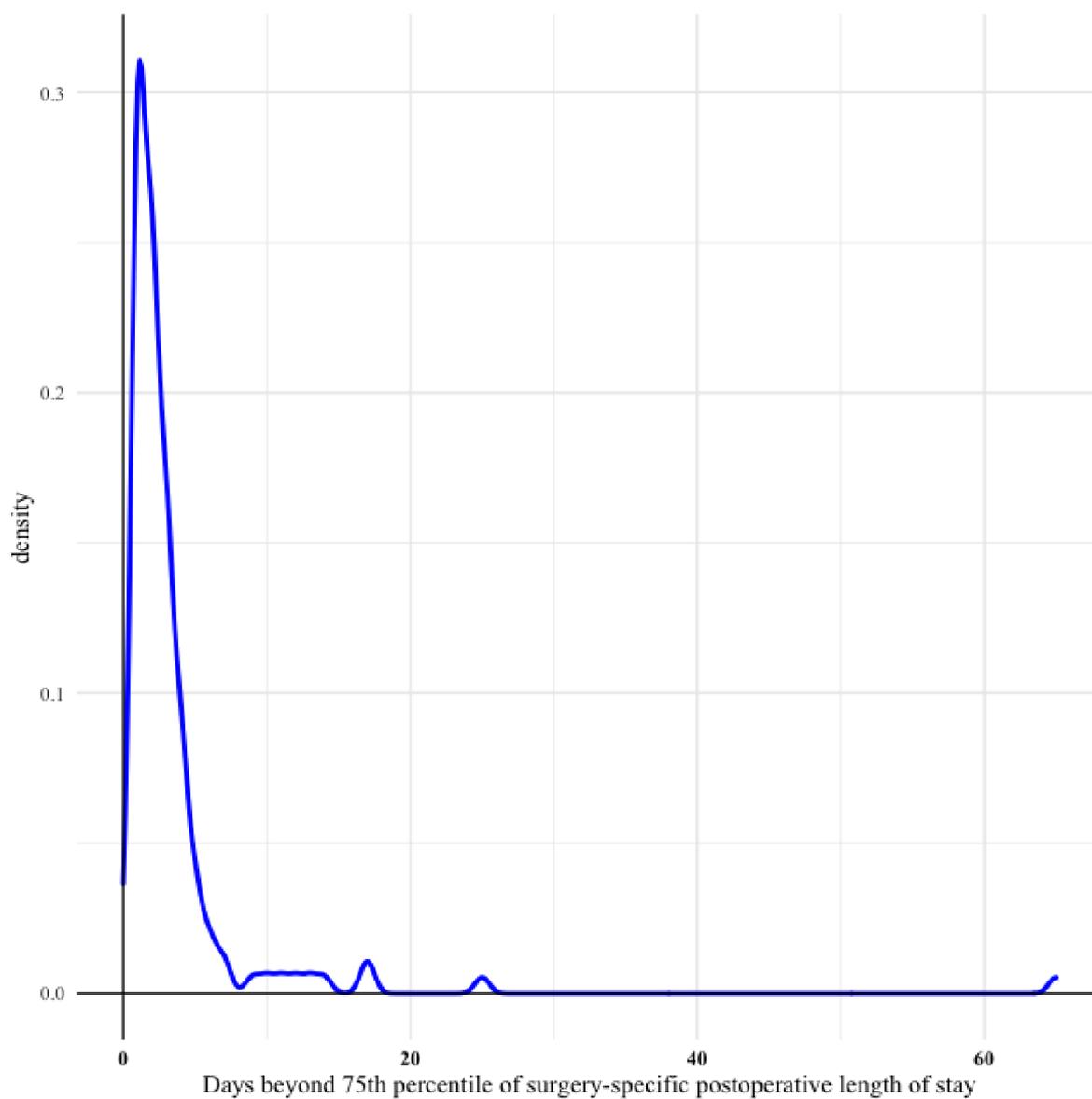
