

## Data Sharing Statement

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| <b>Article Info</b> | <a href="https://dx.doi.org/10.21037/apm-22-826">https://dx.doi.org/10.21037/apm-22-826</a>  |   |
| <b>Item</b>         | <b>Question</b>  | <b>Authors' Response<br/>(place "-" if not applicable)</b>  |
| 1                   | Would you like to share data collected for your study to others?   | Yes.  |
| 2                   | If not, would you like to share the reason for your decision?  | -   |
| 3                   | What data in particular will be shared?  | Patients' hospitalization and treatment record will be shared.  |
| 4                   | Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code. | Statistical analysis plan will also be shared if requested.   |
| 5                   | When will data availability begin?   | From the publication date.  |
| 6                   | When will data availability end?   | Two years within the publication date.  |
| 7                   | To whom will you share the data?   | Neuroscientists and general surgeons who are interested in studies of WD.   |
| 8                   | For what type of analysis or purpose?  | For analysis to predict the risk factors for developing PVST after splenectomy in WD patients.                                  |
| 9                   | How or where can the data/documents be obtained?   | Emails could be sent to the address below to obtain the shared data: <a href="mailto:1136460756@qq.com">1136460756@qq.com</a> . |
| 10                  | Any other restrictions?  | We may balance the potential benefits and risks for each request and then provide the data that could be shared.                |