

## Peer Review File

Article information: <https://dx.doi.org/10.21037/lcm-21-39>

### Comments from reviewers

The authors have experience in urological practice and in publications. They chose an important- and highly contentious- topic, namely whether certain foods and supplements might help or hurt chronic lower urinary tract conditions such as OAB and ICS/PBS. Given that these conditions might not be fully treatable by standard medical and surgical practice, understanding whether taking- or avoiding- certain substances could be highly useful. Low quality evidence behind a recommendation (e.g., avoid these 10 foods) can be an additional limitation on an individual's quality of life. On the contrary, taking in a food or supplement that has convincing evidence that it could be harmful would be needlessly suffering.

I appreciate that this is a literature review without a formal meta-analysis structure. Given that the authors wind up with 55 articles about every type of possible ingestion, there cannot be more than 3 articles specifically examining the effect of chocolate. Ultimately, however, I did not find what I was looking for here. I feel that providers would be helped by an assessment of the quality of evidence and specificity of a recommendation against "spicy foods". How many studies showed this? What is the Newcastle-Ottawa Quality assessment of these investigations? How strong was the association? What exactly is it in "fast food" that makes it bad? The authors went through strong methodological work and aligned with standards of review, but end up with a table that contains recommendations against "homemade soup" and "salad dressing". Perhaps this work can be easily reformatted to be of more use to the clinician and scientist.

Reply: Thank you for your comment. The tables have been excluded from the study and changes were made in the text regarding evidence.

Changes in the text: Appropriate changes were made throughout the paper for more coherent information and better flow of ideas.

Other recommendations that might improve the manuscript:

1) Scoping- do lifestyle adaptations (not nutrition) and vitamin supplements (I would value a deeper dive on foods to take in/avoid) belong in this article?

Reply: Thank you for your comment. The purpose of including lifestyle recommendations within dietary changes is because we believe that leading a healthy dietary plan should be accompanied with lifestyle changes as a whole and they cannot be separated from each other. We believe that giving a glimpse of lifestyle modifications relevant to chronic urinary bladder can give the patient a snapshot of leading a healthy life (including exercise, behavioral modifications, diet, vitamin supplements). Of course, due to the word count limit we decided to mainly focus on diet. However, we believe that touching base on all the components of a healthy lifestyle makes a difference in delivering the full message to the reader.

2) Items appearing in the table should be linked to the exact source (trial, study, epi investigation) where they appeared.

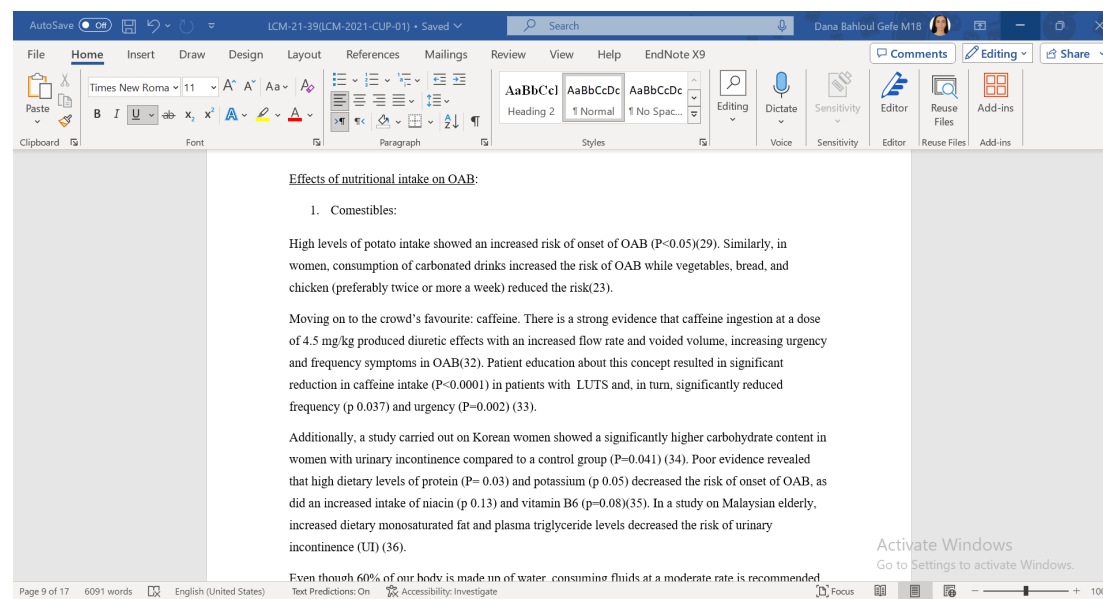
Reply: Thank you for your recommendation. The tables (Table 2 and 3) have been excluded from the study to focus on the forementioned comestibles in the text and inability to elaborate on each comestible item within the word limit.

