.11.2016	Not related	Not related	Resolved		
465	us	Female	Apixaban	38	SAE.162	10	10	Chest pain	18.11.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
324	be	Male	Apixaban	55	SAE.167	146	146	Atrial flutter; Cardiac ablation	22.11.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
379	be	Male	VKA	53	SAE.184	86	86	Atrial fibrillation	23.11.2016	Not related	Not related	Resolved		
429	nl	Male	Apixaban	71	SAE.163	45	40	Renal failure	24.11.2016	Not related	Not related	Resolved		
336	nl	Male	VKA	73	SAE.166	141	119	Atrioventricular block; Cardiac pacemaker insertion	25.11.2016	Not related	Not related	Resolved		
304	de	Male	Apixaban	68	SAE.199	137	136	Cardiac failure	28.11.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
476	dk	Male	VKA	62	SAE.173	11	11	Atrial fibrillation	29.11.2016	Not related	Not related	Resolved		
407	be	Male	Apixaban	56	SAE.164	66	64	Pericarditis	01.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
364	dk	Female	Apixaban	74	SAE.165	114	114	Cardioversion; Atrial fibrillation	03.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
421	be	Male	VKA	71	SAE.168	60	60	Chest pain	03.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
432	it	Female	Apixaban	59	SAE.169	54	54	Haemorrhage; Pericardial effusion	05.12.2016	Not related	Not related	Resolved		
427	dk	Female	VKA	73	SAE.170	60	60	Limb discomfort	06.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
341	nl	Male	VKA	68	SAE.171	148	148	Plasma cell myeloma	07.12.2016	Not related	Not related	Did not resolve		No modification of sec. assessment necessary due to changes of SAE data.
470	be	Female	Apixaban	64	SAE.172	23	23	Atrial fibrillation; Cardioversion	07.12.2016	Not related	Not related	Resolved		
466	dk	Female	Apixaban	62	SAE.176	35	35	Catheter site haemorrhage; Vascular pseudoaneurysm	14.12.2016	Apixaban (5.0 mg, provided as study drug)	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	According to SmPC of apixaban, section 4.8, traumatic haemorrhage, post procedural haemorrhage, incision site haemorrhage is an uncommon (=1/1,000 to < 1/100) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
381	de	Male	VKA	75	SAE.174	107	101	Atrial fibrillation	15.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
386	de	Female	Apixaban	75	SAE.175	100	100	Colitis	16.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
459	nl	Female	VKA	69	SAE.177	41	39	Catheter site haemorrhage; Haematoma	18.12.2016	Acenocoumarol	Acenocoumarol	Resolved	Yes	According to SmPC (RSI) of acenocoumarol, section 4.8, hemorrhage is a common (= 1/100, < 1/10) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
492	nl	Male	VKA	56	SAE.179	21	19	Percutaneous coronary intervention	21.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
494	be	Male	Apixaban	75	SAE.180	21	14	Phrenic nerve paralysis	22.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
514	de	Male	VKA	65	SAE.182	3	2	Atrial fibrillation	23.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
466	dk	Female	Apixaban	62	SAE.183	46	46	Atrial fibrillation; Cardioversion	25.12.2016	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
445	nl	Male	Apixaban	67	SAE.185	69	68	Cardiac failure	02.01.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
486	gb	Female	Apixaban	72	SAE.187	41	35	Atrial fibrillation	05.01.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
422	de	Male	VKA	67	SAE.217	94	94	Foot amputation	07.01.2017	Not related	Not related	Resolved		
466	dk	Female	Apixaban	62	SAE.189	60	60	Atrial fibrillation; Cardioversion	08.01.2017	Not related	Not related	Resolved		

