**Supplementary Table.** Abnormal Magnetic Resonance Imaging Findings of the Patients in the 2 Groups

Cases	Intervention	Control
Case 1	Cerebral sulci and ventricle were obvious based on the	Generalized edema of the brain
	patient's age, which was consistent with cerebral	causes the obliteration of brain
	atrophy due to abnormal neurodevelopment. Abnormal	ventricles
	signal intensity on the splenium corpus callosum on	
	DW1, indicating hypoxic-ischemic injury	
Case 2	Superior sagittal sinus thrombosis and bilateral	Mild subdural effusion on the left side
	transverse sinus	with mild cerebral edema that causes
		obliteration of the brain ventricles
Case 3	Increased white matter signal (T2) throughout the brain	Peripheral ischemic changes in white
	tissue, which is more pronounced in the posterior part	matter with calcification or bleeding
	due to severe HIE with generalized atrophy	in the deep cerebellar nuclei
Case 4	Abnormal signal intensity in bilateral basal ganglia,	Generalized abnormal signals in the
	brain stem, and superior cerebral peduncle on DW1	white matter
Case 5	Epidural hematoma in the left occipital region with	Secondary to demyelination in the
	subgaleal hematoma in the right frontal area and	globus pallidus on both sides of the
	increased scattered focal signal in both cerebellar	hyperextension
	hemispheres, preferably in the left temporal and parietal	
	lobes	
Case 6	Sigmoid sinus thrombosis, right transverse sinus, and	
	right jugular vein, which showed abnormal signal	
	intensity in these areas	
Case 7	Acute ischemia in the left frontal lobe and hematoma in	
	the right parietal lobe	
Case 8	Cystic encephalomalacia in both hemispheres with	
	reduced cortical thickness	