Changes in the text: Changes in text were made accordingly.

3) A strength of evidence key would be helpful. If caffeine-free has a strong underpinning literature for being bad in OAB, but honey does not, please say so.

Reply: Thank you for your recommendation. Changes in text were made accordingly.

Changes in the text: Refer to page 9



## Comments from editorial office

### General Comments

Many thanks to the authors for their efforts in this manuscript and for proactively attaching the PRISMA checklist. Could the authors consider refining this manuscript and publishing it as a Systematic Review because of the detailed and specific search strategy and the summary of the included literature? We believe that a systematic review would maximize the value of this paper and bring more powerful inspiration and suggestions to the reader.

#### - Option A:

Therefore, the authors need to revise the article according to the updated LCM's Guidelines for Authors (<https://lcm.amegroups.com/pages/view/guidelines-for-authors#content-2-2>, 2.2.1 Systematic Reviews without Meta-analysis), including

- (1) Identify this manuscript as a Systematic Review in the "Title";
- (2) Use a structured "Introduction" to increase readability: (a) Background (b)

Rationale and knowledge gap (c) Objective;

(3) Refine the "Methods" to include the timeframe and risk of bias assessment;  
(4) Re-structure the "Discussion" to include a) Key findings, b) Strengths and limitations, c) Comparison with similar researches, d) Explanations of findings, e) Implications and actions needed;  
(5) Add the "Highlight Box";  
(5) The manuscript should include a Reporting Checklist statement in the footnote "The authors have completed the PRISMA reporting checklist".  
We believe that Prof. Buchholz's extensive experience in systematic reviews might facilitate this suggestion.  
The authors may refer to the Structure template (<https://cdn.amegroups.cn/static/public/2.2.1-Structure%20of%20Systematic%20Reviews-template-V2022.11.4.docx>).

### **- Option B:**

However, the above comments can be omitted if the authors choose to publish it as a Narrative Review due to their busy schedules. Again, we strongly recommend a systematic review, though.

In addition, due to the recent editorial update on the regulations of manuscripts (<https://lcm.amegroups.com/pages/view/guidelines-for-authors#content-2-2>, 2.2.3 Narrative Review (Also Called Literature Review))

(1) Please re-arrange the "Introduction";  
(2) Refine the "Methods" (add the timeframe) and include a completed search strategy summary table;  
(3) Fill out and submit the "Narrative Review Checklist". A statement "We present the following article in accordance with the Narrative Review reporting checklist" should be included at the end of the Introduction. The manuscript should also include a Reporting Checklist statement in the footnote "The authors have completed the Narrative Review reporting checklist".

The authors may refer to the Structure template (<https://cdn.amegroups.cn/static/public/2.2.3-Structure%20of%20Narrative%20Reviews-template-V2022.11.4.docx>).

**Reply: Option B**

### **Specific Comments**

#### **Comment 1: Introduction**

The introduction is detailed and easy to understand. Only three suggestions:

(1) Why focus on chronic bladder disease rather than some serious disease such as bladder cancer? -

