

## Data Sharing Statement

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|---------------------|--|---|
| <b>Article Info</b> | https://dx.doi.org/10.21037/jtd-22-1446  |   |
| <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?  | Data of Polysomnography (PSG) and questionnaire.                                      |
| 4                   | Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code. | -   |
| 5                   | When will data availability begin?   | One year after publication.   |
| 6                   | When will data availability end?   | -   |
| 7                   | To whom will you share the data?   | Related researchers.  |
| 8                   | For what type of analysis or purpose?  | Descriptive analysis.   |
| 9                   | How or where can the data/documents be obtained?   | Please send an email to the following address:<br>Email: li.shanqun@zs-hospital.sh.cn |
| 10                  | Any other restrictions?  | -   |