# Appendix 2

Table 1. Results of the sensitivity analysis: airflow obstruction in the observed RESPECT population and the adjusted population based on modelling non-participation using three different methods.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | RESPECT population,  prevalence, % (95% CI) | Method 11  prevalence, % (95% CI) | Method 22  prevalence, % (95% CI) | Method 33  prevalence, % (95% CI) | |  |
| a) all of non-responders are smokers | b) none of the non-responders are smokers |
| **FEV1/FVC < 0.7** |  |  |  |  |  |  |
| *Before the bronchodilator test (% and 95% CI)* |  |  | 8.2 (7.2-9.4)  14.6 (12.4-17.4)  5.2 (4.2-6.4)  6.7 (5.7-7.9)  12.8 (10.3-15.7)  3.8 (2.9-4.9) |  |  |  |
| total | 8.3 (7.3-9.4) | 7.1 (6.2-8.1) | 9.4 (8.8-10.7) | 7.0 (6.3-7.9) |  |
| men | 14.9 (12.6-17.7) | 12.5 (10.4-14.8) |  |  |  |
| women | 5.2 (4.3-6.3) | 4.6 (3.8-5.6) |  |  |  |
| *After the bronchodilator test (% and 95% CI)* |  |  |  |  |  |
| total | 6.8 (5.8-7.9) | 5.5 (4.7-6.4) | 9.0 (8.0-10.0) | 5.9 (5.1-6.7) |  |
| men | 13.2 (10.7-16.1) | 9.8 (7.9-11.9) |  |  |  |
| women | 3.8 (2.9-4.9) | 3.3 (2.6-4.2) |  |  |  |
| **FEV1/FVC < GLI-LLN** |  |  | 5.8 (5.0-6.8)  9.4 (7.5-11.6)  4.1 (3.3-5.1)  4.7 (3.8-5.6)  8.1 (6.2-10.5)  3.0 (2.2-4.0) |  |  |  |
| *Before the bronchodilator test (% and 95% CI)* |  |  |  |  |  |
| total | 5.9 (5.0-6.8) | 5.7 (4.9-6.4) | 8.0 (7.2-8.9) | 5.3 (4.7-5.1) |  |
| men | 9.6 (7.7-11.8) | 8.9 (7.2-11.0) |  |  |  |
| women | 4.1 (3.9-5.1) | 4.1 (3.3-5.1) |  |  |  |
| *After the bronchodilator test (% and 95% CI)* |  |  |  |  |  |
| total | 4.8 (3.9-5.7) | 4.3 (3.6-5.1) | 7.7 (6.8-8.6) | 4.5 (3.9-5.3) |  |
| men | 8.6 (6.6-10.9) | 7.2 (5.6-9.0) |  |  |  |
| women | 3.0 (2.2-4.0) | 2.8 (2.1-3.6) |  |  |  |

1 Method 1: transformation of the observed prevalence in each age group using an index that is proportional to the relative weight of the age group in order to recalculate overall prevalence; 2 Method 2: adaptation of the sample by “ad random” elimination of cases in the strata that are over-represented (55-64 and 65-70 years old)

3 Method 3: simulation of the impact on the overall prevalence (or on the prevalence in different strata) starting from two hypotheses: a) all of the non-responders are smokers; and b) none of the non-responders are smokers, by using the average number of diagnosis of airflow obstruction in smoker and non-smokers to adjust the prevalence.