

ADAPTED NEWCASTLE-OTTAWA QUALITY ASSESSMENT SCALE COHORT STUDIES

Selection

1. Representativeness of the patient cohort *
 - a. truly representative of the corresponding patient cohort in the general community (e.g. multicentre trial with different types of hospitals) *
 - b. somewhat representative of the corresponding patient cohort (e.g. single center study in only hospital of the catchment area) *
 - c. selected group of patients
 - d. no or unclear description of the derivation of the patient cohort
2. Selection of the healthy control cohort (if applicable)
 - a. drawn from the same community as the patient cohort *
 - b. drawn from a different source
 - c. no description of the derivation of the healthy cohort
3. Ascertainment of exposure (not applicable)
4. Demonstration that outcome of interest was not present at start of study (not applicable)

Comparability

1. Comparability of cohorts on the basis of the design or analysis (if applicable)
 - a. study controls for age differences between cohorts (e.g. by matching or statistical adjustment for potential confounding) *
 - b. study does not control for age differences between cohorts

Outcome

1. Assessment of outcome
 - a. independent assessment (e.g. by nurses or researchers not involved in the study) *
 - b. assessment by member of the research team
 - c. no information given
2. Was follow-up long enough for patients to recover?
 - a. yes (follow up at least 12 months) *
 - b. no (follow up less than 12 months)
3. Adequacy of follow up of cohorts
 - a. complete follow up - all subjects accounted for *
 - b. subjects lost to follow up unlikely to introduce bias (e.g. drop out because of medical complications) or at least 90% *
 - c. follow up rate < 90 % or no description of those lost or description suggests bias
 - d. no statement