

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

|                              | <b>Item No</b> | <b>Recommendation</b>   | <b>Page No</b>   |
|------------------------------|----------------|---|--|
| <b>Title and abstract</b>    | 1              | (a) Indicate the study's design with a commonly used term in the title or the abstract  | p1   |
|                              |                | (b) Provide in the abstract an informative and balanced summary of what was done and what was found   | p2   |
| <b>Introduction</b>          |                |   |  |
| Background/rationale         | 2              | Explain the scientific background and rationale for the investigation being reported  | p3-4, lines 53-88  |
| Objectives                   | 3              | State specific objectives, including any prespecified hypotheses  | p4, lines 82-88  |
| <b>Methods</b>               |                |   |  |
| Study design                 | 4              | Present key elements of study design early in the paper   | p4, lines 91-96  |
| Setting                      | 5              | Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection   | p4-6, lines 94-105; 115-125.   |
| Participants                 | 6              | (a) Give the eligibility criteria, and the sources and methods of selection of participants   | p5, lines 107-113  |
| Variables                    | 7              | Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable  | p5, lines 115-125; Appendix A-B  |
| Data sources/<br>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              | p5, lines 115-125; Appendix A-B  |
| Bias                         | 9              | Describe any efforts to address potential sources of bias   | p6, lines 127-130  |
| Study size                   | 10             | Explain how the study size was arrived at   | p5-6, lines 98-113;119-125.  |
| Quantitative variables       | 11             | Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why  | p6, lines 127-132.   |
| Statistical methods          | 12             | (a) Describe all statistical methods, including those used to control for confounding   | p6, lines 127-132.   |
|                              |                | (b) Describe any methods used to examine subgroups and interactions   | N.A.   |
|                              |                | (c) Explain how missing data were addressed   | p6, lines 127-130.   |
|                              |                | (d) If applicable, describe analytical methods taking account of sampling strategy  | p6, lines 127-130.<br>Unknown responses are reported (e.g. see Figure 1; Table A2) |
|                              |                | (e) Describe any sensitivity analyses   | N.A.   |
| <b>Results</b>               |                |   |  |
| 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 | p5, lines 104-105; 112-113, 119-121.   |

|                          |     |  |   |
|--------------------------|-----|--|---|
|                          |     | (b) Give reasons for non-participation at each stage   | p5-6, lines 120-121   |
|                          |     | (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   | p6 lines 135-145; Table A1  |
|                          |     | (b) Indicate number of participants with missing data for each variable of interest  | Unknown responses are reported (e.g. see Figure 1; Table A2)          |
| Outcome data             | 15* | Report numbers of outcome events or summary measures   | p7, lines 147-163; Figure 1-2   |
| 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 | No adjusted estimates; 95% confidence intervals presented throughout. |
|                          |     | (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.  |
| Other analyses           | 17  | Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses   | Appendix Table A3   |
| <b>Discussion</b>        |     |  |   |
| Key results              | 18  | Summarise key results with reference to study objectives   | p8, lines 166-172   |
| 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   | p8-9, lines 174-190   |
| Interpretation           | 20  | Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence                                   | p9-10, lines 192-222  |
| Generalisability         | 21  | Discuss the generalisability (external validity) of the study results  | p8, lines 183-190.  |
| <b>Other information</b> |     |  |   |
| 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  | N.A.  |

\*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](http://www.strobe-statement.org).