

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 3, line 48-66,	Abstract
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	Page 3, line 48-66	Abstract
Introduction,				
Background/ rationale	2	Explain the scientific background and rationale for the investigation being reported	Page 5, line 77-98	1. Introduction; <i>1.1 Background and 1.2 Rationale and knowledge gap</i>
Objectives	3	State specific objectives, including any prespecified hypotheses	Page 5, line 100-103	<i>1.3 Objective</i>
Methods				
Study design	4	Present key elements of study design early in the paper	Page 5–6, line 105-131	2. Methods
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	Page 5–6, line 105-131	2. Methods
Participants	6	(a) 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	Page 6–7, line 133-158	<i>2.1 Investigation items</i>
		(b) Case-control study —For matched studies, give matching criteria and the number of controls per case	Page 6–7, line 105-158	2. Methods
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	Page 6–8, line 105-176	2. Methods
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	Page 7–8, line 160-176	<i>2.2 Statistical analyses</i>
Bias	9	Describe any efforts to address potential sources of bias	Page 8, line 172-176	<i>2.2 Statistical analyses</i>
Study size	10	Explain how the study size was arrived at	Page 5-6, line 106-131	2. Methods

Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	Page 6-8, line 133-176	2. Methods
Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding	Page 7-8, line 160-176	2.2 <i>Statistical analyses</i>
		(b) Describe any methods used to examine subgroups and interactions	Page 7-8, line 160-176	2.2 <i>Statistical analyses</i>
		(c) Explain how missing data were addressed	Page 8, line 171-175	2.2 <i>Statistical analyses</i>
		(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	Page 8, line 172-176	2.2 <i>Statistical analyses</i>
		(e) Describe any sensitivity analyses	This analysis does not enforce sub -group analysis and sensitivity analysis.	
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	Page 8-9, line 187-214	3. Results
		(b) Give reasons for non-participation at each stage	Page 8-9, line 187-193	3. Results
		(c) Consider use of a flow diagram	No flow diagram has been created.	
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	Page 8-9, line 187-214	3. Results
		(b) Indicate number of participants with missing data for each variable of interest	Page 8-9, line 187-214	3. Results
		(c) Cohort study —Summarise follow-up time (eg, average and total amount)	Not applicable.	
Outcome data	15*	Cohort study —Report numbers of outcome events or summary measures over time	Not applicable.	
		Case-control study —Report numbers in each exposure category, or summary measures of exposure	Page 8-9, line 187-214	3. Results
		Cross-sectional study —Report numbers of outcome events or summary measures	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	Page 9, line 207-214	3. Results
		(b) Report category boundaries when continuous variables were categorized	Page 8-9, line 187-214	3. Results
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	Page 9, line 207-214	3. Results
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	This analysis does not enforce sub -group analysis and sensitivity analysis.	

Discussion				
Key results	18	Summarise key results with reference to study objectives	Page 10, line 243-250	Section 4.2.
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	Page 12, line 289-302	Section 4.4.
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	Page 10-12, line 230-287	Section 4.1 -3.
Generalisability	21	Discuss the generalisability (external validity) of the study results	Page 9-12, line 216-302	Section 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	NA	

*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: <https://dx.doi.org/10.21037/apm-23-540>

*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.