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

	Item No	Recommendation	Reported on Page No.
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract	2 "A Retrospective Cohort Study Using the Canadian Primary Care Sentinel Surveillance Network Data to Examine Depression in Patients With a Diagnosis of Parkinson's Disease"
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found	3 Word count: 250
Introduction			
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	4
Objectives	3	State specific objectives, including any prespecified hypotheses	5
Methods			
Study design	4	Present key elements of study design early in the paper	6
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	6 EMR data from the Canadian Primary Care Sentinel Surveillance Network
Participants	6	(*a*) *Cohort study*—Give the eligibility criteria, and the sources and methods of selection of 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	6 Retrospective Cohort Study - Eligibility:18 years and older, diagnosis of PD, at least 1 encounter with primary care provider - Timeframe: September 30, 2012 and 2014
		(*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	n/a n/a
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	7 Appendix 1 - List of medications for depression
Data sources/ measurement	8*	For each variable of interest, give sources of data and details of methods of assessment (measurement).	5-7 Data Source

		Describe comparability of assessment methods if there is more than one group	
Bias	9	Describe any efforts to address potential sources of bias	8-9, 11-12 Data Source Limitations
Study size	10	Explain how the study size was arrived at	7 Power Calculation
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	7-8 Table 1, 2
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding	7-8 Footnotes in Table 1, 2, 3, 4
		(*b*) Describe any methods used to examine subgroups and interactions	7-8 Footnotes in Table 1, 2, 3, 4
		(*c*) Explain how missing data were addressed	7-8 Table 1, 3, 4
		(*d*) *Cohort study*—If applicable, explain how loss to follow-up was addressed *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	n/a
		(*e*) Describe any sensitivity analyses	8 -A log-2 scale for the covariate
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	8
		(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	8 Table 1, 2
		(b) Indicate number of participants with missing data for each variable of interest	Footnotes in Table 1, 3, 4
		(c) *Cohort study*—Summarise follow-up time (eg, average and total amount)	8 September 30, 2012 and 2014
Outcome data	15*	*Cohort study*—Report numbers of outcome events or summary measures over time	8-9 Table 1, 2, 3, 4
		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 (eg, 95% confidence	8-9 Table 3, 4 - 95% CI, $P < .05$

		interval). Make clear which confounders were adjusted for and why they were included	- Covariate: number of encounters with primary care provider
		(*b*) Report category boundaries when continuous variables were categorized	Table 1, 2
		(*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	Table 3, 4 Advisory Group Feedback
Discussion			
Key results	18	Summarise key results with reference to study objectives	9-10
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	11-12
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	11-12 Advisory Group Feedback
Generalisability	21	Discuss the generalisability (external validity) of the study results	11
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	13

*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.