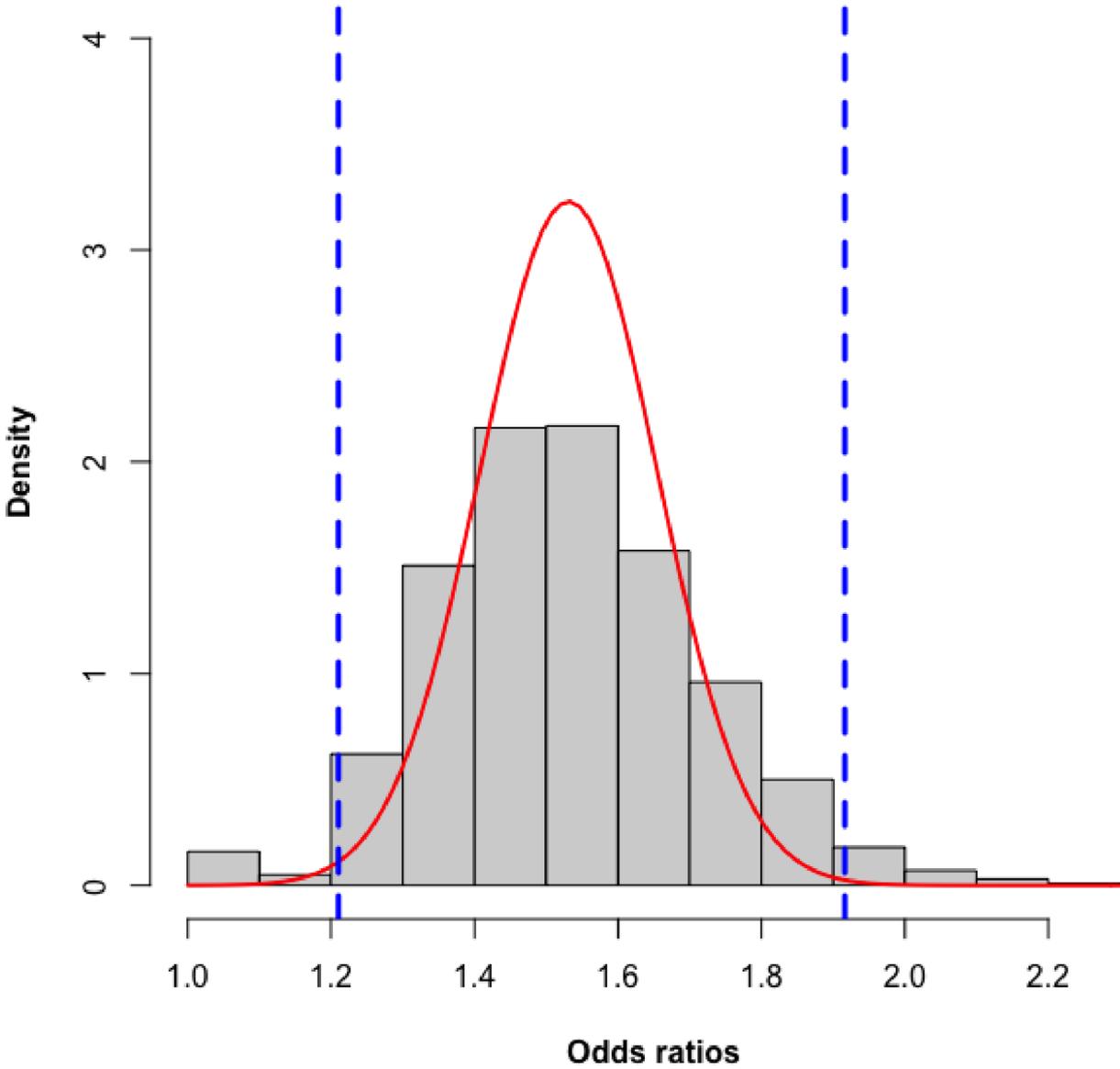


