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

	Item No	Recommendation
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract **Title Page**
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found **Evidenced in the abstract section of the paper**
Introduction		
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported **Lines 43 - 54**
Objectives	3	State specific objectives, including any prespecified hypotheses **Lines 56 - 59**
Methods		
Study design	4	Present key elements of study design early in the paper **Lines 64 - 83**
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection **Lines 64 - 83**
Participants	6	(*a*) *Cohort study*—Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up **Lines 66 - 81** *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
		(*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
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable **Lines 67 - 80**
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 **No measurements undertaken in the study analysis**
Bias	9	Describe any efforts to address potential sources of bias **All available cases included as per methods section to reduce selection bias (Lines 67 – 80)**
Study size	10	Explain how the study size was arrived at **Lines 64 - 69**
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why **N/A no groupings etc**

Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding **Student t-test on Proms data (Table 2). Limitations of small sample size Line 445.**
		(*b*) Describe any methods used to examine subgroups and interactions **N/A no subgroups**
		(*c*) Explain how missing data were addressed **Analysis performed on the remaining cases with data present. Small sample size so all missing data is clearly identified in the text.**
		(*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
		(*e*) Describe any sensitivity analyses

Continued on next page

Results		
Participants	13*	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 **Small sample size of very specific group of patients assessed retrospectively so all potentially eligible patient included.**
		(b) Give reasons for non-participation at each stage
		(c) Consider use of a flow diagram
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders **Summarised in table 1.**
		(b) Indicate number of participants with missing data for each variable of interest **Summarised in table 1, 1 patient with missing PROMs identified in text line 443, missing CT scans – line 417**
		(c) *Cohort study*—Summarise follow-up time (eg, average and total amount) **Line 243**
Outcome data	15*	*Cohort study*—Report numbers of outcome events or summary measures over time √
		Case-control study—Report numbers in each exposure category, or summary measures of exposure
		Cross-sectional study—Report numbers of outcome events or summary measures
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 **N/A**
		(*b*) Report category boundaries when continuous variables were categorized
		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses **No analyses of sub groups**
Discussion		
Key results	18	Summarise key results with reference to study objectives **Lines 323 - 330**
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 **Lines 417 – 420, 445.**
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence **Lines 323 - 407**
Generalisability	21	Discuss the generalisability (external validity) of the study results **Lines 451 - 457**
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 **No funding received**

*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 line number reported may be changed due to copyediting and may not be referable in the published version.