

Appendix 4. Outcomes in patients randomised within/after three hours of injury.**Intracranial haemorrhage**

There is no evidence that TXA prevents IPH expansion in patients randomised within 3 hours of injury (1.09, 95% CI (0.81–1.45), $p=0.570$) or after three hours of injury (0.95, 95% CI (0.63–1.43), $p=0.789$). There is no evidence that TXA prevents haemorrhage expansion in patients who had neurosurgical haemorrhage evacuation and were randomised within 3 hours of injury ($n=277$) (0.94, 95% CI (0.62–1.42), $p=0.756$) but there is some evidence in those randomised after three hours of injury ($n=86$) (0.37, 95% CI (0.19–0.72), $p=0.003$).

Cerebral infarction

There is no evidence for an increase in infarction with TXA at any particular time post-randomisation in those randomised within 3 hours of injury (adjusted HR=1.21, 95% CI (0.85–1.73), $p=0.297$) or after 3 hours of injury (adjusted HR=1.68, 95% CI (0.78–3.59), $p=0.185$).