## **Peer Review File**

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## **Review Comments**

The manuscript is interesting and contemporary. The topic processes challenging and very important field of liver oncology and therapy. The manuscript needs major corrections:

Response: First of all, all authors would like to thank you to the reviewer for the valuable time spent for our manuscript. We had gone thoroughly and made changes according to the reviewer's comments and suggestions, which is described here point by point.

Comment 1: Line 19/20: where in Group-II were 28.21% and 30.0% respectively. Please insert "in"

Response: We have revised this in the updated manuscript (Line-19).

Comment: Line 20/21: Please add complete response, partial response, stable disease, progressive disease in front of CR, PR, SD and PD. You can shorten the background by few words.

Response: We have added the full form of these words in the revised manuscript (Line-20).

Comment: Line 21: while Group-II was = while in Group-II

Line 29: [1-3] = (1-3) Brackets.

Take care about spaces between the text and brackets. There should be a space between the text and brackets.

Response: We have corrected that error in the revised manuscript, which can see in blue color in the document.

Line 32: severe outcome – may be poor outcome?

Response: Thank you for excellent instruction, we have replaced from severe outcome to poor outcome in the revised manuscript (Line-32).

Line 45: (HCC) not needed

Response: We have edited this HCC in the manuscript (Line-45).

Line 47: Explain (QOL) quality of life

Response: We explained in the text (Line-45-48).

Line 48: TACE stated by earlier the study [10]. and also – coma after [10] or delete and start a new sentence with capital letter

Response: We have revised the reviewer's suggestion, which can be observe in Line-49.

Line 63: only received = received only TACE

Response: We revised according to the suggestion of the reviewer (Line-64).

Line 64: The Inclusion criteria are:.....

Response: We have revised this section (Line-66).

Line 68: (Supplementry-1; Appendix-2)= (Supplementry-1; Appendix-2) Take care about spaces

Response: We edited such places (Line-70).

Line 69: And exclusion criteria are such as a.... = Exclusion criteria are:

Response: We also revised here (Line-72).

Line 64 to 74: a) combined with severe underlying diseases – What is combined? Tumor/disease combined with......

b), c), d) - The same.

f) Patient has a history......

Response: Considering the reviewer's suggestion, we have made changed in those places for better and easy understanding (Line-72-75).

Line 79/80: Routinely monitored ECG and vital signs of patients until 24 hours after treatment, fasting for 6 hours, and oxygen concentration also checked as it required.

Please rearrange the sentence. It misses the verb.

Response: As per the advice of the reviewer, we have revised our manuscript (Line-82-84).

Line 80-82: Liver function and hemostatic drugs provided routinely. Paid attention to the patient's complaint, and given a timely treatment of analgesic, antipyretic, antiemetic medications according to its need. = The same as previous.

Response: Thank you for pointing out these unclear sentences. We have revised the updated, such things in the manuscript (Line-84-86).

Line 84: following tests had evaluated = were evaluated

Response: We have corrected this in the revised manuscript (Line-89).

Line 85: tumor markers) and..... Erase the bracket

Response: We have removed the bracket (Line-91).

Line 86: patients from both groups were......

Response: We have corrected this grammatical mistake (Line-92).

Line 87: third month = third month

Response: We edited the third month (Line-92).

Line 88: (b) During the follow-up period, they were followed-up treatment therapy such as TACE, ablation, radiotherapy, particle implementation, and target drugs as per the review report. Rearrange

Response: We have changed the sentence structure following the reviewer's suggestion.

Line 90: Quality of life (QOL) mainly refers to the status of the individual's physiological, psychological, and social functions, which is an important indicator of the effectiveness of the health care services accepted by the patients [15,16]. Not needed. It can be used in part Discussion

Response: We have revised it. Thank you (Line-94).

Line 93: (QOL) – Not needed See line 47

Response: We have revised it.

Line: 99-115: Rearrange the sentences, take care of spaces and abbreviations, the text needs English editing

Response: We will edit the grammar and word structure of this manuscript by a native speaker or by the help of the English Editing Service.

Line: 116-177: A previous study's 1st-year survival rate of patients having large HCC treated with TACE alone was 28.4% [19]. In this study, we anticipated the 1st year survival rate of TAE combined with multi-source ablation group was increased by 25%.

The first sentence does not belong to part "Participants" It's a statement for "Discussion" Response: We have corrected in the revised manuscript (Line-122-174).

I suggest: In this study, we anticipated the 1st year survival rate of TAE combined with multi-source ablation group was increased by 25% in comparison to the 1st-year survival rate of patients having large HCC treated with TACE alone, which was 28,4% (19). This can be a solution if only (19) is your previous study, if not just erase the first sentence and describe what you anticipated.

Response: Thank you for your very insightful suggestion. We followed your advice and revised accordingly (Line-123-126).

Line 120-127: What do you want to show with the PASS formula? Do you really need it? In the manuscript, you calculate 39 and 141 patients, in the text under the formula you inform that you have lost patients from following up. How many? From which group? What" The finally 41 cases in Group-I.....means?

Response: We used the PASS tool to calculate the sample size for this study. We used this tool because we wanted to know an ideal sample size for such a study. After used this tool, we found that 37 cases in the intervention group and 130 cases in the control group are the ideal sample size. Even though, we selected 41 cases, but two patients were rejected to take part in the study, thus remaining 39 enrolled for the interventional study, and 141 more similar cases were enrolled for the control group.

Please make the text under the formula understandable and easy for reading

Response: We have revised this part, which can be seen in line-129-136.

Line 139/140: Group I and Group II are already described in part Participants

Response: Thank you for notifying us of the repeated sentence. We revised it as well.

Line 140: characteristics of groups???? Of patients in two groups

Response: We have rewritten this sentence for easy readable (Line-149).

Line 147: Read the manuscript carefully and correct all technical mistakes as (STable1) S????

Response: Thank you for this clarification of the word, S=supplementary Table 1 (Line-157).

Line 150: You have repeated some data: September 30, 2018. In Line 145

Response: We have revised the repeated part (Line-159).

Line 150-153: English editing

Response: Thank you for suggesting us for English editing, we revised it, and still, we assure you here that we will go with English editing service for extensive revision.

Line 160: PFS evaluated in both groups before the treatment, and then the progression of the tumor by follow-up, and the enhanced MRI or CT outcome evaluation as the endpoint of PD recorded as PFS.

Please rearrange – not understandable

Response: We have revised it according to the reviewer's suggestion (Line-169-172).

Line 196/197: This study showed that TAE combined with a multi-applicator ablation group was better cumulative survival rate than the single TACE group. Was???? Had!

Response: We have revised it (Line-206).

When is the following up of the patients censored? Figure 1 and Figure II. Point it in the manuscript.

Response: Thank you for this point. Follow-up censored during evaluation for overall survival rate or progression-free survival rate after one year and 2<sup>nd</sup> years of treatment of all participants in both groups, which can be seen in the manuscript.

Please take care about the fact that you do not analyze groups but patients in groups. The word "group" is not used appropriate many times.

The manuscript needs serious English editing. Many sentences are not constructed appropriately and are not quite well understandable at first reading.

Response: Thank you for the constructive suggestions. We have revised the manuscript, and still, we will send our paper for English editing.