

## Peer Review File

Article Information: <http://dx.doi.org/10.21037/jgo-20-199>

### Response to Reviewer #1

**Comment #1:** “Abstract. I would suggest changing the background statement to say why would readers want to be interested in height. The abstract methods need to state the primary outcome (stomach cancer diagnosis), and maybe make the predictor height more explicit. The results can be better if you detail a few descriptive data (range of height, number of stomach cancer cases compared to control...etc.)”

**Answer:** Thank you for these suggestions. We have revised the corresponding parts, trying to reflect your opinion. Most original papers did not provide the range of height, and we also could not extract the number of control due to their different study designs (no. of cases has been described).

**Comment #2:** “Introduction. Can you give some background about being tall and being short? Why would anyone want to look into that for stomach cancer? Please also state your research hypothesis in the last sentence.”

**Answer:** We acknowledge that too much was skipped. We reconstructed the Introduction section. Please reconsider our manuscript.

**Comment #3:** “Can you explain the reasoning on the 5cm increment increase? Why not look at it as continuous variable? Why not look at it in the very tall or very short groups (e.g. binary proportions)?”

**Answer:** The reason is simple: the estimates per 5-cm-increase in height were mostly provided among the finally included articles. Similar presentation is also seen in other meta-analyses.<sup>1,2</sup> We think that considering as continuous variable (per 1-cm increase) is just a matter of effect size, not of significance. For analyzing binary proportions, we could not conduct it due to lack of information. We clarified this point in the Method and Limitation section.

<sup>1</sup> Aune et al. Height and pancreatic cancer risk: a systematic review and meta-analysis of cohort studies. *Cancer Causes Control* 2012;23:1213.

<sup>2</sup> Jing et al. Association between height and thyroid cancer risk: A meta-analysis of prospective cohort studies. *Int J Cancer* 2015;137:1484.

**Comment #4:** “I think the meta-analysis approach otherwise looks standard to me. I just wished there were more results to go through.”

**Answer:** Thank you for this opinion. We are designing to perform an original investigation beyond the limitations of this meta-analysis, and conclusively, we will conduct an updated meta-analysis.

**Comment #5:** “Discussion. Please provide some information regarding limitations and future directions.”

**Answer:** We are sorry for skipping too much. We reorganized the limitation and conclusion

part.

### **Response to Reviewer B:**

The manuscript "Adult height is not associated with the risk of stomach cancer in a meta-analysis" deals with obscure and interesting topic with conflicting results. The paper is scientifically reliable and regardless of study's limitations, I recommend the paper to be accepted for publication in the Journal of gastrointestinal oncology.

**Answer:** We appreciate your positive comment.