

STROBE Statement—Checklist of items that should be included in reports of *cross-sectional studies*

	Item No	Recommendation
Title and abstract	1	<p>(a) Indicate the study’s design with a commonly used term in the title or the abstract Indicated in the abstract</p> <hr/> <p>(b) Provide in the abstract an informative and balanced summary of what was done and what was found Provided in the abstract</p>
Introduction		
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported Introduction, pages 3–4
Objectives	3	State specific objectives, including any prespecified hypotheses Page 5
Methods		
Study design	4	Present key elements of study design early in the paper Methods, page 6
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection Page 6
Participants	6	(a) Give the eligibility criteria, and the sources and methods of selection of participants Pages 6–7, additional information in the supplement
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable Pages 7–8, more details in the supplement
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 Pages 7–8, more details in the supplement
Bias	9	Describe any efforts to address potential sources of bias Page 6 (total sampling), pages 8–9 (statistical analyses: taking into account pre-pandemic trend when assessing the effect of COVID-19; adjusted models to account for confounders)
Study size	10	Explain how the study size was arrived at Page 6, page 8, some additional details in the supplement
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why Pages 8–9
Statistical methods	12	<p>(a) Describe all statistical methods, including those used to control for confounding Pages 8–9</p> <hr/> <p>(b) Describe any methods used to examine subgroups and interactions Pages 8–9</p> <hr/> <p>(c) Explain how missing data were addressed Pages 8–9, additional information in the supplement</p> <hr/> <p>(d) If applicable, describe analytical methods taking account of sampling strategy None applied</p> <hr/> <p>(e) Describe any sensitivity analyses</p>

Results		
Participants	13*	<p>(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 Table 1, pages 6–8</p> <p>(b) Give reasons for non-participation at each stage N.A. – no information is collected from the non-participants</p> <p>(c) Consider use of a flow diagram Not included – considered of little extra value</p>
Descriptive data	14*	<p>(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders Table 1</p> <p>(b) Indicate number of participants with missing data for each variable of interest Table 1; some additional information in the supplement</p>
Outcome data	15*	Report numbers of outcome events or summary measures Table 2
Main results	16	<p>(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 2 and supplementary Table S1 for unadjusted estimates; other tables adjusted for confounders that are indicted in the footnotes of the tables. For odds ratios and percentages 95% CIs are provided in the tables and results (pages 10–12).</p> <p>(b) Report category boundaries when continuous variables were categorized Pages 7–8, more details in the supplement</p> <p>(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period Not applied - relative risk measures were used (odds ratios)</p>
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses Pages 8–9, supplementary Tables S1–S4
Discussion		
Key results	18	Summarise key results with reference to study objectives Discussion, page 13
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 Pages 17–18
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence Pages 13–19
Generalisability	21	Discuss the generalisability (external validity) of the study results Pages 18–19
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 Funding information is given in the Author statement

*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 www.strobe-statement.org.