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	2	Lines 38-39
		(b) Provide in the abstract an informative and balanced summary of what was done and what was	2,3	Lines 33-61
		found		
Introduction				
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	5	Lines 102-112
Objectives	3	State specific objectives, including any prespecified hypotheses	5	Lines 112-115
Methods				
Study design	4	Present key elements of study design early in the paper	5,6	Lines 119-128
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure,	5-8	Lines 121-126; 134-142; 159
		follow-up, and data collection		161; 172-185; 188-193
Participants	6	(a) Cohort study—Give the eligibility criteria, and the sources and methods of selection of	5,6	Lines 119-128
		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		
		(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		
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers.	6-8	Lines 133-142; 159-170; 172
		Give diagnostic criteria, if applicable		185; 188-193
Data sources/	8*	For each variable of interest, give sources of data and details of methods of assessment	6-8	Lines 134-156; 159-170; 172
measurement		(measurement). Describe comparability of assessment methods if there is more than one group		185; 188-193
Bias	9	Describe any efforts to address potential sources of bias	9,10	Lines 200-223
Study size	10	Explain how the study size was arrived at	5,6, Figure 1	Lines 121-128

Continued on next page

Quantitativa	11	Explain how quantitative verichles were hendled in the analyses. If applicable, describe which	67	Lines 142 156: 150 170
Quantitative	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which	6,7	Lines 143-156; 159-170
variables	10	groupings were chosen and why	0.10	L 200 222
Statistical	12	(a) Describe all statistical methods, including those used to control for confounding	9,10	Lines 200-223
methods		(b) Describe any methods used to examine subgroups and interactions	9,10	Lines 200-223
		© Explain how missing data were addressed	9	Line 198 "complete case analysis"
		(d) Cohort study—If applicable, explain how loss to follow-up was addressed	n/a	
		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		
		€ Describe any sensitivity analyses	n/a	
Results				
Participants	13*	(a) Report numbers of individuals at each stage of study-eg numbers potentially eligible, examined	Figure 1	
		for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed		
		(b) Give reasons for non-participation at each stage	Figure 1	
		© Consider use of a flow diagram	Figure 1	
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on	10, Table 1	Lines 231-235
		exposures and potential confounders		
		(b) Indicate number of participants with missing data for each variable of interest	Figure 1	
		(c) <i>Cohort study</i> —Summarise follow-up time (eg, average and total amount)	11	Line 252
Outcome data	15*	Cohort study—Report numbers of outcome events or summary measures over time	11, Table 1	Lines 252-255
		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	11, 12, Table	Lines 257-268
		(eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were	2, Table 3	
		included		
		(b) Report category boundaries when continuous variables were categorized	n/a	
		© If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time	n/a	
		period		

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Other analyses	17	Report other analyses done-eg analyses of subgroups and interactions, and sensitivity analyses	12, Table 3	Lines 269-270	
Discussion					
Key results	18	Summarise key results with reference to study objectives	12	Lines 273-279	
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	Lines 344-358	
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	12-14	Lines 273-343	
Generalisability	21	Discuss the generalisability (external validity) of the study results	15	Lines 357-361	
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	Lines 370-371	

\*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.