

STROBE Statement —checklist of items that should be included in reports of observational studies

Section/item	Item No	Recommendation	Reported on Page Number/Line Number	Reported on Section/Paragraph
Title and abstract	1	(a) Indicate the study’ s design with a commonly used term in the title or the abstract	2/26–33	Abstract
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	2–3/33–54	Abstract
Introduction				
Background/ rationale	2	Explain the scientific background and rationale for the investigation being reported	4/101–110	Introduction/ 2–3
Objectives	3	State specific objectives, including any prespecified hypotheses	4/101–110	Introduction/2–3
Methods				
Study design	4	Present key elements of study design early in the paper	5/117–132	Methods/1–2
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	5/117–132	Methods/ 1–2
Participants	6	(a) Cohort study —Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up Case-control study —Give the eligibility criteria, and the sources and methods of case ascertainment and control selection. Give the rationale for the choice of cases and controls Cross-sectional study —Give the eligibility criteria, and the sources and methods of selection of participants	5/122–127	Methods/1
		(b) Cohort study — For matched studies, give matching criteria and number of exposed and unexposed Case-control study — For matched studies, give matching criteria and the number of controls per case	N/A	Not matched studies
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	6/145–149	Methods/ 4
Data sources/ measurement	8*	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group	5/117–134	Methods/ 1–2
Bias	9	Describe any efforts to address potential sources of bias	5/122–127	Methods/1
Study size	10	Explain how the study size was arrived at	6/158–159	Result/1
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	5/150–155	Methods/ 5

Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding	5/150–155	Methods/5
		(b) Describe any methods used to examine subgroups and interactions	N/A	Not applicable
		(c) Explain how missing data were addressed	5/150–155	Methods/5
		(d) Cohort study — If applicable, explain how loss to follow-up was addressed Case-control study — If applicable, explain how matching of cases and controls was addressed Cross-sectional study — If applicable, describe analytical methods taking account of sampling strategy	5/122–127	Methods/1
		(e) Describe any sensitivity analyses	N/A	This study didn't involve sensitivity analyses
Results				
Participants	13*	(a) Report numbers of individuals at each stage of study —eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed	6/158–159	Results/1
		(b) Give reasons for non-participation at each stage	6/158–159	Results/1
		(c) Consider use of a flow diagram	6/158–159	Results/1
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	6/160	Results/1
		(b) Indicate number of participants with missing data for each variable of interest	6/160	Results/1
		(c) Cohort study —Summarise follow-up time (eg, average and total amount)	8/195–197	Results/8
Outcome data	15*	Cohort study — Report numbers of outcome events or summary measures over time	8/195–197	Results/8
		Case-control study — Report numbers in each exposure category, or summary measures of exposure	N/A	Not applicable
		Cross-sectional study — Report numbers of outcome events or summary measures	N/A	Not applicable
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included	7–8/161–194	Results/2–7
		(b) Report category boundaries when continuous variables were categorized	7–8/161–194	Results/2–7
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	N/A	Not applicable
Other analyses	17	Report other analyses done —eg analyses of subgroups and interactions, and sensitivity analyses	N/A	Not applicable
Discussion				
Key results	18	Summarise key results with reference to study objectives	8–10/204–269	Discussions/2–8
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias	10/270–273	Discussions/9

Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	8–10/204–269	Discussions/2–8
Generalisability	21	Discuss the generalisability (external validity) of the study results	8–10/204–269	Discussions/2–8
Other information				
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based	11–281	Funding/1

*Give information separately for cases and controls in case-control studies and, if applicable, for exposed and unexposed groups in cohort and cross-sectional studies.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at <http://www.plosmedicine.org/>, Annals of Internal Medicine at <http://www.annals.org/>, and Epidemiology at <http://www.epidem.com/>). Information on the STROBE Initiative is available at www.strobe-statement.org.

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*As the checklist was provided upon initial submission, the page number/line number reported may be changed due to copyediting and may not be referable in the published version. In this case, the section/paragraph may be used as an alternative reference.