S6a. Meta-regression for Postoperative Complications by Age Difference at Baseline

Metaregression of the effect of baseline age differences on the log odds ratio for the risk of postoperative complications for HR-OSA versus LR-OSA.

Each circle represents a study, telescopied by its weight in the analysis. The relationship was nonsignificant, suggesting that the impact of HR-OSA on risk of complications was consistent over the year ($p = 0.6185$).
S6b. Meta-regression for Postoperative Complications by Gender Difference at Baseline

Meta-regression of the effect of baseline gender differences on the log odds ratio for the risk of postoperative complications for HR-OSA versus LR-OSA.

Each circle represents a study, telescoped by its weight in the analysis. The relationship was nonsignificant, suggesting that the impact of HR-OSA on risk of complications was consistent over the gender ($p = 0.0692$).
S6c. Meta-regression for Postoperative Complications by BMI Difference at Baseline

Metaregression of the effect of baseline BMI differences on the log odds ratio for the risk of postoperative complications for HR-OSA versus LR-OSA.

Each circle represents a study, telescoped by its weight in the analysis. The relationship was nonsignificant, suggesting that the impact of HR-OSA on risk of complications was consistent over the BMI ($p = 0.3108$).
S6d. Meta-regression for Postoperative Complications by Hypertension Difference at Baseline

Metaregression of the effect of baseline Hypertension differences on the log odds ratio for the risk of postoperative complications for HR-OSA versus LR-OSA.

Each circle represents a study, telescoped by its weight in the analysis. The relationship was nonsignificant, suggesting that the impact of HR-OSA on risk of complications was consistent over the hypertension ($p = 0.0810$).
S6e. Meta-regression for Postoperative Complications by Diabetes Mellitus Difference at Baseline

Meta-regression of the effect of baseline Diabetes Mellitus differences on the log odds ratio for the risk of postoperative complications for HR-OSA versus LR-OSA.

Each circle represents a study, telescopied by its weight in the analysis. The relationship was nonsignificant, suggesting that the impact of HR-OSA on risk of complications was consistent over the diabetes mellitus (p = 0.5726).

\[ p = 0.5726 \]
S6f. Meta-regression for Postoperative Complications by COPD Difference at Baseline

Metaregression of the effect of baseline COPD differences on the log odds ratio for the risk of postoperative complications for HR-OSA versus LR-OSA.

Each circle represents a study, telescoped by its weight in the analysis. The relationship was nonsignificant, suggesting that the impact of HR-OSA on risk of complications was consistent over the COPD (p = 0.7386).
S6g. Meta-regression for Postoperative Complications by Stroke/CVA Difference at Baseline

Meta-regression of the effect of baseline Stroke/CVA differences on the log odds ratio for the risk of postoperative complications for HR-OSA versus LR-OSA.

Each circle represents a study, telescoped by its weight in the analysis. The relationship was nonsignificant, suggesting that the impact of HR-OSA on risk of complications was consistent over the stroke/CVA ($p = 0.7784$).
S6h. Meta-regression for Postoperative Complications by ASA Class 1 & 2 Difference at Baseline

Meta-regression of the effect of baseline ASA Class 1 & 2 differences on the log odds ratio for the risk of postoperative complications for HR-OSA versus LR-OSA.

Each circle represents a study, telescoped by its weight in the analysis. The relationship was nonsignificant, suggesting that the impact of HR-OSA on risk of complications was consistent over the ASA Class 1 & 2 ($p = 0.9614$).
S6i. Meta-regression for Postoperative Complications by ASA Class 3-5 Difference at Baseline

Metaregression of the effect of baseline ASA Class 3-5 differences on the log odds ratio for the risk of postoperative complications for HR-OSA versus LR-OSA.

Each circle represents a study, telescoped by its weight in the analysis. The relationship was nonsignificant, suggesting that the impact of HR-OSA on risk of complications was consistent over the ASA Class 3-5 (p = 0.9661).