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

	Item No	Recommendation
Title and abstract	1	(a) Indicate the study's design with a commonly used term in the title or the
	pg.1-2	abstract
		(b) Provide in the abstract an informative and balanced summary of what
		was done and what was found
Introduction		
Background/rationale	2	Explain the scientific background and rationale for the investigation being
	pg. 3	reported
Objectives	3	State specific objectives, including any prespecified hypotheses
	pg. 3, lines:	
	48-53	
Methods		
Study design	4	Present key elements of study design early in the paper
	pg. 4-5	
Setting	5	Describe the setting, locations, and relevant dates, including periods of
	pg. 4-5	recruitment, exposure, follow-up, and data collection
Participants	6	(a) Give the eligibility criteria, and the sources and methods of selection of
	pg. 4 (study	participants
	population)	
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders,
	pg. 5	and effect modifiers. Give diagnostic criteria, if applicable
	(measures)	
Data sources/	8*	For each variable of interest, give sources of data and details of methods of
measurement	pg. 4-5	assessment (measurement). Describe comparability of assessment methods
		if there is more than one group
Bias	9	Describe any efforts to address potential sources of bias
	pg. 10, line 29	
Study size	10	Explain how the study size was arrived at
	pg. 4 (study	
	population)	
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If
	pg. 4 (study	applicable, describe which groupings were chosen and why
	population)	
Statistical methods	12	(a) Describe all statistical methods, including those used to control for
	pg. 6	confounding
		(b) Describe any methods used to examine subgroups and interactions
		(c) Explain how missing data were addressed
		(d) If applicable, describe analytical methods taking account of sampling
		strategy
		(e) Describe any sensitivity analyses
Results		
Participants	13*	(a) Report numbers of individuals at each stage of study—eg numbers
	pg. 5, line 35	potentially eligible, examined for eligibility, confirmed eligible, included in
		the study, completing follow-up, and analysed

		(c) Consider use of a flow diagram
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical,
	Tables	social) and information on exposures and potential confounders
		(b) Indicate number of participants with missing data for each variable of
		interest
Outcome data	15*	Report numbers of outcome events or summary measures
	pg. 6-8	
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted
	pg. 6-8,	estimates and their precision (eg, 95% confidence interval). Make clear
	Tables	which confounders were adjusted for and why they were included
		(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
	N/A	sensitivity analyses
Discussion		
Key results	18	Summarise key results with reference to study objectives
	pg. 9-10	
Limitations	19	Discuss limitations of the study, taking into account sources of potential
	pg. 10, line 29	bias or imprecision. Discuss both direction and magnitude of any potential
		bias
Interpretation	20	Give a cautious overall interpretation of results considering objectives,
	pg. 11	limitations, multiplicity of analyses, results from similar studies, and other
		relevant evidence
Generalisability	21	Discuss the generalisability (external validity) of the study results
	pg. 10	
Other information		
Funding	22	Give the source of funding and the role of the funders for the present study
	pg. 12	and, if applicable, for the original study on which the present article is
		based

^{*}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.