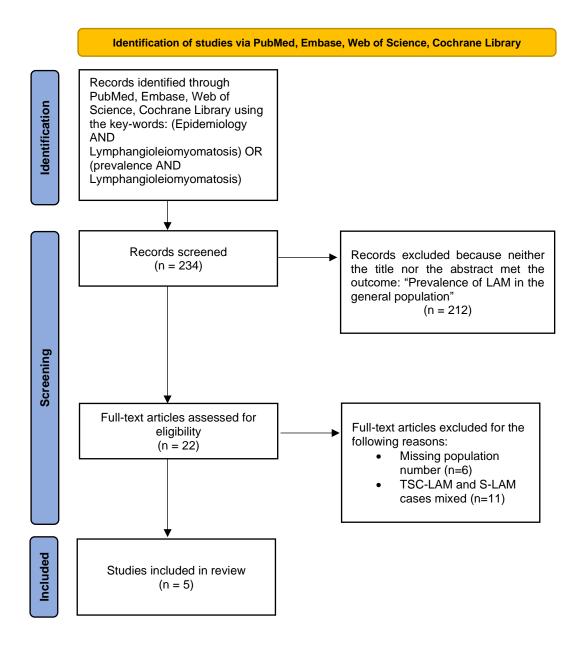
PROBABILITY OF SPORADIC LYMPHANGIOLEIOMYOMATOSIS IN WOMEN PRESENTING WITH SPONTANEOUS PNEUMOTHORAX

Supplementary material

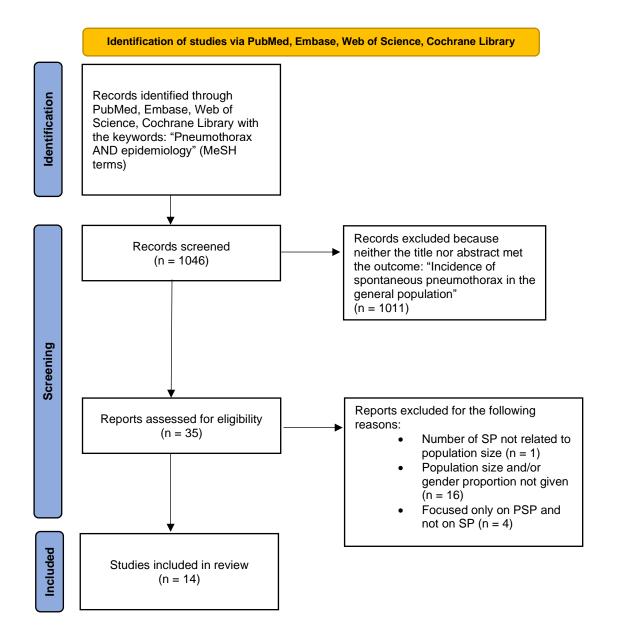
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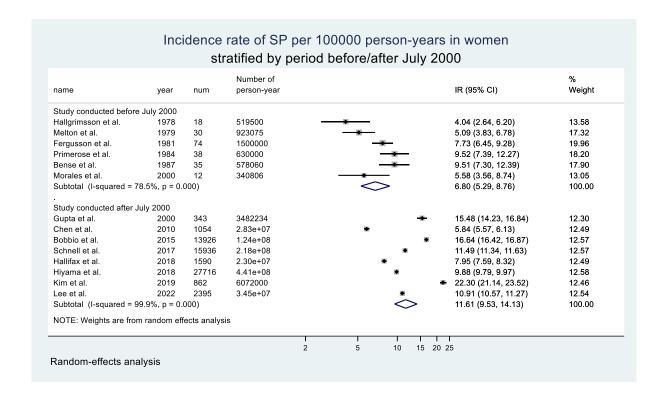
Supplementary figure S1. PRISMA flow diagram for S-LAM epidemiology



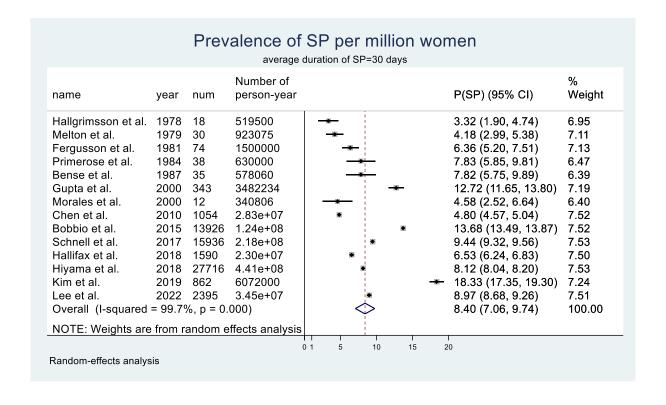
Supplementary figure S2. PRISMA flow diagram for SP epidemiology