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
341	nl	Male	VKA	68	SAE.204	181	176	Upper respiratory tract infection	09.01.2017	Not related	Not related	Resolved		
521	dk	Male	Apixaban	61	SAE.190	9	9	Pneumonia	12.01.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
463	it	Female	VKA	57	SAE.192	74	74	Catheter site haemorrhage; Arteriovenous fistula	21.01.2017	Not related	Not related	Did not resolve		No modification of sec. assessment necessary due to changes of SAE data.
491	nl	Female	VKA	63	SAE.244	54	53	Angina unstable	22.01.2017	Not related	Not related	Resolved		
511	dk	Male	Apixaban	60	SAE.193	34	34	Headache; Dizziness	23.01.2017	Not related	Not related	Resolved		An ischemic stroke is caused by a thrombus which might be caused by the PVI intervention. The thrombus was not caused by the anticoagulant drug but the drug was not able to prevent the stroke. This is not a causal relationship to the study drug. No modification of sec. assessment necessary due to changes of SAE data.
464	it	Female	Apixaban	69	SAE.194	78	78	Pyrexia	25.01.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
484	dk	Female	VKA	71	SAE.195	61	42	Cardioversion; Atrial flutter	25.01.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
550	dk	Male	VKA	63	SAE.198	7	7	International normalised ratio abnormal	31.01.2017	Warfarin	Warfarin	Resolved	Yes	Variability in responses between thromboplastin reagents used in PT test is large for samples containing the same concentrations of rivaroxaban caused by different sensitivities of the reagents to rivaroxaban, possibly caused by interactions between Factor Xa inhibitors and phospholipids in thromboplastin reagents. This large variability is not corrected by conversion of PT to INR values. The INR has been developed specifically for monitoring anticoagulation with VKAs and, therefore, should not be used for rivaroxaban. Moreover, conversion of PT to INR values can increase the variability (Samama et al. Thrombosis Journal 2013, 11:11). Extremely high INR values in the current case are very likely to reflect rather artificially high lab values but not altered coagulation patterns to the same extend. Thus, this event is even not considered to be a medically important event because it may not jeopardize the pt. No modification of sec. assessment necessary due to changes of SAE data.

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
550	dk	Male	VKA	63	SAE.198	7	7	International normalised ratio abnormal	31.01.2017	Rivaroxaban	Rivaroxaban	Resolved	Yes	Variability in responses between thromboplastin reagents used in PT test is large for samples containing the same concentrations of rivaroxaban caused by different sensitivities of the reagents to rivaroxaban, possibly caused by interactions between Factor Xa inhibitors and phospholipids in thromboplastin reagents. This large variability is not corrected by conversion of PT to INR values. The INR has been developed specifically for monitoring anticoagulation with VKAs and, therefore, should not be used for rivaroxaban. Moreover, conversion of PT to INR values can increase the variability (Samama et al. Thrombosis Journal 2013, 11:11). Extremely high INR values in the current case are very likely to reflect rather arteficially high lab values but not altered coagulation patterns to the same extend. Thus, this event is even not considered to be a medically important event because it may not jeopardize the pt. No modification of sec. assessment necessary due to changes of SAE data.
421	be	Male	VKA	71	SAE.209	126	119	Percutaneous coronary intervention	07.02.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
512	be	Female	VKA	68	SAE.227	50	50	Catheter site haemorrhage; Vascular pseudoaneurysm	08.02.2017	Phenprocoumon	Phenprocoumon	Resolved	Yes	According to SmPC of phenprocoumon, section 4.8, bleeding and hematoma related to lesions are a common (>= 1% and < 10%) undesirable effect. Thus, this IMP related event is not unexpected.
556	es	Male	Apixaban	52	SAE.201	15	15	Respiratory tract infection	09.02.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
395	es	Male	Apixaban	65	SAE.211	152	136	Vertigo	13.02.2017	Not related	Not related	Resolved		
532	nl	Female	VKA	70	SAE.203	34	34	Haemoptysis	16.02.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
533	be	Male	VKA	53	SAE.202	32	32	Catheter site haemorrhage; Vascular pseudoaneurysm	17.02.2017	Phenprocoumon	Phenprocoumon	Resolved	Yes	According to SmPC (RSI) of phenprocoumon, section 4.8, hematoma following injury is a very common (>= 10%) undesirable effect. Thus, this IMP related event is not unexpected. No modification of sec. assessment necessary due to changes of SAE data.
534	es	Male	Apixaban	55	SAE.216	33	33	Pericarditis	18.02.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
551	at	Male	Apixaban	57	SAE.235	26	26	Atrial fibrillation	19.02.2017	Not related	Not related	Resolved		
506	it	Female	Apixaban	66	SAE.205	68	68	Pyrexia	22.02.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
549	us	Male	Apixaban	68	SAE.207	30	30	Chest pain	22.02.2017	Not related	Not related	Resolved		

