Appendix 10 (as supplied by the authors): Risk of spontaneous abortion (defined as spontaneous abortion with gestational duration based on ultrasound) associated with the use of antibiotics during pregnancy, by drug classes, odds ratio (95% CI) \*\*.

Exposure	no (%) of cases	Crude OR (95% CI)	Adjusted OR (95% CI)	Adjusted* OR (95% CI)	Post hoc power	Post hoc power
					analysis (%) <sup>a</sup>	analysis (%) <sup>b</sup>
No use	925 (86.61%)		1.00			_
Cephalosporins	6 (0.56%)	1.03 (0.58-1.83)	0.79 (0.36-1.73 )	0.87 (0.38-1.99)	6	5
Penicillins	48 (4.49%)	1.01(0.83-1.23)	0.91 (0.67-1.25)	1.00	8	
Macrolides	36 (3.37 %)	2.09 (1.54-2.83)	1.49 (0.86-2.58)	1.63 (0.90-2.96)	36	48
Quinolones	4 (0.37%)	0.65 (0.39-1.10)	0.17 (0.01-2.10)	0.18 (0.01-2.26)	54	57
Sulfonamides	0 (0.00 %)	NA	NA	NA		
Tetracyclines	19 (1.78%)	3.70 (2.04-6.72)	3.35 (1.63-6.88)	3.66 (1.73-7.78)		
Other antibacterials	3 (0.28 %)	1.39 (0.45-4.32)	1.53 (0.51-4.57)	1.67(0.54-5.21)	15	19
Antiprotozoals	8 (0.75%)	2.12 (0.77-5.80)	1.45 (0.7-5.73)	1.59 (0.40-6.38)	13	17
Urinary anti-infective	4 (0.37%)	1.31 (0.50-3.45)	1.32 (0.51-3.46)	1.45 (0.53-3.97)	11	9
Combined use of ≥ 2 classes of antibiotics	15 (1.40 %)	1.17 (0.76-1.81)	0.70 (0.28-1.77)	0.77 (0.29-2.05)	10	9

Note: 95%CI, 95% confidence interval; NA, not applicable; OR, odds ratio.

<sup>\*\*</sup>Adjusted for the following variables: maternal age on the first day of gestation, maternal marital status (living alone or cohabiting), receipt of social assistance during pregnancy, education level in years (≤12 or >12), and area of residence on the first day of gestation (urban or rural); maternal chronic co-morbidities assessed using physician-based diagnoses or filled prescriptions of related medications in the year before pregnancy until index date (chronic hypertension, depression, diabetes mellitus, asthma, epilepsy, polyarthritis rheumatoid and systemic lupus erythematosus, thyroid disorders); Uterine malformations and endometriosis assessed using physician-based diagnoses; Maternal infections assessed using physician-based diagnoses in the year before and during pregnancy until index date (urinary tract infection, respiratory tract infection, bacterial vaginosis, and sexually transmitted diseases); Other anti-infective agents assessed also in the year before pregnancy until index date; Use of health services in the year before pregnancy; and history of planned and spontaneous abortion.

<sup>\*</sup>reference: penicillin.

<sup>&</sup>lt;sup>a</sup> Post hoc power analysis for results comparing antibiotics classes with unexposed group; <sup>b</sup> Post hoc power analysis for results comparing antibiotics classes with exposed to penicillins.