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Figure S1. The prevalence of pathologies as regards the biceps long head tendon in hemiplegic shoulders

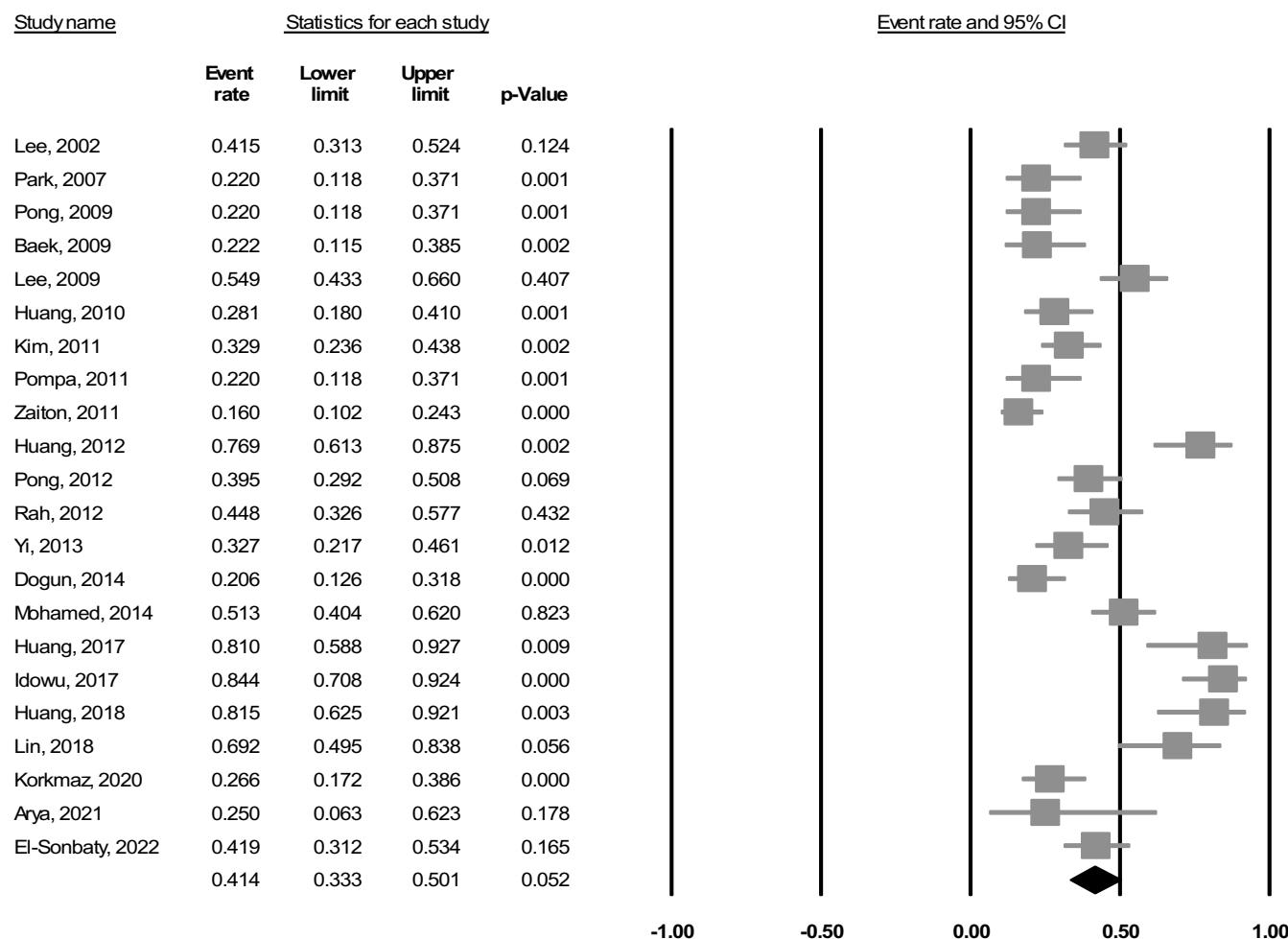


Figure S2. The prevalence of pathologies as regards the supraspinatus tendon in hemiplegic shoulders

