STROBE Statement—Checklist of items that should be included in reports of ***cohort 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 2/Line 38	Abstract/ Paragraph 2
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found	Page 2/Line 38-59	Abstract/ Paragraph 2-3
Introduction				
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	Page 3-4/Line 70-112	Introduction/ Paragraph 1-3
Objectives	3	State specific objectives, including any prespecified hypotheses	Page 4-5/Line 113-120	Introduction/ Paragraph 4
Methods				
Study design	4	Present key elements of study design early in the paper	Page 5/Line 124-128	Methods/ Paragraph 2
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	Page 5/Line 124-135	Methods/ Paragraph 2
Participants	6	(*a*) Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up	Page 5/Line 126-132	Methods/ Paragraph 2
		(*b*) For matched studies, give matching criteria and number of exposed and unexposed	Page 5/Line 126-128	Methods/ Paragraph 2
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	Page 5-6/Line 134-151	Methods/ Paragraph 1-2
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	Page 6-7/Line 152-201	Methods/ Paragraph 2-6
Bias	9	Describe any efforts to address potential sources of bias	Page 7/Line 196-201	Methods/ Paragraph 6
Study size	10	Explain how the study size was arrived at	Page 5/ Line 124-128	Methods/ Paragraph 1

Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	Page 7-8/Line 202-213	Methods/ Paragraph 7
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding	Page 7-8/Line 202-213	Methods/ Paragraph 7
		(*b*) Describe any methods used to examine subgroups and interactions	Page 7-8/Line 202-213	Methods/ Paragraph 7
		(*c*) Explain how missing data were addressed	Page 7-8/Line 202-213	Methods/ Paragraph 7
		(*d*) If applicable, explain how loss to follow-up was addressed	NA	No missing data
		(*e*) Describe any sensitivity analyses	Page 7-8/Line 202-213	Methods/ Paragraph 7
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/Line 217-222	Results/ Paragraph 1
		(b) Give reasons for non-participation at each stage	NA	All patients are enrolled
		(c) Consider use of a flow diagram	NA	The process of selection is simple to know
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	Page 8/Line 223-231	Results/ Paragraph 2
		(b) Indicate number of participants with missing data for each variable of interest	NA	No missing data
		(c) Summarise follow-up time (eg, average and total amount)	NA	No follow-up
Outcome data	15*	Report numbers of outcome events or summary measures over time	Page 8-9/Line 233-262	Results/ Paragraph 3-5
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 8-9/Line 233-262	Results/ Paragraph 3-5
		(*b*) Report category boundaries when continuous variables were categorized	Page 5-6/Line 144-151	Methods/ Paragraph 2

		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	NA	Not relevant
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	NA	No other analyses done
Discussion				
Key results	18	Summarise key results with reference to study objectives	Page 10/Line 274-280	Discussion/ Paragraph 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 343-350	Discussion/ Paragraph 6
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	Page 10-11/Line 280-321	Discussion/ Paragraph 2-4
Generalisability	21	Discuss the generalisability (external validity) of the study results	Page 11/Line 322-342	Discussion/ Paragraph 5
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 13/Line 361-363	Acknowledge/ Paragraph 1

*Give information separately for exposed and unexposed groups.

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 http://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.