## Table 1

| Characteristic | Summary |
| --- | --- |
| Year of publication |  |
| 2019 | 47 (36%) |
| 2020 | 45 (35%) |
| 2021 | 38 (29%) |
| Journal |  |
| American Journal of Epidemiology | 50 (38%) |
| Epidemiology | 24 (18%) |
| European Journal of Epidemiology | 21 (16%) |
| International Journal of Epidemiology | 34 (26%) |
| Journal of Clinical Epidemiology | 1 (0.8%) |
| Study design |  |
| Prospective longitudinal study | 85 (65%) |
| Retrospective analysis of routinely collected data (e.g., administrative or EMR data) | 15 (12%) |
| Individual patient data (IPD) meta-analysis / pooled cohort analysis | 9 (6.9%) |
| Case-control study | 7 (5.4%) |
| Other | 7 (5.4%) |
| Cross-sectional study | 5 (3.8%) |
| Case-cohort study | 2 (1.5%) |
| Interrupted time series (ITS) | 0 (0%) |
| Outcome type |  |
| Binary | 45 (35%) |
| Categorical (excluding binary) | 3 (2.3%) |
| Continuous | 33 (25%) |
| Time to event | 49 (38%) |
| Inclusion criteria |  |
| Effect of interest was given a causal interpretation | 130 (100%) |
| Effect of interest was explicity causal | 33 (25%) |
| Typical signals of causal questions |  |
| DAG or m-DAG used to depict causal assumptions | 40 (31%) |
| A set of variables were identified to control for confounding | 106 (82%) |
| Effect was estimated using a linear regression model with adjustment for a set of covariates | 129 (99%) |