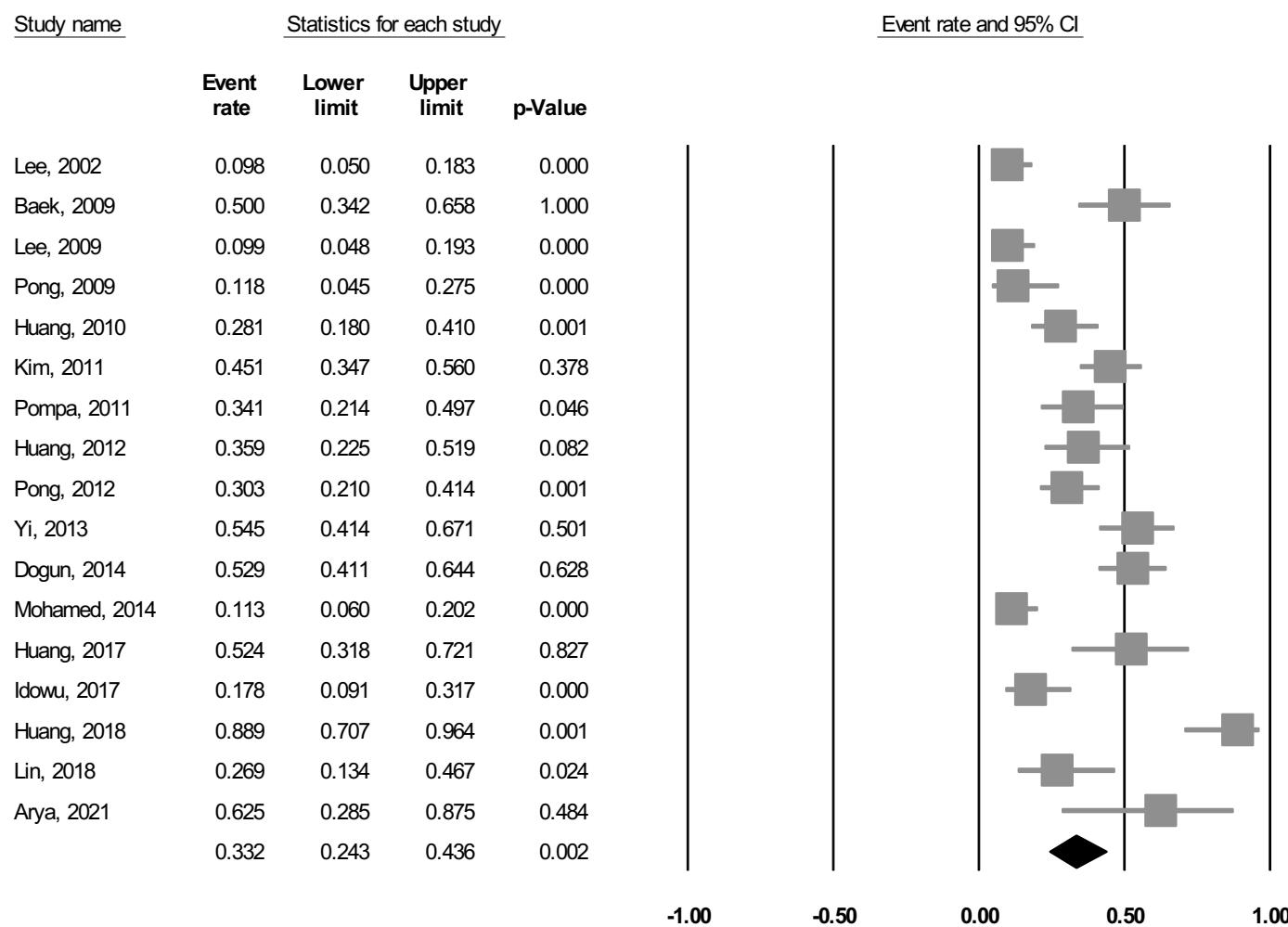


Figure S3. The prevalence of pathologies over the subdeltoid bursa in hemiplegic shoulders.

