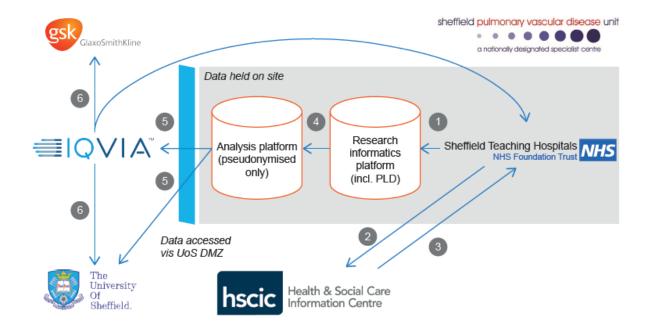
Supplementary Figure 1 Overview of data collection and ethical approvals at each stage of the analyses



Steps to Build the SPHInX Dataset

Sheffiled teaching hospitals (STH) store clinical data on an internal research server at the Royal Hallamshire Hospital.

2 STH shares NHS numbers (matched to a study ID) for patients within the cohort with the Health & Social Care Information Centre (HSCIC).

HSCIC returns the requested de-identified HES records to STH research team with study ID and de-identified HES data for all non-STH patients.

Study ID linked HES data are handled in compliance with the STH policies on patient data, and are only accessible by the patient management team. STH research team de-identified the linked data which were deposited onto a server, physically secured within the STH Computer Sciences for analysis.

The data are accessed remotely within the STH DMZ by trained researchers (from IQVIA and specific members from the University of Sheffield (UoS) who are under honorary contracts at the STH). Access is granted using strong two-factor authentication based on USB keys which produce one time use passwords. Analysis was conducted for the agreed research questions and only on de-identified patient information.

6 IQVIA share aggregated longitudinal descriptive analysis of diagnostic pathways with GSK, STH and UoS

The SPHInX dataset was built under multiple different governance arrangements in order to ensure all research was undertaken on appropriate de-identified patient records. This included STH research ethics approval; National Health Research Authority research ethics and confidentiality advisory group approval, as well as approval of the Independent Group Advising on the Release of Data (via application to NHS Digital's Data Access Request Service)

Supplementary Table 1. ICD-10 diagnostic codes

| ICD-10 Code | Description (Grouping) | | |
|---|---|--|--|
| Due to left heart failure (increased back pressure in the pulmonary vessel) | | | |
| I50.1 | Left ventricular pump failure (heart attack, cardiomyopathy) | | |
| l11 | Left ventricular stiffness (hypertension, diabetes, metabolic syndrome) | | |
| 135, 134 | Valve disease (mitral or aortic stenosis or regurgitation) | | |
| Diseases affecting the whole lung (lung diseases obliterate blood vessels) | | | |
| J40, J41, J42, J43 | Chronic bronchitis and emphysema (combination of loss of lung plus hypoxia) | | |
| J80, J81, J82, J84 | Interstitial lung diseases (destructive diseases that obliterate vessels, such as pulmonary fibrosis, sarcoidosis, and many others) | | |
| Hypoxia related (decreased oxygen constricts pulmonary blood vessels) | | | |
| W94, T70 | High altitude-dwelling | | |
| G47.3, R06.8 | Sleep apnoea and other hypoventilation syndromes | | |
| Primarily obstructing diseases of the pulmonary vessels | | | |
| I26 | Pulmonary thromboembolism | | |
| | | | |

| B65 | Schistosomiasis | | |
|---|---|--|--|
| D57 | Sickle cell anaemia | | |
| N/A | Tumour emboli | | |
| J98.5 | Fibrosing mediastinitis (obstruction by fibrosis related to histoplasmosis) | | |
| D73 | Haematological disorders: myeloproliferative disorders, splenectomy | | |
| D86, C96, D18.1, Q85.0, D69.0, | Systemic disorders: sarcoidosis, pulmonary Langerhans' cell histiocytosis, lymphangioleiomyomatosis, neurofibromatosis, | | |
| L95, L94, | vasculitis | | |
| E74.0, E75.2, E00-E07 | Metabolic disorders: glycogen storage disease, Gaucher's disease, thyroid disorders | | |
| Y84.1 | Others: Tumour obstruction, fibrosing mediastinitis, chronic kidney disease on dialysis | | |
| Pulmonary arterial hypertension (changes in the structure and function of the pulmonary arteries) | | | |
| N/A | Idiopathic (formerly primary pulmonary hypertension) | | |
| N/A | Heritable (formerly familial, due to BMPR2 or Alk-1 mutations) | | |
| N/A | Drug- and toxin-induced (stimulants) | | |

| M30, M31, M32, M33, M34, | Connective tissue diseases (especially scleroderma) |
|--------------------------|---|
| M35, M36 | |
| | |
| B20, B21, B22, B23, B24 | HIV infection (rare occurrence) |
| | |
| K76.6 | Portal hypertension (cirrhosis and other advanced liver diseases) |
| 020 024 022 022 024 | Consequently beautificated that allows blood to about account the burst |
| Q20, Q21, Q22, Q23, Q24 | Congenital heart disease that allows blood to shunt around the lungs |
| D18.0 | Pulmonary veno-occlusive disease and pulmonary capillary haemangiomatosis (rare) |
| D 10.0 | Taimonary veno occiusive discuse and pulmonary capillary nacillarigionatosis (lare) |
| | |

Alk-1, activin receptor-like kinase 1; BMPR2, bone morphogenetic protein receptor 2; HIV, human immunodeficiency virus; ICD-10, International Statistical Classification of Diseases and Related Health Problems, version 10

Supplementary Table 2. ICD-10 codes related to concomitant and differential diagnoses of PAH

| ICD-10 code | Description |
|-----------------------|---|
| 142.0 | Dilated cardiomyopathy |
| | |
| E03.9 | Hypothyroidism |
| 105.0, I34.2 OR Q23.2 | Mitral stenosis |
| M35.1 | Mixed connective-tissue disease |
| G47.3 | Obstructive sleep apnoea |
| M32 | Systemic lupus erythematosus |
| K76.6 | Portal hypertension |
| 137.0 | Pulmonic stenosis |
| L94.0, L94.1 OR M43 | Scleroderma |
| 120–125 | Ischaemic heart diseases |
| 150 | Heart failure |
| 126–128 | Pulmonary heart disease and diseases of pulmonary circulation |
| J45 | Asthma |
| J47 OR J40–J44 | COPD |
| J84.9 | Interstitial lung disease |
| | |

COPD, chronic obstructive pulmonary disease; ICD-10, International Statistical Classification of Diseases and Related Health Problems, version 10; PAH, pulmonary arterial hypertension