

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 | Page 1 Line 5 | Title |
| | | (b) Provide in the abstract an informative and balanced summary of what was done and what was found | Page 3 Line 58-67 | Abstract(Methods and |
| Introduction | | | | |
| Background/ rationale | 2 | Explain the scientific background and rationale for the investigation being reported | Page 4-5 Line 134-182 | Background |
| Objectives | 3 | State specific objectives, including any prespecified hypotheses | This is an observational | No need for prespecified |
| Methods | | | | |
| Study design | 4 | Present key elements of study design early in the paper | Line 207-270 | Methods section |
| Setting | 5 | Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection | Please refer to Figure 1 | Figure 1 has all the required information |
| 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 | Line 208-223 | Supplementary Table 1, Methods (2.1 patients) |
| | | (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 | There is no matched study | There is no matched study |
| Variables | 7 | Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable | Line 207-270 | Methods (2.1, 2.2, 2.3, 2.5) |
| 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 | Please see the tables and supplementary materials | Table 1, Supplementary Table 1,2,3,4, ... |
| Bias | 9 | Describe any efforts to address potential sources of bias | Line 406-409 | Discussion section |
| Study size | 10 | Explain how the study size was arrived at | Line 5 | Title (single-center, |
| Quantitative variables | 11 | Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why | Line 235-241 | Methods (2.6) |

| | | | | |
|---------------------|-----|---|--------------------------------------|---|
| Statistical methods | 12 | (a) Describe all statistical methods, including those used to control for confounding | Line 235-241 | Methods (2.6) |
| | | (b) Describe any methods used to examine subgroups and interactions | Line 235-241 | Methods (2.6) |
| | | (c) Explain how missing data were addressed | Missing data were not | included in the analysis. |
| | | (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 | These situations were not applicable | These situations were not applicable |
| | | (e) Describe any sensitivity analyses | This is a descriptive study. | There is no sensitivity |
| 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 | Line 351 | Table 1 (for each indicator, individual |
| | | (b) Give reasons for non-participation at each stage | Patients did take all the | Patients did take all the |
| | | (c) Consider use of a flow diagram | Not considered in this | Not considered in this |
| Descriptive data | 14* | (a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders | Supplementary Table 1 | Supplementary Table 1 |
| | | (b) Indicate number of participants with missing data for each variable of interest | Line 375 | Table 1 |
| | | (c) Cohort study —Summarise follow-up time (eg, average and total amount) | Specified in | Specified in |
| Outcome data | 15* | Cohort study —Report numbers of outcome events or summary measures over time | Line 375 | Table 1, Supplementary |
| | | Case-control study —Report numbers in each exposure category, or summary measures of exposure | Line 375 | Table 1, Supplementary |
| | | Cross-sectional study —Report numbers of outcome events or summary measures | Line 375 | Table 1 |
| 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 | Not applicable | Not applicable |
| | | (b) Report category boundaries when continuous variables were categorized | No continuous variables | No continuous variables |
| | | (c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period | Not relevant | Not relevant |
| Other analyses | 17 | Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses | This is only a descriptive | This is only a descriptive |
| Discussion | | | | |
| Key results | 18 | Summarise key results with reference to study objectives | Line 427-440 | Conclusions section |
| 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 | Line 380-426 | Discussion section |

| | | | | |
|--------------------------|----|--|-------------------------|--|
| Interpretation | 20 | Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence | Page 16-17 Line 356-402 | Discussion |
| Generalisability | 21 | Discuss the generalisability (external validity) of the study results | Page 16-17 Line 356-402 | Discussion |
| 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 | Page 18 Line 420-421 | Funding statement (No funding available) |

*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.

Article information: <http://dx.doi.org/10.21037/atm-20-3333>

*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.