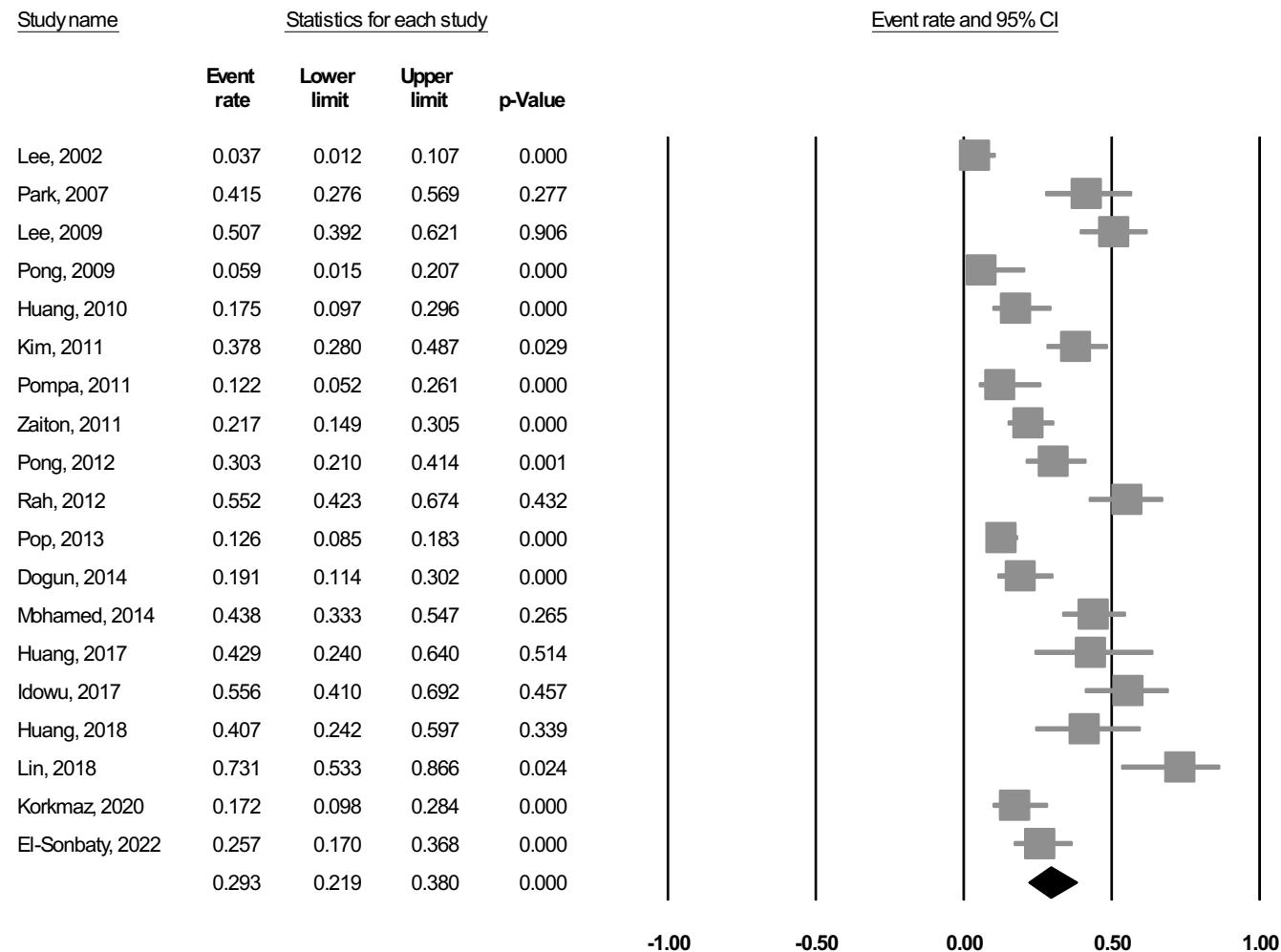


Figure S4. The prevalence pathologies as regards the acromioclavicular joint in hemiplegic shoulders

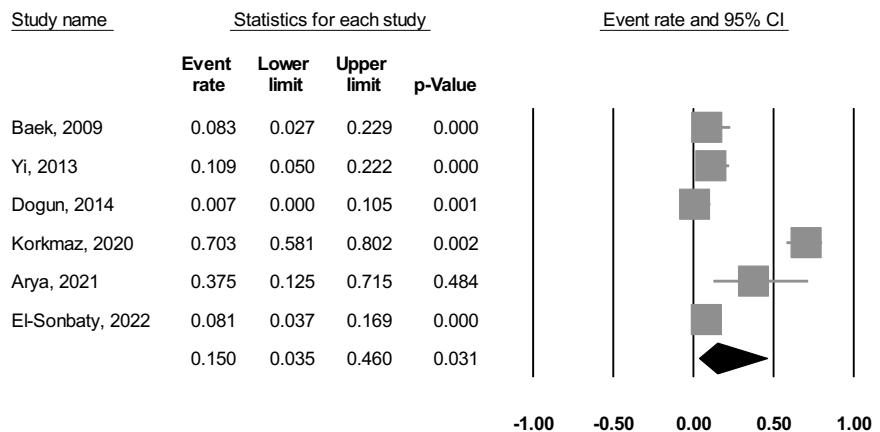


Figure S5. The prevalence of pathologies as regards the subscapularis tendon in hemiplegic shoulders

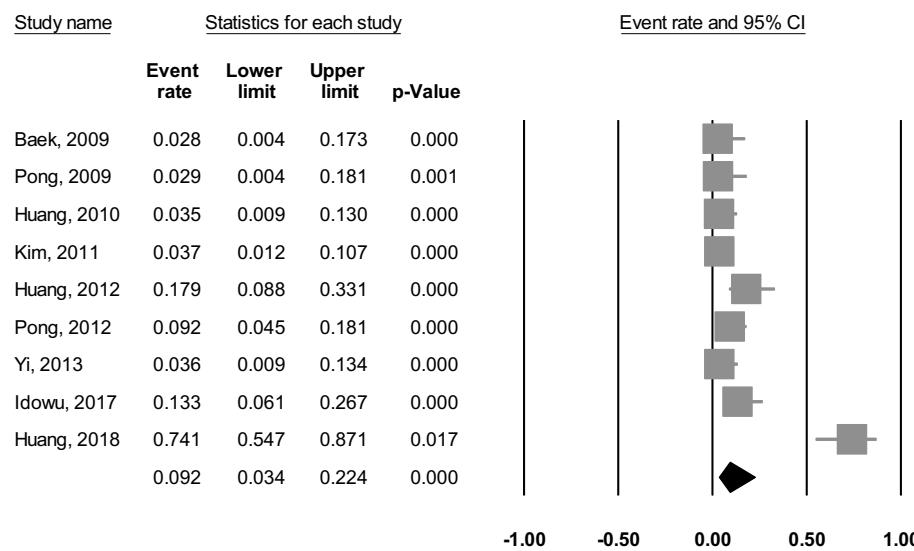


Figure S6. The prevalence of bicipital peritendinous effusion in hemiplegic shoulders

