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	Title
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found	3	Abstract
Introduction				
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	5	Nowadays, autoimmune pancreatitis (AIP) has become a public health problem with global concern
Objectives	3	State specific objectives, including any prespecified hypotheses	5	We hereby conducted a retrospective cohort study, compared clinical characteristics of AIP patients stratified by the serum IgG4 level and investigated the factors related to the relapse.
Methods				
Study design	4	Present key elements of study design early in the paper	5	This is a single-center retrospective study
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	5	A total of 308 patients from 2006 to 2021 who were diagnosed with AIP were reviewed consecutively.
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	5	Among them, ninety-five patients were excluded: twenty for other chief diagnosis, thirty-one for insufficient data and forty-four as they cannot meet

		participants		the International Consensus Diagnostic Criteria (ICDC).
		(*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	6	Overall, we enrolled 65 and 148 patients in the normal and abnormal group respectively.
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	6	Age, gender ratio and duration of hospitalization were evaluated in demographic characteristics. Predispositions, symptoms like abdominal pain and other organ involvements were discussed in clinical manifestations.
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	6	Loss of weight was defined as over 5kg in recent three months. The extrapancreatic lesions were diagnosed on the basis of the criteria of IgG4-RD in 2021
Bias	9	Describe any efforts to address potential sources of bias	11	Additionally, the long duration of follow-up increased the risk of recall bias.
Study size	10	Explain how the study size was arrived at	5	A total of 308 patients from 2006 to 2021 who were diagnosed with AIP were reviewed consecutively.

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Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	6	The t-test or Mann–Whitney U test was used to compare continuous variables which were presented as mean ± standard deviation or median [interquartile range (IQR)].
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding	6	Statistical analysis
		(*b*) Describe any methods used to examine subgroups and interactions	Not applicable	Not applicable
		(*c*) Explain how missing data were addressed	5	thirty-one for insufficient data
		(*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	6	Statistical analysis
		(*e*) Describe any sensitivity analyses	6	Statistical analysis
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	6	Overall, we enrolled 65 and 148 patients in the normal and abnormal group respectively.
		(b) Give reasons for non-participation at each stage	5	Among them, ninety-five patients were excluded: twenty for other chief diagnosis, thirty-one for insufficient data and forty-four as they cannot meet the International Consensus Diagnostic Criteria (ICDC).
		(c) Consider use of a flow diagram	Figure 1	Figure 1
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	Table 1	Baseline data are summarized in Table 1.
		(b) Indicate number of participants with missing data for each variable of interest	5	thirty-one for insufficient data
		(c) *Cohort study*—Summarise follow-up time (eg, average and total amount)	8	During the median follow-up period of 53 months

Outcome data	15*	*Cohort study*—Report numbers of outcome events or summary measures over time	6	Results Part
		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 (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included	6-9	Results Part
		(*b*) Report category boundaries when continuous variables were categorized	6-9	Results Part
		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	6-9	Results Part

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Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	6-9	Results Part
Discussion				
Key results	18	Summarise key results with reference to study objectives	9-11	Discussion Part
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	There are several limitations in our study.
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	11	Conclusion Part
Generalisability	21	Discuss the generalisability (external validity) of the study results	11	Conclusion Part
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	1	Supported by Young Scholar Independent Innovation Science Fund of Chinese PLA General Hospital (22QNCZ020), Military Medical Science and Technology Young Scholar Fostering Fund (21QNPY109).

*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.