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
532	nl	Female	VKA	70	SAE.208	41	41	Pneumonia	23.02.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
522	dk	Male	VKA	72	SAE.219	58	58	Cardioversion; Atrial fibrillation	03.03.2017	Not related	Not related	Resolved		
611	de	Female	Apixaban	75	SAE.212	4	4	Catheter site haemorrhage; Haematoma	07.03.2017	Apixaban (5.0 mg, provided as study drug)	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	According to SmPC of apixaban, section 4.8, traumatic haemorrhage, post procedural haemorrhage, incision site haemorrhage is an uncommon (=1/1,000 to < 1/100) undesirable effect. Thus, this IMP related event is not unexpected.
596	be	Male	Apixaban	60	SAE.254	15	15	Dyspnoea	08.03.2017	Not related	Not related	Resolved		
611	de	Female	Apixaban	75	SAE.213	6	6	Panic attack	09.03.2017	Not related	Not related	Resolved		
522	dk	Male	VKA	72	SAE.220	65	65	Cardioversion; Atrial fibrillation	10.03.2017	Not related	Not related	Resolved		
596	be	Male	Apixaban	60	SAE.262	22	22	Cardiac failure	15.03.2017	Not related	Not related	Resolved		
547	it	Male	VKA	69	SAE.214	55	55	Pyrexia	16.03.2017	Not related	Not related	Resolved		
552	de	Male	Apixaban	62	SAE.252	51	51	Skin ulcer	16.03.2017	Not related	Not related	Resolved		
627	de	Female	VKA	63	SAE.215	2	2	Cardioversion; Atrial fibrillation	16.03.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
510	nl	Male	Apixaban	54	SAE.218	92	92	Vascular graft; Percutaneous coronary intervention; Cardiac ablation	21.03.2017	Not related	Not related	Resolved		No modification of sec. assessment necessary due to changes of SAE data.
612	be	Female	Apixaban	62	SAE.221	18	18	Cardioversion; Atrial fibrillation	21.03.2017	Not related	Not related	Resolved		
475	dk	Female	Apixaban	74	SAE.238	133	133	Hip arthroplasty	30.03.2017	Not related	Not related	Resolved		
611	de	Female	Apixaban	75	SAE.258	27	27	Depression	30.03.2017	Not related	Not related	Resolved		
607	nl	Female	Apixaban	66	SAE.223	34	34	Cardiac failure	03.04.2017	Not related	Not related	Resolved		
422	de	Male	VKA	67	SAE.233	181	167	Atrial flutter; Cardioversion	04.04.2017	Not related	Not related	Resolved		
627	de	Female	VKA	63	SAE.228	21	21	Atrial fibrillation; Cardioversion	04.04.2017	Not related	Not related	Resolved		
602	us	Female	Apixaban	77	SAE.225	41	41	Pericarditis	06.04.2017	Not related	Not related	Resolved		
668	dk	Male	VKA	71	SAE.229	4	4	Atrial fibrillation	08.04.2017	Not related	Not related	Resolved		