**Supplementary Figure S1.** Extent to which the hospital stay was prolonged beyond 4 days.



**Supplementary Figure S2.** Distribution of odds ratios related to taking ATC-H drugs in the bootstrapped subsamples.



**Supplementary Table S1.** STROBE statement reporting checklist.

	<b>Item No</b>	<b>Recommendation</b>	<b>Page N°</b>
<b>Title and abstract</b>	1	(a) Indicate the study's design with a commonly used term in the title or the abstract	2
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	2
<b>Introduction</b>			
Background/ rationale	2	Explain the scientific background and rationale for the investigation being reported	3
Objectives	3	State specific objectives, including any prespecified hypotheses	3
<b>Methods</b>			
Study design	4	Present key elements of study design early in the paper	4
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	4
Participants	6	(a) Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up	4-5
		(b) For matched studies, give matching criteria and number of exposed and unexposed	
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	5
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	5-6
Bias	9	Describe any efforts to address potential sources of bias	6-7
Study size	10	Explain how the study size was arrived at	
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	6
Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding	6-7
		(b) Describe any methods used to examine subgroups and interactions	
		(c) Explain how missing data were addressed	8-13
		(d) If applicable, explain how loss to follow-up was addressed	5
		(e) Describe any sensitivity analyses	6
<b>Results</b>			
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	8

		(b) Give reasons for non-participation at each stage	8
		(c) Consider use of a flow diagram	8
Descriptive data	14	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	8
		(b) Indicate number of participants with missing data for each variable of interest	8
		(c) Summarise follow-up time (eg, average and total amount)	
Outcome data	15	Report numbers of outcome events or summary measures over time	8-9
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	8-9
		(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	
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	9
<b>Discussion</b>			
Key results	18	Summarise key results with reference to study objectives	10
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	12-13
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	10-11-12-13
Generalisability	21	Discuss the generalisability (external validity) of the study results	13
<b>Other information</b>			
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	15

**Supplementary Table S2.** Details of preoperative medications.

		N = 704
ATC-A Alimentary tract and metabolism		
	0	514 (73%)
	1	115 (16%)
	2	44 (6.2%)
	3	23 (3.3%)
	4	6 (0.9%)
	5	2 (0.3%)
ATC-B Blood and blood forming organs		
	0	614 (87%)
	1	78 (11%)
	2	11 (1.6%)
	3	1 (0.1%)
ATC-C Cardiovascular system		
	0	411 (58%)
	1	145 (21%)
	2	90 (13%)
	3	40 (5.7%)
	4	10 (1.4%)
	5	6 (0.9%)
	6	2 (0.3%)
ATC-G Genito-urinary system and sex hormones		
	0	623 (88%)
	1	72 (10%)
	2	8 (1.1%)
	3	1 (0.1%)
ATC-H Systemic hormonal preparations, excluding sex hormones and insulins		
	0	472 (67%)
	1	139 (20%)
	2	85 (12%)
	3	6 (0.9%)

	4	2 (0.3%)
ATC-J Anti-infectives for systemic use		
	0	678 (96%)
	1	24 (3.4%)
	2	1 (0.1%)
	3	1 (0.1%)
ATC-L Antineoplastic and immunomodulating agents		
	0	692 (98%)
	1	11 (1.6%)
	2	1 (0.1%)
ATC-M Musculo-skeletal system		
	0	661 (94%)
	1	43 (6.1%)
ATC-N Nervous system		
	0	554 (79%)
	1	88 (12%)
	2	41 (5.8%)
	3	13 (1.8%)
	4	3 (0.4%)
	5	2 (0.3%)
	6	1 (0.1%)
	7	2 (0.3%)
ATC-P Antiparasitic products, insecticides and repellents		
	0	703 (100%)
	1	1 (0.1%)
ATC-R Respiratory system		
	0	652 (93%)
	1	38 (5.4%)
	2	8 (1.1%)
	3	6 (0.9%)

Data are presented as number(%)