Section/item	ltem 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	1/1	Title/1
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	1/22	abstract/1
Introduction				
Background/ rationale	2	Explain the scientific background and rationale for the investigation being reported	2/44	Introduction/1
Objectives	3	State specific objectives, including any prespecified hypotheses	3/84	Introduction/3
Methods				
Study design	4	Present key elements of study design early in the paper	4/91	Net hods/1
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	4/95	Met hods/2
Participants	6	 (a) <i>Cohort study</i>—Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up <i>Case-control study</i>—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 <i>Cross-sectional study</i>—Give the eligibility criteria, and the sources and methods of selection of participants 	4/94	Net hods/2
		(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	NA
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	4/95	Met hods/2
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	4/104	Met hods/3
Bias	9	Describe any efforts to address potential sources of bias	N/A	N/A
Study size	10	Explain how the study size was arrived at	4/104	Net hods/3
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	4/104	Met hods/3

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

12	(a) Describe all statistical methods, including those used to control for confounding	6/146	Net hods/7
	(b) Describe any methods used to examine subgroups and interactions	N∕A	N/A
	(c) Explain how missing data were addressed	N∕A	N/A
	(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	NA	NA
	(e) Describe any sensitivity analyses	6/155	Net hods/9
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	7/164	Results/1
	(b) Give reasons for non-participation at each stage	N∕A	N∕A
	(c) Consider use of a flow diagram	24/468	table/1
14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	7/171	Results/2
	(b) Indicate number of participants with missing data for each variable of interest	N∕A	N/A
	(c) Cohort study —Summarise follow-up time (eg, average and total amount)	N∕A	N/A
15*	Cohort study – Report numbers of outcome events or summary measures over time	N∕A	N∕A
	Case-control study-Report numbers in each exposure category, or summary measures of exposure	N∕A	N/A
	Cross-sectional study—Report numbers of outcome events or summary measures	4/94	Net hods/2
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	N∕A	N∕A
	(b) Report category boundaries when continuous variables were categorized	N∕A	N/A
	(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	N∕A	N/A
17	Report other analyses done – eg analyses of subgroups and interactions, and sensitivity analyses	N∕A	N∕A
18	Summarise key results with reference to study objectives	10/247	Di scussi on/1
19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias	11/277	Di scussi on/3
	13* 14* 15* 16 17 18	13 10 (b) Describe any methods used to examine subgroups and interactions (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how missing data were addressed (c) Explain how matching of cases and controls was addressed (c) Describe any sensitivity analyses (e) Describe any sensitivity analyses 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 (b) Give reasons for non-participation at each stage (c) Consider use of a flow diagram 14* (a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders (b) Indicate number of participants with missing data for each variable of interest (c) Cohort study—Summaris	(b) Describe any methods used to examine subgroups and interactions NA (c) Explain how missing data were addressed NA (d) Cohort study—If applicable, explain how loss to follow-up was addressed NA (e) Describe any sensitivity analyses 6/155 (e) Describe any sensitivity analyses 6/155 (e) Describe any sensitivity analyses 6/155 (f) Cohort study—If applicable, describe analytical methods taking account of sampling strategy 7/164 (f) Consider 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 NA (f) Consider use of a flow diagram 24/463 (g) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders 7/171 (b) Indicate number of participants with missing data for each variable of interest NA (c) Cohort study—Report numbers in each exposure category, or summary measures of exposure NA (g) 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 NA (g) Give unadjusted estimates and relative risk into absolute risk for a meaningful time period NA (h) Report category bounda

Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	11/277	Di scussi on/3				
Generalisability	21	Discuss the generalisability (external validity) of the study results	11/277	Di scussi on/3				
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	N∕A	N∕A				

*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.