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
588	dk	Male	Apixaban	66	SAE.226	54	54	Pericardial haemorrhage	10.04.2017	Not related	Not related	Resolved		Pericardial effusion occurred after bloodpressure drop during transseptal puncture. Effusion is much more likely to be causally related to transseptal puncture than to a study drug effect
563	nl	Male	VKA	66	SAE.232	76	76	Clavicle fracture	12.04.2017	Not related	Not related	Resolved		
566	us	Male	VKA	66	SAE.234	75	74	Non-cardiac chest pain	12.04.2017	Not related	Not related	Resolved		
602	us	Female	Apixaban	77	SAE.236	49	49	Atrial fibrillation	14.04.2017	Not related	Not related	Resolved		
512	be	Female	VKA	68	SAE.245	118	113	Pneumonia	17.04.2017	Not related	Not related	Resolved		
668	dk	Male	VKA	71	SAE.230	13	13	Atrial fibrillation	17.04.2017	Not related	Not related	Resolved		
647	at	Female	Apixaban	73	SAE.241	37	35	Haematoma; Catheter site haemorrhage	26.04.2017	Apixaban (5.0 mg, provided as study drug)	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	According to SmPC of apixaban, section 4.8, traumatic haemorrhage, post procedural haemorrhage, incision site haemorrhage is an uncommon (=1/1,000 to < 1/100) undesirable effect. Thus, this IMP related event is not unexpected.
655	es	Male	Apixaban	63	SAE.237	34	32	Syncope	26.04.2017	Not related	Not related	Resolved		
578	it	Male	VKA	63	SAE.239	77	77	Pyrexia	27.04.2017	Not related	Not related	Resolved		
649	dk	Male	Apixaban	65	SAE.267	38	37	Atrial fibrillation; Cardioversion	27.04.2017	Not related	Not related	Resolved		
552	de	Male	Apixaban	62	SAE.253	94	94	Erysipelas; Skin ulcer	28.04.2017	Not related	Not related	Resolved		
649	dk	Male	Apixaban	65	SAE.269	41	40	Atrial fibrillation	30.04.2017	Not related	Not related	Resolved		
668	dk	Male	VKA	71	SAE.243	26	26	Atrial fibrillation	30.04.2017	Not related	Not related	Resolved		
607	nl	Female	Apixaban	66	SAE.242	62	62	Cardiac failure	01.05.2017	Not related	Not related	Resolved		
588	dk	Male	Apixaban	66	SAE.240	76	76	Ventricular arrhythmia	02.05.2017	Not related	Not related	Resolved		
655	es	Male	Apixaban	63	SAE.237.2	40	38	Cardiac pacemaker insertion	02.05.2017	Not related	Not related	Resolved		
524	at	Male	VKA	56	SAE.283	114	108	Atrial fibrillation	03.05.2017	Not related	Not related	Resolved		
668	dk	Male	VKA	71	SAE.243.2	35	35	Pneumonia	09.05.2017	Not related	Not related	Resolved		
502	it	Male	VKA	68	SAE.247	151	151	Atrial fibrillation	12.05.2017	Not related	Not related	Resolved		

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
652	dk	Male	VKA	49	SAE.246	54	53	Atrial fibrillation; Cardioversion	15.05.2017	Not related	Not related	Resolved		
496	be	Male	VKA	63	SAE.260	159	134	Cardiac ablation	16.05.2017	Not related	Not related	Resolved		
531	de	Male	VKA	55	SAE.251	129	101	Atrial fibrillation; Cardioversion	21.05.2017	Not related	Not related	Resolved		
602	us	Female	Apixaban	77	SAE.249	87	87	Femur fracture	22.05.2017	Not related	Not related	Resolved		
661	dk	Female	Apixaban	63	SAE.278	55	52	Cardioversion; Atrial fibrillation	22.05.2017	Not related	Not related	Resolved		
672	es	Male	VKA	73	SAE.263	48	48	Pericardial haemorrhage; Transfusion	23.05.2017	Not related	Acenocoumarol	Resolved	Yes	According to SmPC (RSI) of acenocoumarol, section 4.8, hemorrhage is a common (= 1/100, < 1/10) undesirable effect, therefore this event is not unexpected.
388	nl	Male	VKA	57	SAE.281	263	236	Cardiac ablation; Atrial fibrillation	29.05.2017	Not related	Not related	Resolved		
661	dk	Female	Apixaban	63	SAE.280	64	61	Atrial fibrillation	31.05.2017	Not related	Not related	Did not resolve		
580	dk	Male	VKA	57	SAE.250	112	112	Pericardial effusion	01.06.2017	Not related	Not related	Resolved		PVI is not considered an IMP in this trial.
588	dk	Male	Apixaban	66	SAE.248	106	106	Cardiac failure	01.06.2017	Not related	Not related	Resolved		
532	nl	Female	VKA	70	SAE.259	143	131	Cardiac failure	05.06.2017	Not related	Not related	Resolved		Missing data, but obviously no relationship to study treatment.
588	dk	Male	Apixaban	66	SAE.248.2	111	111	Ventricular arrhythmia	06.06.2017	Not related	Not related	Resolved		
552	de	Male	Apixaban	62	SAE.255	134	134	Cardiac failure	07.06.2017	Not related	Not related	Resolved		
552	de	Male	Apixaban	62	SAE.255.2	135	135	Pyrexia	08.06.2017	Not related	Not related	Resolved		
549	us	Male	Apixaban	68	SAE.261	139	116	Dysphagia	11.06.2017	Not related	Not related	Resolved		
659	dk	Male	Apixaban	58	SAE.264	98	98	Pericarditis	30.06.2017	Not related	Not related	Resolved		
639	dk	Female	VKA	58	SAE.279	116	116	Cardioversion; Atrial fibrillation	11.07.2017	Not related	Not related	Resolved		
608	nl	Female	VKA	78	SAE.270	133	120	Pneumonia	12.07.2017	Not related	Not related	Resolved		
671	be	Male	Apixaban	70	SAE.266	105	105	Cardiac ablation	18.07.2017	Not related	Not related	Resolved		
537	nl	Female	VKA	74	SAE.274	184	174	Urosepsis	20.07.2017	Not related	Not related	Did not resolve		

