Supplementary material

Shangguan C, Yu L, Liu G, et al. Risk assessment of chronic obstructive pulmonary disease using a Bayesian network based on a provincial survey. Pol Arch Intern Med. 2021; 131: 345-355. doi:10.20452/pamw.15867

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Table S1. Blacklists of the BN

From	To	From	To	From	To	From	To
Smoke	_	Age		Age	_	Coalbio	Income
Wheezing		Smoke		Smoke		Venti	Region
Edu	_	Wheezing		Wheezing	_		
Air_sat		Edu		Air_sat			
CHD	_	Air_sat		CHD	_		
Income		CHD		Income			
BMI	_	Income		BMI	_		
COPD	Age	BMI	Sex	COPD	Edu		
sm14	_	COPD		sm14	_		
Sex		sm14		Sex			
Venti	_	Venti		Venti	-		_
Dust		Dust		Dust			
Gas	_	Gas		Gas	-		_
Region		Region		Coalbio			
Coalbio	_	Coalbio		Cough	_		

Cough		Cough					
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Note:

CHD: Coronary heart disease; Coalbio: exposure to coal or biomass fuel during cooking; sm14: environmental tobacco smoke exposure between 14 years old; Air sat: the satisfaction of the ambient air quality; Venti: Ventilation of the kitchen; Edu: education level.

The age or sex could not be affected by the other features. For education, the listed variables are mostly current features that are not able to affect the education levels determined decades before.

Table S2. Whitelist of the BN

from	to		
Age	COPD		
Smoke	COPD		
Sex	COPD		
Gas	COPD		
Dust	COPD		
COPD	Cough		
COPD	Wheezing		
Income	COPD		
BMI	COPD		

Note:

Age: Age group; Gas: Occupational exposure to hazardas gas; Dust: Occupational exposure to dust; Wheezing: Wheezing like sound during sickness.

Table S3. Comparison of AUC and accuracy between BN and accuracy during cross-validation

Folds -		AUC	Accuracy		
	BN	Logistic regression	BN	Logistic regression	
1	0.849	0.776	0.876	0.834	
2	0.86	0.778	0.876	0.837	
3	0.892	0.773	0.893	0.864	
4	0.823	0.776	0.846	0.825	
5	0.847	0.764	0.859	0.840	

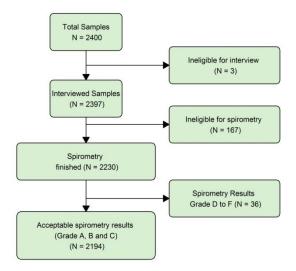


Figure S1. The study process. The participants were randomly sampled in 4 cities of Liaoning Province, China. The participants were interviewed, and they also underwent pre-bronchodilator and post-bronchodilator spirometry, if qualified. The results were examined by the staff, and the qualified observations were included in the multivariate analysis. The Bayesian Network was constructed based on a priori that consisted of multivariate logistic results and previous evidence. Validations were followed to validate the model, and an area under the curve (AUC) of at least 0.75 was considered acceptable.

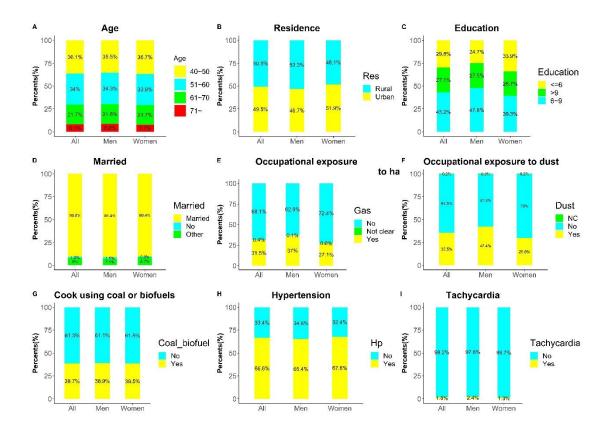


Figure S2. Barchart of composition of some principle variables (A). (A): Age group; (B): Resident areas, including rural areas and urban areas; (C): Education level; (D): Marrital status; (E): Occupational Exposure to Hazardous Gas; (F) Occupational Exposure to Dust; (G): Using Biomass fuel or coal for cooking; (H): Hyperteion or not; (I): Tachycardia or not.

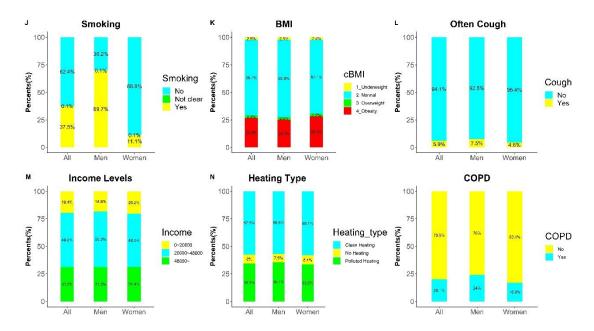


Figure S3. Barchart of composition of some principle variables (B). (J): Ever smoking; (K): BMI group, including underweight, normal, overweight and obesity; (L): Frequent cough or not; (M): Income level group, including low (less than 20,000 RMB), middle (20,000-48,000) and high (more than 48,000) group; (N): Heating type, including clean energy (electry or gas) and polluted energy (coal or biomass fuel); COPD: Chronic obstructive pulmonary disease or not.

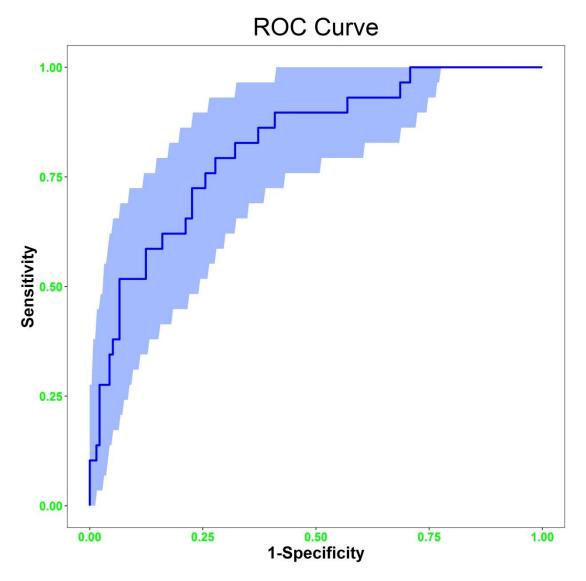


Figure S4. The receiver operating characteristic curves created during the external validations. The Bayesian Network model had a relatively good performance in external validation.