Supplementary Table 1. Trial registration – data set

Data category	Information – data set
Primary registry and	NCT06163547
trial identifying number	   NC100103347
Date of registration in	11 <sup>th</sup> December, 2023
_	TI December, 2025
primary registry	DASEC2022 00040 SNCTD00000F7CF DD04 16
Secondary identifying	BASEC2023-00848, SNCTP000005765, RP04-16.
numbers	Fondation privác dos IIIIC
Primary sponsor	Fondation privée des HUG
Secondary sponsor(s)	None
Contact for public	Karl Schaller MD [karl.schaller@hcuge.ch]
queries	
Contact for scientific	Karl Schaller MD [karl.schaller@hcuge.ch]
queries	
Public title	Middle Meningeal Artery (MMA) Embolization for chronic Subdural
	Hematomas
Scientific title	Middle Meningeal Artery (MMA) Embolization for chronic Subdural
	Hematomas: Rationale and Design for the <b>ST</b> Op <b>R</b> ecurrence of
	MMA Bleeding (STORMM) Randomized-Control Trial
Countries of	Switzerland
recruitment	
Health condition(s) or	Chronic Subdural Hematomas, recurrence
problem(s) studied	
Intervention(s)	Arm 1 (conventional management/control): surgery without
	embolization (randomized)
	Arm 2: MMA embolization within 72h of surgery (randomized)
	Arm 3: MMA embolization only (not part of the randomization)
	Arm 4: No treatment (not part of the randomization)
Key inclusion and	Inclusion criteria: age 18-100, consent possible, chronic subdural
exclusion criteria	hematoma (cSDH) located at the convexities, patients with
	symptomatic cSDH, patients with asymptomatic large
	chronic/subacute hematoma after 6 weeks of failed conservative
	treatment
	Exclusion criteria: consent not possible, pregnancy, prisoner,
	angiography contraindication, patient for whom follow-up is
	problematic (e.g. distant residency, homeless), previous surgery
	for cSDH
Study type	Interventional
	Allocation: randomized (arms 1 & 2), non-randomized (arms 3 & 4)
	Purpose: prevention of cSDH recurrence
	Phase: not applicable
Date of first enrolment	1 <sup>st</sup> August, 2024
Target sample size	180
Recruitment status	Pending
Primary outcome(s)	cSDH recurrence, defined as a cSDH reappearance that requires
	surgical reoperation, a neurological deterioration due to a cSDH
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	after evacuation, or a postoperative hematoma volume of more than 90% of the preoperative volume at follow-up (time frame: 6 weeks and 6 months)
Key secondary	Efficacy of MMA Embolization in Isolation for Stopping cSDH
outcomes	Progression
	Method of measurement: hematoma "regression", "stability" and
	"progression" are defined radiologically as >10% reduction in
	volume, +/-10% of previous volume, >10% increase in hematoma
	volume (time frame: 6 weeks and 6 months)
Ethics Review	Approved (16 <sup>th</sup> January 2024) by Geneva and Ticino Ethics
	Commission for Research [ccer@eta.ge.ch; dss-ce@ti.ch]