Patient ID	Country	Gender	Random group	Age (years) at onset	SAE No.	Days in study	Days on study drug	Preferred Term acc. MedDRA	Date of onset	Suspected drug 1 st assessment	Suspected drug 2 nd assessment	Outcome	Expected-ness	Comments
647	at	Female	Apixaban	73	SAE.27 7	128	121	Percutaneous coronary intervention	26.07.2017	Not related	Not related	Resolved		
555	es	Male	VKA	64	SAE.28 2	184	164	Ischaemic stroke	27.07.2017	Not related	Not related	Resolved		
607	nl	Female	Apixaban	66	SAE.27 1	155	155	Aneurysm; Catheter site haemorrhage; Haematoma; Transfusion	02.08.2017	Not related	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	According to SmPC of apixaban, section 4.8, traumatic haemorrhage, post procedural haemorrhage, incision site haemorrhage is an uncommon (=1/1,000 to < 1/100) undesirable effect. Thus, this IMP related event is not unexpected.
652	dk	Male	VKA	49	SAE.27 3	145	126	Atrial fibrillation	14.08.2017	Not related	Not related	Resolved		
607	nl	Female	Apixaban	66	SAE.27 6	168	168	Catheter site haemorrhage; Transfusion; Haematoma	15.08.2017	Apixaban (5.0 mg, provided as study drug)	Apixaban (5.0 mg, provided as study drug)	Resolved	Yes	Event was reported by email from Mr. Beuving, who has no access to eCRF. The study team is currently not available and will complete documentation upon return. According to SmPC of apixaban, section 4.8, traumatic haemorrhage, post procedural haemorrhage, incision site haemorrhage is an uncommon (=1/1,000 to < 1/100) undesirable effect. Thus, this IMP related event is not unexpected.
588	dk	Male	Apixaban	67	SAE.27 5	184	184	Cardiac failure	18.08.2017	Not related	Not related	Resolved		

Appendix: Line Listing of death narratives

Narratives on all deaths occurred during the AXAFA-AFNET 5 study. Data are sorted according to patient ID and ascending date of onset.

Patient ID	Country	Gender	Random group	Age (years) at death	SAE No.	Date of death	Comments
5	dk	Female	VKA	70	2.2	12.05.2015	Hospital stay prolonged since patient developed sinoatrial arrest with pauses up to 6 sec, decision to implant pacemaker. During implantation patient becomes somnolent with GCS 5 and dilatation of pupils. CT scan showed massive intracerebral bleeding. Patient was intubated, ventilated and sedated. Konakion, plasma coagulation factor concentrate and antibiotics administered. Surgical removal of intracranial hemorrhage and implantation of intracranial ICP monitor. Patient transferred to neuro-intensive care unit. Regular ICP controls and further CT scan performed. No signs of improvement, consequently discontinuation of medical treatment. Patient subsequently died on 12.05.2015.
33	dk	Male	Apixaban	69	11	23.06.2015	Patient was found dead at home. Police was informed. Due to wish of patient's family autopsy performed. Direct cause of death remains unclear, massively dilated heart proposes cardiac decompensation as suspected reason.