

STROBE Statement—checklist of items that should be included in reports of observational studies

	Item No	Recommendation	Location in study
<b>Title and abstract</b>	1	(a) Indicate the study’s design with a commonly used term in the title or the abstract	Title specifies it is a survey (line 1)
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	Abstract Methods (line 99-102) and Results (line 104-114)
<b>Introduction</b>			
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	Background lines 133-152 and rationale 154-167
Objectives	3	State specific objectives, including any prespecified hypotheses	Purpose outlined in lines 167-169. There were no prespecified hypotheses.
<b>Methods</b>			
Study design	4	Present key elements of study design early in the paper	Lines 174-179
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	Lines 175-179
Participants	6	(a) <i>Cohort study</i> —Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up <i>Case-control study</i> —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 <i>Cross-sectional study</i> —Give the eligibility criteria, and the sources and methods of selection of participants  (b) <i>Cohort study</i> —For matched studies, give matching criteria and number of exposed and unexposed <i>Case-control study</i> —For matched studies, give matching criteria and the number of controls per case	Lines 182-184
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	Questionnaire items are described in lines 209-228
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	Development of the questionnaire is described lines 182-207
Bias	9	Describe any efforts to address potential sources of bias	Line 232-234.
Study size	10	Explain how the study size was arrived at	Line 231
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	Likert scores described lines 212-215.

Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding	Lines 237-238. The analyses were descriptive (i.e. no hypothesis testing) and so no methods were used to control for confounding.
		(b) Describe any methods used to examine subgroups and interactions	There were no subgroup analyses performed
		(c) Explain how missing data were addressed	Response rate is reported
		(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	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	Lines 241-247 and shown in Table 1.
		(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	Table 1.
		(b) Indicate number of participants with missing data for each variable of interest	Response rate is reported.
		(c) <i>Cohort study</i> —Summarise follow-up time (eg, average and total amount)	n/a (cross sectional study)
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	See Figures 1 and 2, and Tables in appendices.
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	Figure 1 and 2 with associated tables in appendices with descriptions lines 249-288.
		(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	n/a
<b>Discussion</b>			
Key results	18	Summarise key results with reference to study objectives	Lines 292-299
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	Lines 357-360
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	Interpretation of specific findings lines 301-354
Generalisability	21	Discuss the generalisability (external validity) of the study results	Lines 358-360 discussing 2 academic hospitals
<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	Line 43

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