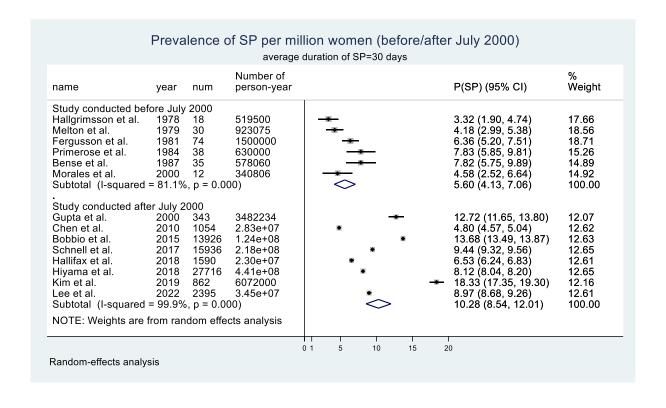
Supplementary figure S3. Incidence rate of SP in women stratified by period before/after July 2000



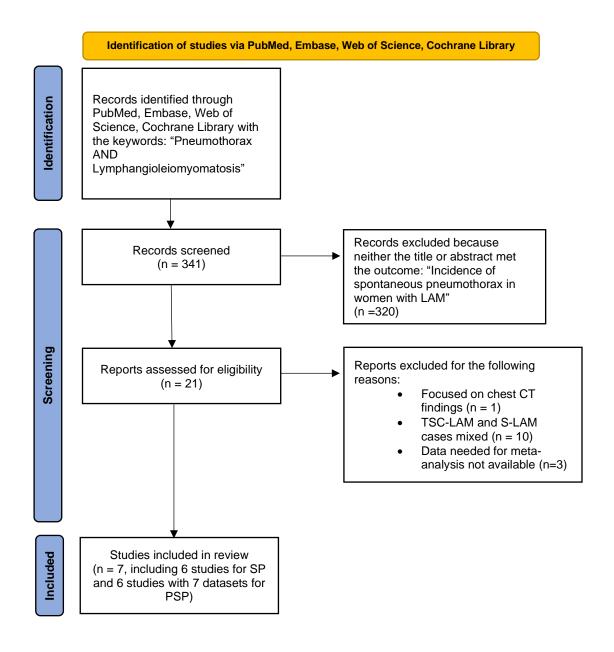
Supplementary figure S4. Overall prevalence of SP in women



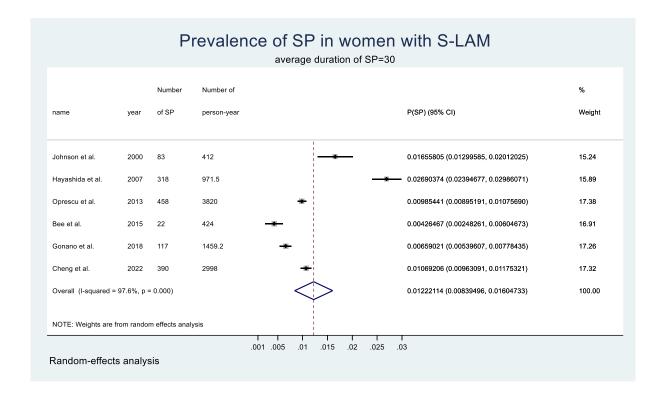
Supplementary figure S5. Prevalence of SP in women stratified by period before/after July 2000



