

## Panel 1: General points considerations when designing trials in SVD

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|----------------------------------|---|
| SVD is:                          | slow developing;<br>long-term condition   |
| Clinical presentation:           | stroke (lacunar ischaemic; or other subtype with SVD lesions)<br>Cognitive<br>Mobility<br>Mood<br>Covert                            |
| Vascular risk factors are usual: | polypharmacy;<br>interaction concerns   |
| Co-morbidities:                  | are common  |
| Mimics are common:               | cortical ischaemic stroke<br>and vice versa   |
| Imaging imperfect:               | no brain imaging method identifies all acute small subcortical infarcts   |
| Underlying pathology varies:     | most SVD is intrinsic small vessel disease, but 10-15% is atherothrombotic or cardioembolic<br>dementia pathologies are often mixed |
| Long duration trials:            | tolerability of drug<br>retention   |