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	4; 51	Abstract; Methods
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	4-5; 53-67	Abstract
Introduction				
Background/ rationale	2	Explain the scientific background and rationale for the investigation being reported	7-8; 94-132	Introduction
Objectives	3	State specific objectives, including any prespecified hypotheses	8-9; 133-138	Introduction
Methods				
Study design	4	Present key elements of study design early in the paper	9-10; 149-198	Patients and methods; 2-3
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	9-10; 149-170 12; 206-210	Patients and methods; 2, 5
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	9-10; 149-170 12; 206-210	Patients and methods; 2, 5
		(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 matched study
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	10-12; 171-214	Patients and methods; 3-5
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	10-12; 171-214	Patients and methods; 3-5
Bias	9	Describe any efforts to address potential sources of bias	11-12; 185-204	Patients and methods; 3-4
Study size	10	Explain how the study size was arrived at	9; 149-151	Patients and methods; 2
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	11-12; 202-204	Patients and methods; 4

Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding	12-13; 216-228	Patients and methods; 6
		(b) Describe any methods used to examine subgroups and interactions	13; 225-228	Patients and methods; 6
		(c) Explain how missing data were addressed	10; 170	Patients and methods; 2
		(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	12; 207-208	Patients and methods; 5
		(e) Describe any sensitivity analyses	N/A	Not performed
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	13; 232-234 16; 294-302	Results; 1, 7
		(b) Give reasons for non-participation at each stage	Figure S1	Figure S1
		(c) Consider use of a flow diagram	Figure S1	Figure S1
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	14; 232-248	Results; 1
		(b) Indicate number of participants with missing data for each variable of interest	13; 237-238	Results; 1
		(c) ***Cohort study***—Summarise follow-up time (eg, average and total amount)	15; 274	Results; 5
Outcome data	15*	***Cohort study***—Report numbers of outcome events or summary measures over time	15-16; 277-287	Results; 5
		Case-control study—Report numbers in each exposure category, or summary measures of exposure	N/A	Not Case-control study
		Cross-sectional study—Report numbers of outcome events or summary measures	N/A	Not cross-sectional study
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	Table 1	Table 1
		(b) Report category boundaries when continuous variables were categorized	Table 1	Table 1
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	15; 277-284	Results; 5
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	16; 288-292	Results; 6
Discussion				
Key results	18	Summarise key results with reference to study objectives	17; 315-320	Discussion; 1
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	21-22; 414-424	Discussion; 10

Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	22; 427-431	Conclusions; 1
Generalisability	21	Discuss the generalisability (external validity) of the study results	21; 411-413	Discussion; 9
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	23; 438-443	Funding statement

*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.