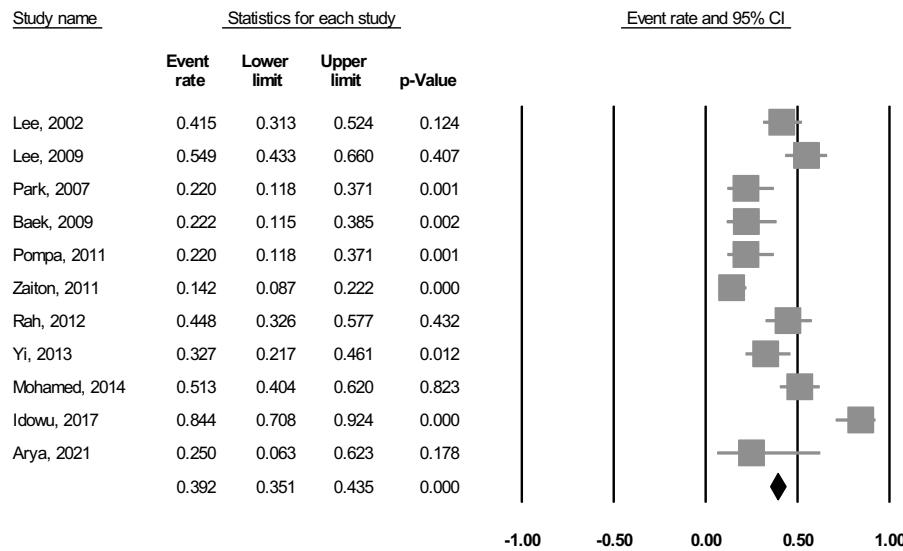


Figure S7. The prevalence of biceps tendinopathy in hemiplegic shoulders

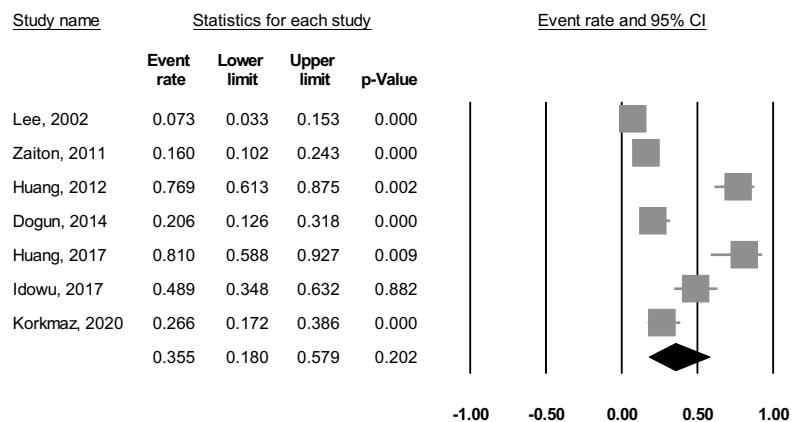


Figure S8. The prevalence of supraspinatus tendinopathy in hemiplegic shoulders

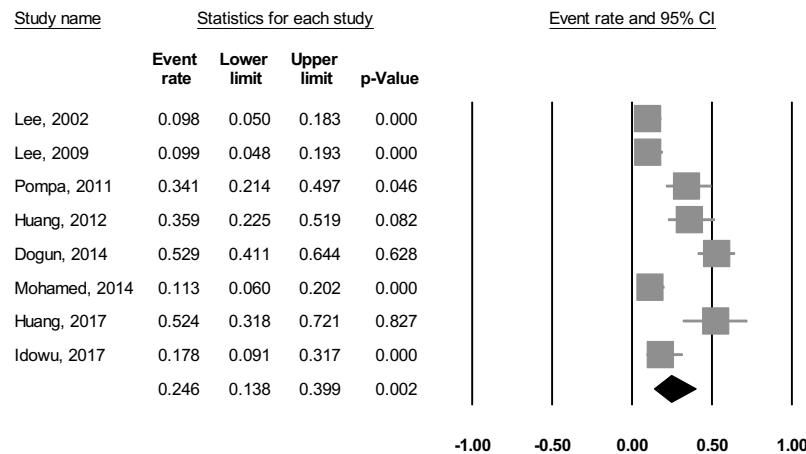


Figure S9. The prevalence of partial-thickness supraspinatus tear in hemiplegic shoulders

