	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	Surprising diversity of new
				plasmids in bacteria isolated
				from hemorrhoid patients
		(b) Provide in the abstract an informative and balanced summary of what was done and what was	1-2	Forty-nine bacterial strains were
		found		isolated from seven hemorrhoid
				patients. Third generation
				Nanopore sequencing was
				performed to obtain high quality
				whole genome sequences. Out
				of the 31 plasmids found in the
				strains, 15 new plasmids were
				discovered
Introduction				
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	2	Recent investigations showed
				differed signatures of bacterial
				community structures in
				hemorrhoids, suggesting
				possible influence of bacteria in
				the development of hemorrhoid
Objectives	3	State specific objectives, including any prespecified hypotheses	2	This work aims at addressing
				the microbes in hemorrhoid-
				suffering patients issue by
				whole genome sequencing
				analysis of bacterial strains
				isolated form seven hemorrhoid
				patients

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

Methods

Study design	4	Present key elements of study design early in the paper	3	Bacteria were taken from seven
				different sites on the patient, and
				using third-generation
Sattina	5	Describe the actions locations and relevant datas including periods of resputitment approxim	2.4	sequencing technology
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure,	3-4	Seven hemorrhoid patients who
		follow-up, and data collection		underwent surgery at Qilu
				Hospital (Qingdao) were
				recruited from March to July 2023
Participants	6	(a) Cohort study—Give the eligibility criteria, and the sources and methods of selection of	3	A total of seven hemorrhoid
i unicipunto	0	participants. Describe methods of follow-up	5	patients were recruited for the
		<i>Case-control study</i> —Give the eligibility criteria, and the sources and methods of case		isolation of bacterial strains.
		ascertainment and control selection. Give the rationale for the choice of cases and controls		Seven different sites on the
		<i>Cross-sectional study</i> —Give the eligibility criteria, and the sources and methods of selection of		patient were swabbed with a
		participants		sterile cotton swab
		(b) Cohort study—For matched studies, give matching criteria and number of exposed and	3	Samples were taken from seven
		unexposed		hemorrhoid patients who were
		Case-control study-For matched studies, give matching criteria and the number of controls per		subject to surgery in Qilu
		case		Hospital (Qingdao). Samples
				from seven sites were taken
				from each patient for culture.
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers.	/	/
		Give diagnostic criteria, if applicable		
Data sources/	8*	For each variable of interest, give sources of data and details of methods of assessment	/	/
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	3	Seven different sites (healthy
				buttock skin, anal skin, the outer
				side of the hemorrhoid, the
				inner side of the hemorrhoid,
				healthy anal gland, feces, and
				the hemorrhoid tissue)

Study size	10	Explain how the study size was arrived at	
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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	3	Seven different sites (healthy buttock skin, anal skin, the outer side of the hemorrhoid, the inner side of the hemorrhoid, healthy anal gland, feces, and the hemorrhoid tissue) on the patient were swabbed with a sterile cotton swab and then immersed in the preservation solution
Statistical	12	(a) Describe all statistical methods, including those used to control for confounding	/	/
methods		(b) Describe any methods used to examine subgroups and interactions	/	/
		(c) Explain how missing data were addressed	/	/
		(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		
		<i>Cross-sectional study</i> —If applicable, describe analytical methods taking account of sampling strategy		
		( <u>e</u> ) Describe any sensitivity analyses	/	/
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	3-4	A total of seven hemorrhoid patients were recruited. 49 strains were obtained
		(b) Give reasons for non-participation at each stage	/	/
		(c) Consider use of a flow diagram	/	/
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on	/	Provided in Table S1: average age
		exposures and potential confounders		41, male: female:4:3
		(b) Indicate number of participants with missing data for each variable of interest	/	/
		(c) Cohort study—Summarise follow-up time (eg, average and total amount)	/	/
Outcome data	15*	Cohort study—Report numbers of outcome events or summary measures over time	/	/
		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			
		(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	/	/
Discussion				
Key results	18	Summarise key results with reference to study objectives	8	With high quality whole genome sequences, we were able to identify 15 new plasmids.
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	/	/
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	8	Surprising diversity of new plasmids in bacteria isolated from hemorrhoid patients
Generalisability	21	Discuss the generalisability (external validity) of the study results	8	This work shows that we have been underestimating plasmid diversities in human-carrying microbes, and as whole genome sequencing has been cheaper and cheaper, surveillance of plasmids is worthy attention in the future.
Other informati	on			
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		<ul> <li>Provided in the system: This work</li> <li>was supported by the Foundation of</li> <li>Qingdao Key Health Discipline</li> <li>Development Fund under grand</li> <li>number ODZDZK-2022098, the</li> <li>National Key Research and</li> <li>Development Program of China</li> <li>under grant number</li> <li>2022YFE0199800; Key R&amp;D</li> <li>Program of Shandong Province</li> <li>under grant number</li> <li>2020CXGC011305; and the</li> </ul>

*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.