

STROBE Statement—checklist of items that should be included in reports of observational studies → *Please note that all line numbers refer to the PDF version of the “changes accepted” document*

	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	Pages 1-2, lines 1-3, lines 55-56	
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	Page 2, lines 48-76	
Introduction				
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	Page 3, lines 79-98	
Objectives	3	State specific objectives, including any prespecified hypotheses	Pages 3-4, lines 100-109	
Methods				
Study design	4	Present key elements of study design early in the paper	Page 3, lines 103-105; Page 4, lines 112-136	
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	Pages 3-4, lines 112-151	
Participants	6	(<i>Cross-sectional study</i>)—Give the eligibility criteria, and the sources and methods of selection of participants	Page 4, line 112-125	
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	Page 5, line 154-166	
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	Page 4, lines 112-125	
Bias	9	Describe any efforts to address potential sources of bias	Page 4, lines 115-118; Pages 11-12, lines 339-361	

Study size

10 Explain how the study size was arrived at

Page 4, lines

113-118

Continued on next page

Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	Page 4, 128-136; Page 6, lines 176-178
Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding	Pages 5-6, lines 168-193
		(b) Describe any methods used to examine subgroups and interactions	Page 6, lines 169-173
		(c) Explain how missing data were addressed	Page 6, lines 184-186.
		(d) <i>Cohort study</i> —If applicable, explain how loss to follow-up was addressed <i>Case-control study</i> —If applicable, explain how matching of cases and controls was addressed <i>Cross-sectional study</i> —If applicable, describe analytical methods taking account of sampling strategy	N/a
		(e) Describe any sensitivity analyses	Page 6, lines 186-189.
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, lines 196-199. Pages 23-27, Tables 1-3
		(b) Give reasons for non-participation at each stage	N/a
		(c) Consider use of a flow diagram	N/a
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	Pages 6-7, lines 196-208. Pages 23-27, Tables 1-3
		(b) Indicate number of participants with missing data for each variable of interest	Page 6, lines 184-185

		(c) <i>Cohort study</i> —Summarise follow-up time (eg, average and total amount)	N/a
Outcome data	15*	<i>Cohort study</i> —Report numbers of outcome events or summary measures over time	N/a
		<i>Case-control study</i> —Report numbers in each exposure category, or summary measures of exposure	N/a
		<i>Cross-sectional study</i> —Report numbers of outcome events or summary measures	Pages 7-8, lines 221- 250. Pages 23-27, Tables 1-3
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 6, lines 175-191. Pages 7-8, 221-50.
		(b) Report category boundaries when continuous variables were categorized	N/a
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	N/a

Continued on next page

Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	Page 8-9, lines 253- 263
Discussion			
Key results	18	Summarise key results with reference to study objectives	Page 9, lines 266-269
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 11-12, lines 339- 361
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	Page 10, lines 298- 307
Generalisability	21	Discuss the generalisability (external validity) of the study results	Page 12, lines 372- 373
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	Page 12, lines 376- 379

*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.