## 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 1,line 9-10 | abstract |
| | | (b) Provide in the abstract an informative and balanced summary of what was done and what was found | page 1 line 6-8 | abstract |
| **Introduction** | | | | |
| Background/ rationale | 2 | Explain the scientific background and rationale for the investigation being reported | page 3 line 54-68 | introduction |
| Objectives | 3 | State specific objectives, including any prespecified hypotheses | page 3 line 68-70 | introduction |
| **Methods** | | | | |
| Study design | 4 | Present key elements of study design early in the paper | page 3 line 77 | methods/patients and clinical data |
| Setting | 5 | Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection | page 3,4 line 77-80 | methods/patients and clinical data |
| Participants | 6 | (a) ***Cohort study***—Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up<br>***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<br>***Cross-sectional study***—Give the eligibility criteria, and the sources and methods of selection of participants | cohort study page 3 line 77-79<br>N/A<br>N/A | methods/patients and clinical data |
| | | (b) ***Cohort study***—For matched studies, give matching criteria and number of exposed and unexposed<br>***Case-control study***—For matched studies, give matching criteria and the number of controls per case | N/A | N/A |
| Variables | 7 | Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable | page 3,4 line 81-86 | methods/patients and clinical data |
| 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 | all data were obtained from the medical record | |
| Bias | 9 | Describe any efforts to address potential sources of bias | selectin biais:patients who underwent radiation outside hospital were excluded | |
| Study size | 10 | Explain how the study size was arrived at | sample size was determined by the number of medulloblastoma cases recorded between 2010 and 2019 | |
| Quantitative variables | 11 | Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why | page 4 line 88-89 | methods/statical analysis |

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| Statistical methods | 12 | (a) Describe all statistical methods, including those used to control for confounding | page 4 line 88_94 | methods/statical analysis |
| | | (b) Describe any methods used to examine subgroups and interactions | page 4 line 94 | methods/statical analysis |
| | | (c) Explain how missing data were addressed | Cases with missing data were not taken into consideration | |
| | | (d) ***Cohort study***—If applicable, explain how loss to follow-up was addressed<br>***Case-control study***—If applicable, explain how matching of cases and controls was addressed<br>***Cross-sectional study***—If applicable, describe analytical methods taking account of sampling strategy | patients who did not receive routine follow-up were excluded | |
| | | (e) Describe any sensitivity analyses | | |
| **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 6 line 127 | results |
| | | (b) Give reasons for non-participation at each stage | page 6 line 122-126 | results |
| | | (c) Consider use of a flow diagram | page 6 line 128 | results/figure 2 |
| Descriptive data | 14* | (a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders | page 6-9 line 131-155 | results/clinical and radiological<br>results/treatment and outcome |
| | | (b) Indicate number of participants with missing data for each variable of interest | page 7 line 140 | results/table 2<br>he missing data is reported in table 2 |
| | | (c) ***Cohort study***—Summarise follow-up time (eg, average and total amount) | page 11-14 | results/figure 3-10 |
| Outcome data | 15* | ***Cohort study***—Report numbers of outcome events or summary measures over time | cohort study page10,15 | results/table 3,table 5 |
| | | ***Case-control study***—Report numbers in each exposure category, or summary measures of exposure | N/A | N/A |
| | | ***Cross-sectional study***—Report numbers of outcome events or summary measures | N/A | 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 | page 11 line 182-202 | results/survival analysis<br>results/table 4 |
| | | (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 | page 11 line 251 | results/table 4 |
| **Discussion** | | | | |
| Key results | 18 | Summarise key results with reference to study objectives | page 16-17 line 218-302 | discussion |
| 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 17 line 316-319 | conclusion |

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| Interpretation | 20 | Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence | the interpretation of the results was very cautions | |
| Generalisability | 21 | Discuss the generalisability (external validity) of the study results | page 17 line315 316 | conclusion |
| **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 | this research received no external funding | |

*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.