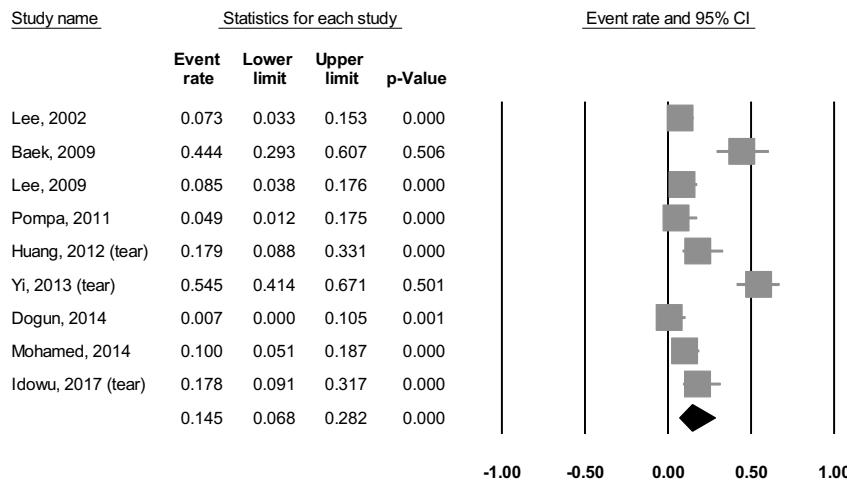


Figure S10. The prevalence of infraspinatus tendinopathy in hemiplegic shoulders

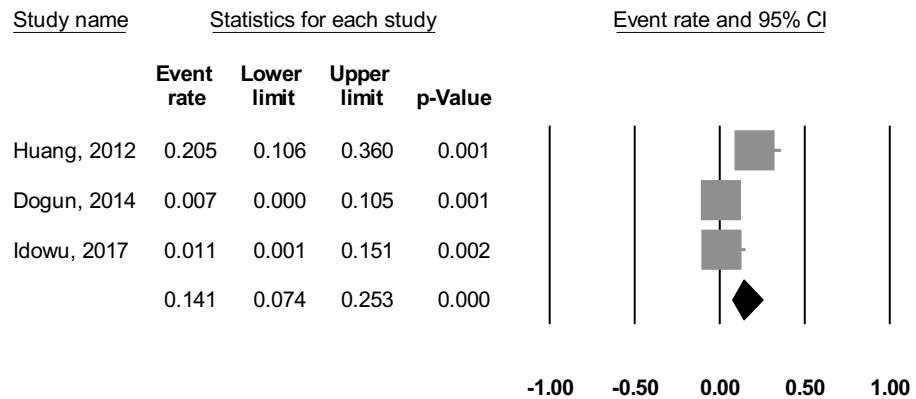


Figure S11. The prevalence of biceps tendon tear in hemiplegic shoulders

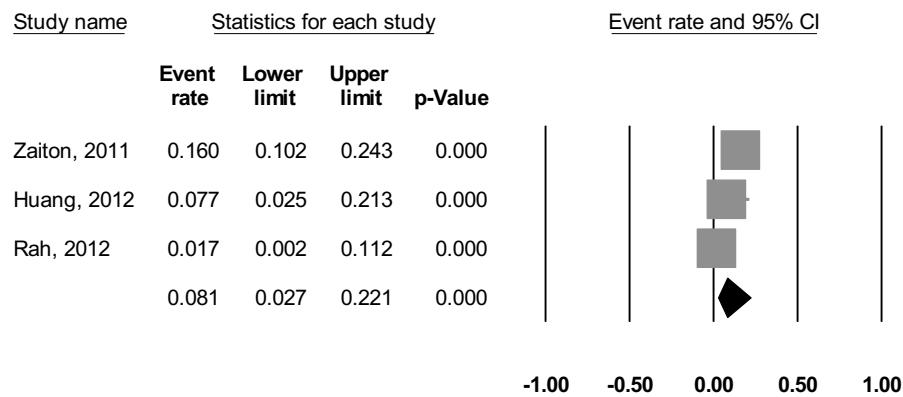


Figure S12. The prevalence of full-thickness supraspinatus tear in hemiplegic shoulders

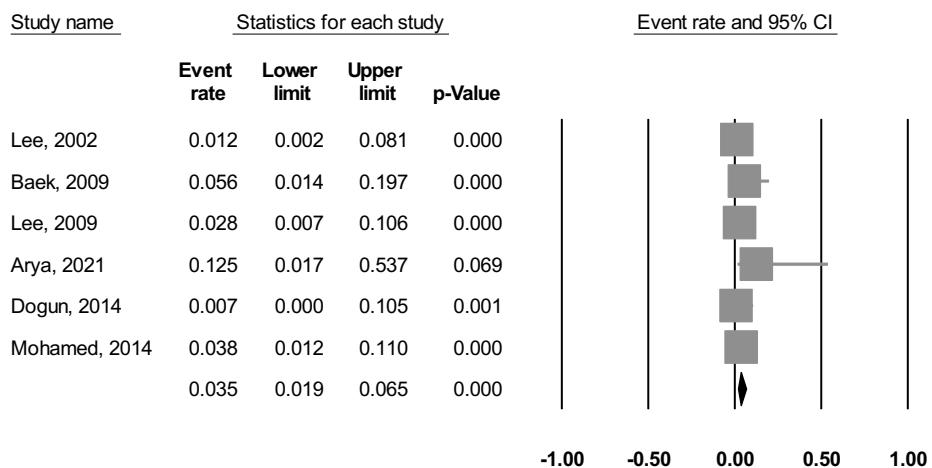


Figure S13. The prevalence of infraspinatus tendon tear in hemiplegic shoulders

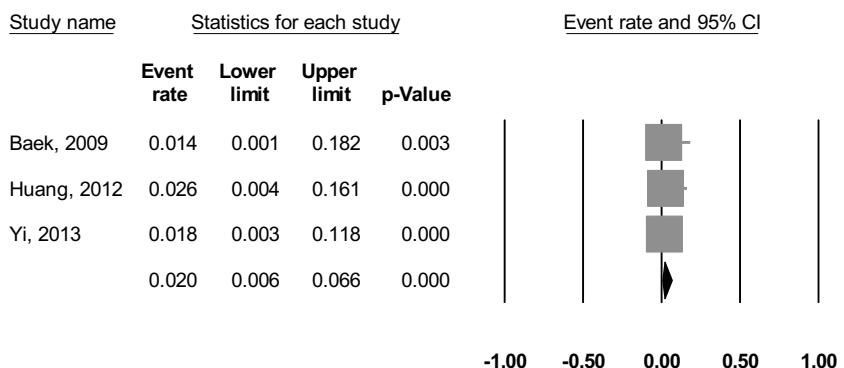


Figure S14. Comparison of the prevalence as regards subscapularis tendon pathologies (hemiplegic vs. non-hemiplegic sides)

