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

	Item No.	Recommendation	Page No.	Relevant text from manuscript
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract	N/A	Title
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found	N/A	Abstract, sections entitled methods, results, and conclusions.
Introduction				
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	1-2	Introduction
Objectives	3	State specific objectives, including any prespecified hypotheses	2	Introduction, Paragraph 3
Methods				
Study design	4	Present key elements of study design early in the paper	2-5	Materials and methods, all sections.
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	2-4	Materials and methods, sections titled patients, assessment of clinical characteristics, assessment of efficacy and safety outcomes, and follow-up.
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	2-4	Materials and methods, sections titled patients, follow-up
		(*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	Not a matched study
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	2-4, 7, 13	Criteria as defined in materials and methods section 'patients'

				and re-staging as defined in 'assessment of clinical characteristics.' Confounding discussed in 'limitations.' Landmarked analysis results as discussed results page 7 and limitations.
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	2-7, 14-15	Materials and methods, all sections. All data collected retrospectively from EPIC and MOSAIQ as outlined in materials and methods. Variables of interest not explicitly defined in materials and methods are discussed in results. Comparability of assessment discussed in 'limitations'.
Bias	9	Describe any efforts to address potential sources of bias	2-5, 7, 14-15	As described in inclusion/exclusion criteria in 'patients' section of materials and methods and adjustment for covariates as discussed in 'statistical analysis' section. Landmarked analysis page 7 & limitations. Bias as discussed in 'limitations'
Study size	10	Explain how the study size was arrived at	2-3, 14-15	Review of eligible patients as described in 'patients' section of materials and methods. Limitations.

Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	3-4, tables	Quantitative variables for survival handled as stated in materials and methods sections 'follow up,' 'assessment of efficacy and safety outcomes,' and 'statistical analysis'. Clinical variables that were categorical were determined based on standard approaches /cut-offs when applicable.
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding	4, 14-15	Materials and methods, section titled 'statistical analyses', limitations of adjustment for confounding as discussed in limitations.
		(*b*) Describe any methods used to examine subgroups and interactions	3-4	As discussed in material and methods sections 'assessment of clinical characteristics' and 'statistical analysis'
		(*c*) Explain how missing data were addressed	14-15	As discussed in limitations. Limited data was available for some variables.
		(*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	4	As discussed in material and methods section titled 'follow up' and 'statistical analysis'
		(*e*) Describe any sensitivity analyses	6-7	Results, section titled 'survival'
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	2-3	Materials and methods, section titled 'patients'
		(b) Give reasons for non-participation at each stage	N/A	Retrospective

		(c) Consider use of a flow diagram	N/A	Retrospective
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	Table 1, 2, results, supplemental appendix	Demographic data as in table 2, additional descriptors in results, all sections. Supplemental appendix further characterizes exposures in terms of chemotherapy.
		(b) Indicate number of participants with missing data for each variable of interest	All tables, all figures	Tables 1-2 give raw data, table 3 data is represented in tables 1-2. Survival curves performed as outlined in materials and methods.
		(c) *Cohort study*—Summarise follow-up time (eg, average and total amount)	6-7	Results, section titled 'survival'
Outcome data	15*	*Cohort study*—Report numbers of outcome events or summary measures over time	All Figures	Survival curves generated as outlined in materials and methods.
		Case-control study—Report numbers in each exposure category, or summary measures of exposure	N/A	
		Cross-sectional study—Report numbers of outcome events or summary measures	N/A	
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	All tables, Results	Univariable and multivariable analysis both presented in tables as applicable. 95% confidence intervals provided as applicable.
		(*b*) Report category boundaries when continuous variables were categorized	All Figures, results	Continuous variables as reported in survival analyses. Tables include categorical variables only for logistic regression, and parameters of each category are as defined in the text and tables.
		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	All Figures	Risk of OS, RFS, DFS are presented in absolute measurement in figures.

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Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	6-7	Results, section titled 'survival'
Discussion				
Key results	18	Summarise key results with reference to study objectives	8-16	Discussion, all sections, 'conclusions'
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	15-16	'limitations'
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	8-16	Discussion, all sections; 'limitations'
Generalisability	21	Discuss the generalisability (external validity) of the study results	1-2, 8-16	Introduction; Discussion, all sections; 'limitations'; 'conclusions'
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	16	Acknowledgements

*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.