## 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	1	"a nationwide cohort study"
		(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 reported	2	
Objectives	3	State specific objectives, including any prespecified hypotheses	2	
Methods				
Study design	4	Present key elements of study design early in the paper	2	"This is a nationwide cohort
				study using prospectively
				collected data from the Swedish
				Hip Fracture Register
				RIKSHÖFT (SHR)"
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure,	2	
		follow-up, and data collection		
Participants	6	(a) Cohort study—Give the eligibility criteria, and the sources and methods of selection of	2	"Inclusion criteria were
		participants. Describe methods of follow-up		individuals with trochanteric hip
		Case-control study—Give the eligibility criteria, and the sources and methods of case		fracture aged ≥70 years"
		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.	2-4	
		Give diagnostic criteria, if applicable		

Data sources/	8*	For each variable of interest, give sources of data and details of methods of assessment	2-4	
measurement		(measurement). Describe comparability of assessment methods if there is more than one group	)	
Bias	9	Describe any efforts to address potential sources of bias	7	"Furthermore, 6,928 patients –
				37% of those who lived
				independently ay baseline -
				were excluded due to missing
				follow-up information, which is
				substantial enough to introduce
				uncertainty. However, when
				comparing the baseline
				characteristics of this group
				with the one that was analyzed,
				they appear similar."
Study size	10	Explain how the study size was arrived at	2	"Inclusion criteria were
				individuals with trochanteric hip
				fracture aged ≥70 years,
				admitted to hospital between 1
				January 2014 and 31 December
				2019"

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Quantitative variables groupings were chosen and why  Statistical paths and possible all statistical methods, including those used to control for confounding 4  Methods (a) Describe all statistical methods, including those used to control for confounding 4  Methods (b) Describe any methods used to examine subgroups and interactions 4-5  (c) Explain how missing data were addressed 2-3  (d) Cohort study—If applicable, explain how loss to follow-up was addressed 7  Case-control study—If applicable, explain how matching of cases and controls was addressed 7  Cross-sectional study—If applicable, describe analytical methods taking account of sampling strategy  (g) Describe any sensitivity analyses 4-5  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 (b) Give reasons for non-participation at each stage 3  C) Consider use of a flow diagram 3  Describe the state of the state of the describe and state of the state of the study of the state of the state of the study of the state of the study of the state of the study of the state of the state of the study of the state of the	
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Descriptive data 14* (a) Give characteristics of study participants (eg demographic, clinical, social) and information on 4	
exposures and potential confounders	
(b) Indicate number of participants with missing data for each variable of interest 4-5	
(c) <i>Cohort study</i> —Summarise follow-up time (eg, average and total amount) 5	
Outcome data 15* Cohort study—Report numbers of outcome events or summary measures over time 4-5	
Case-control study—Report numbers in each exposure category, or summary measures of exposure	
Cross-sectional study—Report numbers of outcome events or summary measures	
Main results 16 (a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision 6	
(eg, 95% confidence interval). Make clear 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	

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Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	6-7	
Discussion				
Key results	18	Summarise key results with reference to study objectives	7	
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss	7	
		both direction and magnitude of any potential bias		
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of	7	
		analyses, results from similar studies, and other relevant evidence		
Generalisability	21	Discuss the generalisability (external validity) of the study results	7	
Other informati	ion			
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the	8	
		original study on which the present article is based		

<sup>\*</sup>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.