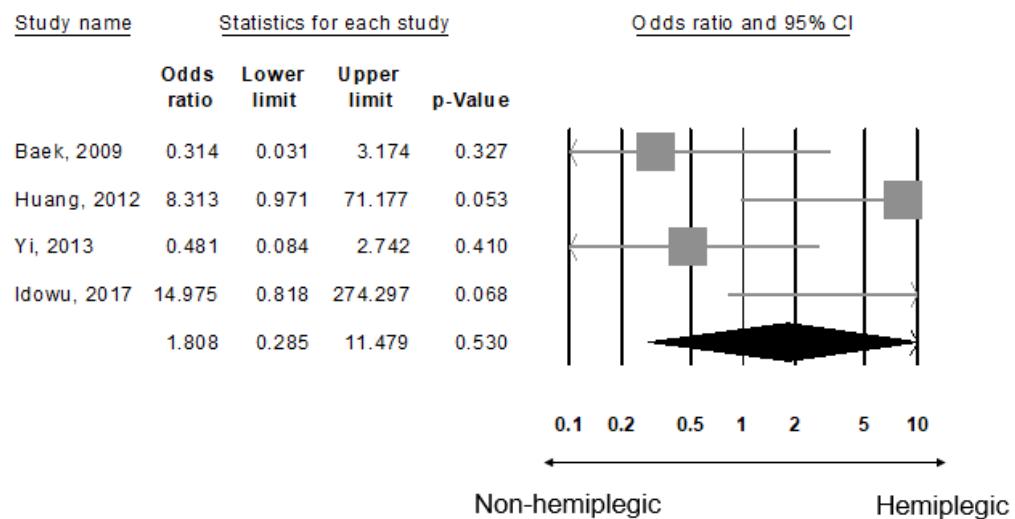


Figure S15. Comparison of the prevalence as regards acromioclavicular joint pathologies (hemiplegic vs. non-hemiplegic sides)

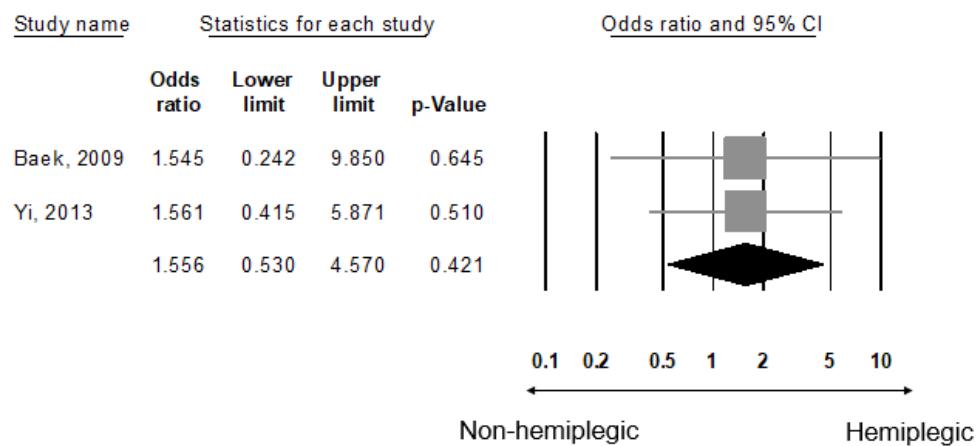


Figure S16. Comparison of the prevalence as regards infraspinatus tendon of pathologies (hemiplegic vs. non-hemiplegic sides)

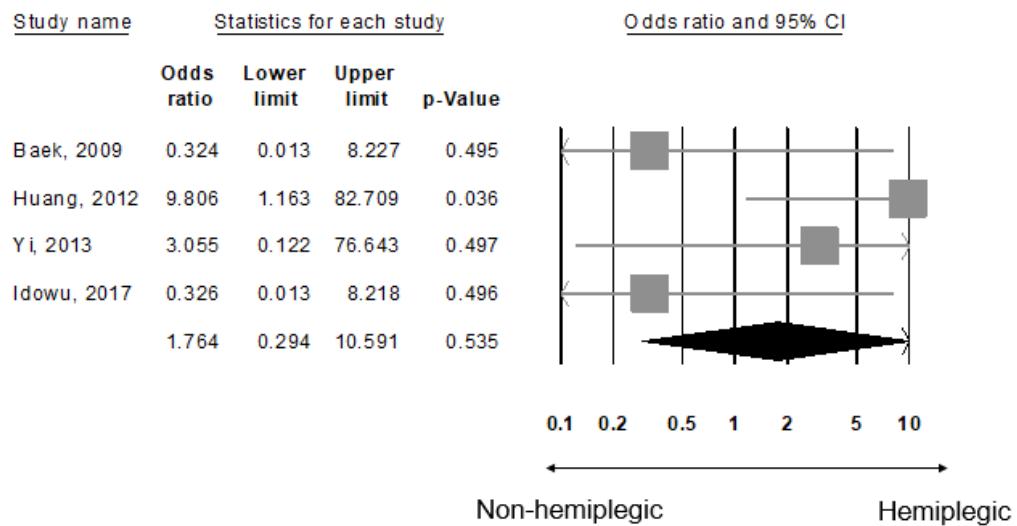


Figure S17. Comparison of the prevalence as regards full-thickness supraspinatus tear (hemiplegic vs. non-hemiplegic sides)

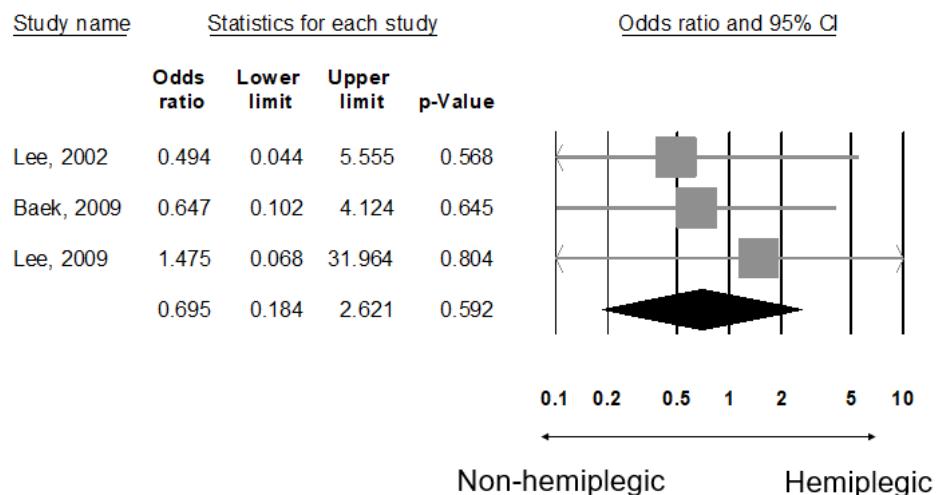


Figure S18. Comparison of the prevalence as regards biceps tendon pathologies (low vs. high motor status)