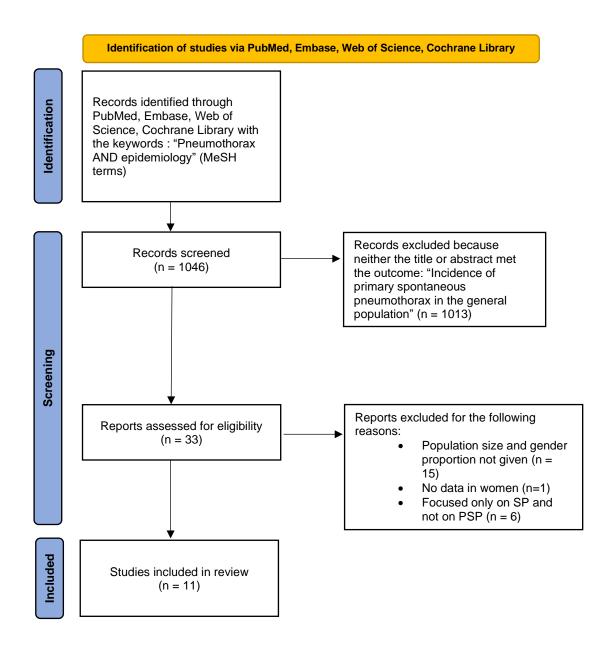
Supplementary figure S6. PRISMA flow diagram for SP and PSP in women with S-LAM



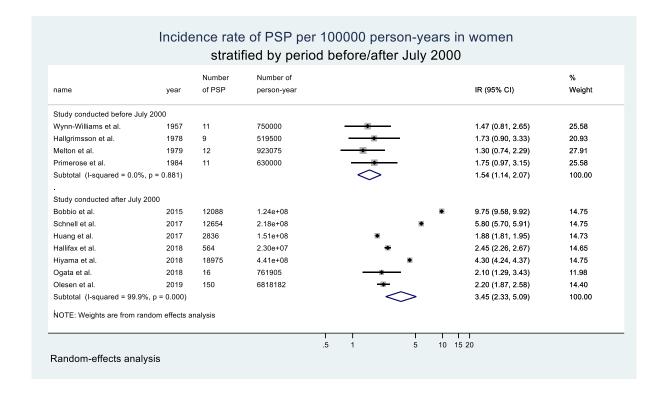
Supplementary figure S7. Prevalence of SP in women with S-LAM



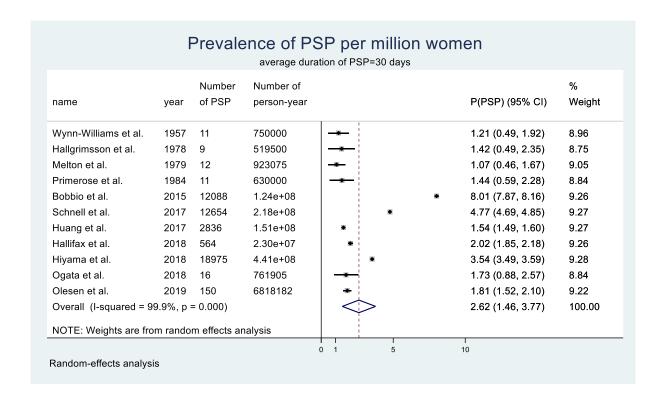
Supplementary figure S8. PRISMA flow diagram for PSP epidemiology



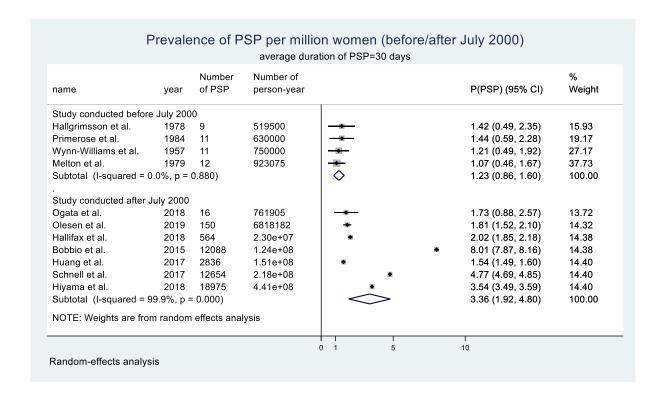
Supplementary figure S9. Incidence rate of PSP in women of the general population stratified by period before/after July 2000



Supplementary figure S10. Overall prevalence of PSP in women of the general population, with an average PSP duration of 30 days



Supplementary figure S11. Prevalence of PSP in women of the general population, with an average PSP duration of 30 days, stratified by period before/after July 2000



Supplementary figure S 12. Prevalence of apparent PSP in women with S-LAM, with average duration of PSP of 30 days, random-effects model.