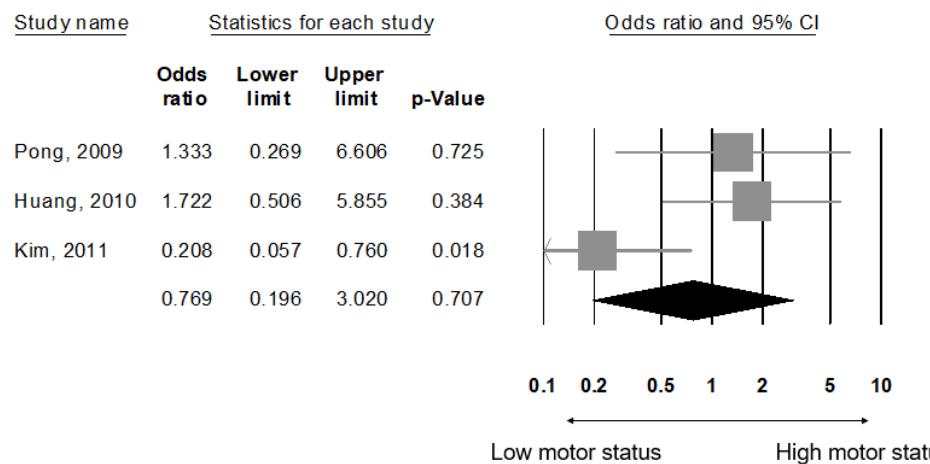


Figure S19. Comparison of the prevalence as regards subscapularis tendon pathologies (low vs. high motor status)

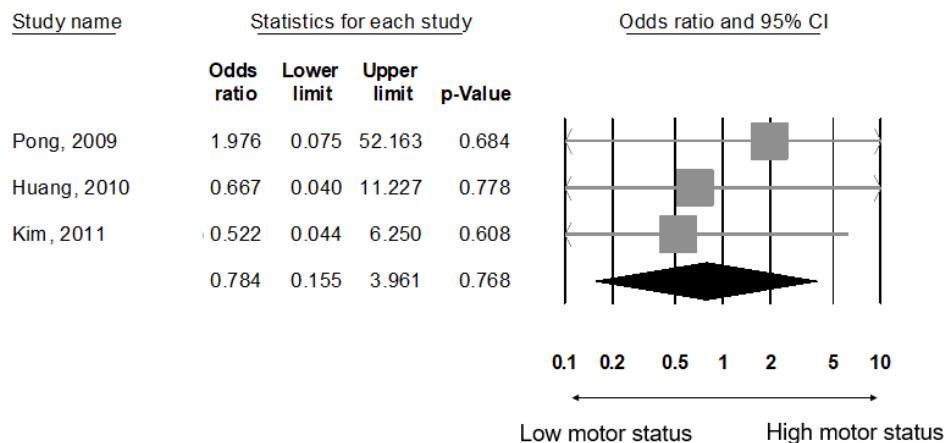


Figure S20. Comparison of the prevalence as regards subdeltoid bursa pathologies (low vs. high motor status)

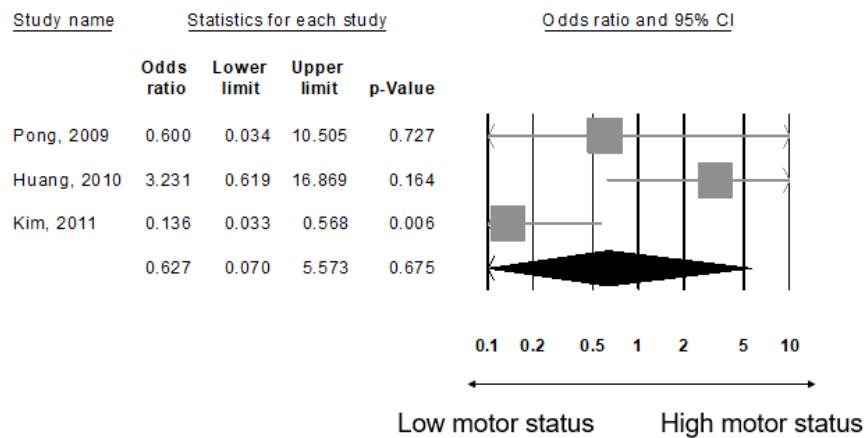


Figure S21. Comparison of the prevalence as regards supraspinatus tendon pathologies (low vs. high motor status)

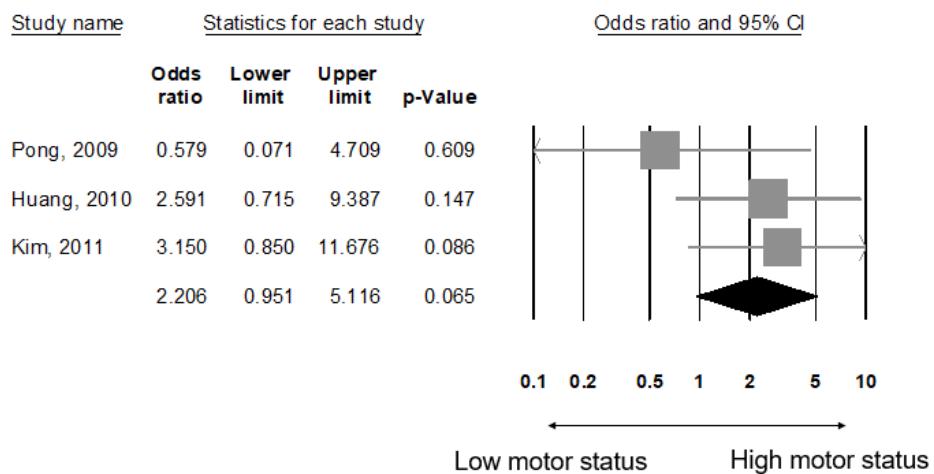


Figure S22. Funnel plot for the prevalence of biceps long head tendon pathologies.

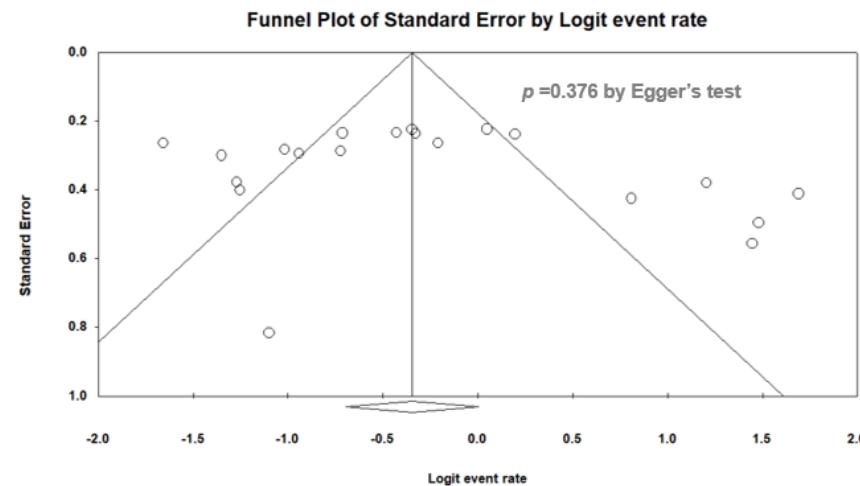


Figure S23. Funnel plot for the prevalence of subdeltoid bursa pathologies.

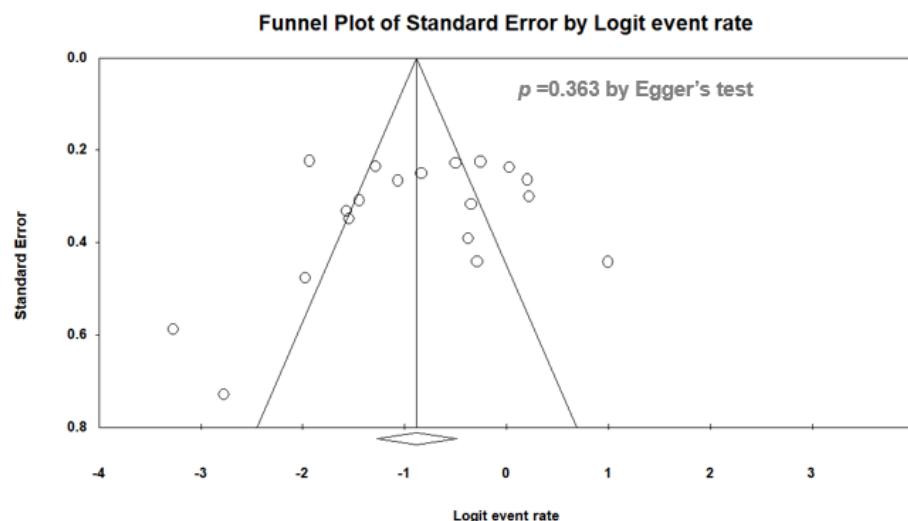


Figure S24. Funnel plot for the prevalence of supraspinatus tendon pathologies.

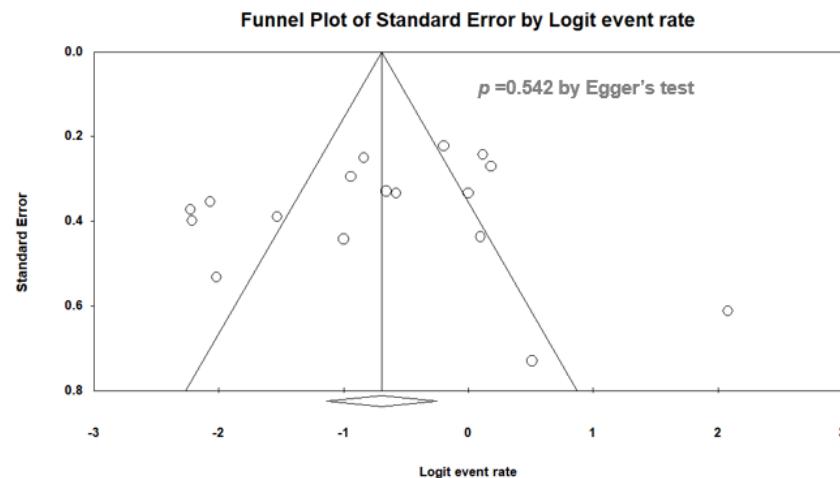


Figure S25. Funnel plot for the prevalence of pathologies in addition to biceps peritendinous effusion