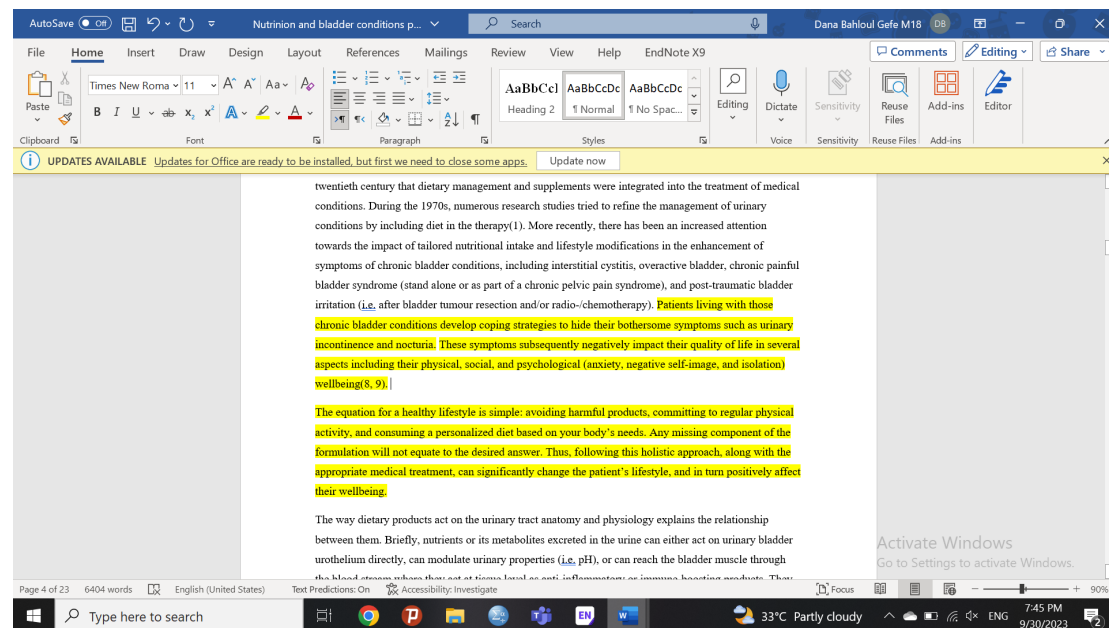
**Reply:** Thank you for your comment. Though we are aware of the importance of raising available awareness on serious disease like bladder cancer and its relationship with modifiable factors, there has been more emphasis in the papers we reviewed on the effect of nutrition on chronic bladder conditions such as interstitial cystitis and

overactive bladder. Our paper is just reiterating what has been discussed in the literature.

(2) The introduction only mentions the impact of chronic bladder disease on the quality of life but seems omitted about how lifestyle habits affect chronic bladder disease by changing nutritional status.

**Reply:** Thank you for your recommendation. The introduction has been modified accordingly.

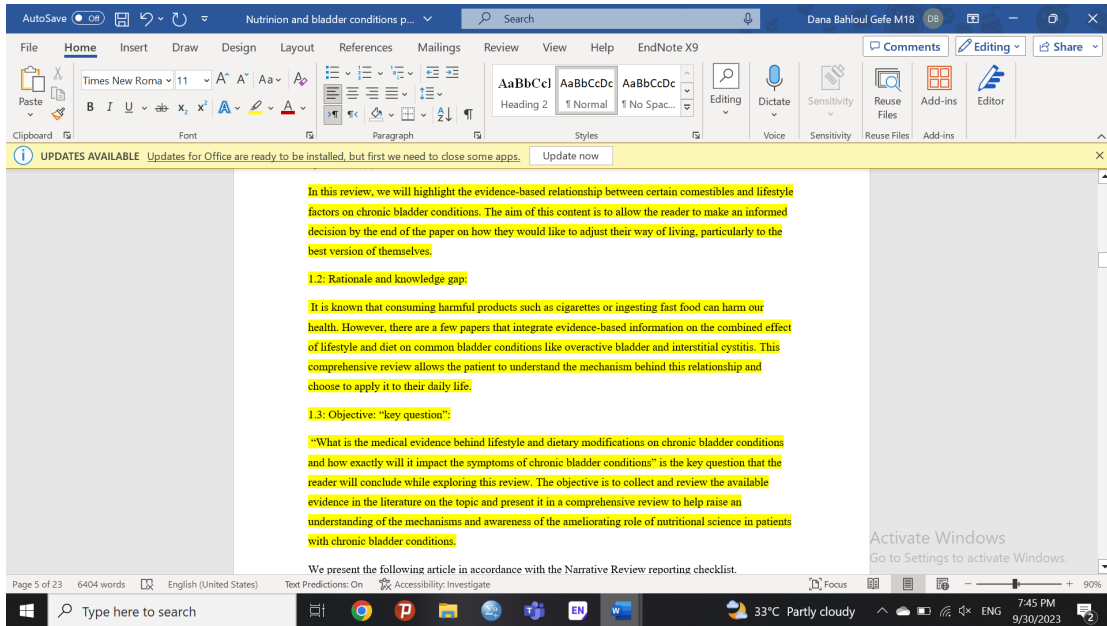
**Changes in text:** Refer to pages 4-5.



(3) The manuscript fails to provide a persuasive rationale for publishing this review in the introduction. The authors should have clarified what existing similar reviews have and have not summarized, before carrying out "This study aims to explore the relationship between nutrition and chronic bladder conditions".

**Reply:** Thank you for your recommendation. The introduction has been modified accordingly.

**Changes in the text:**



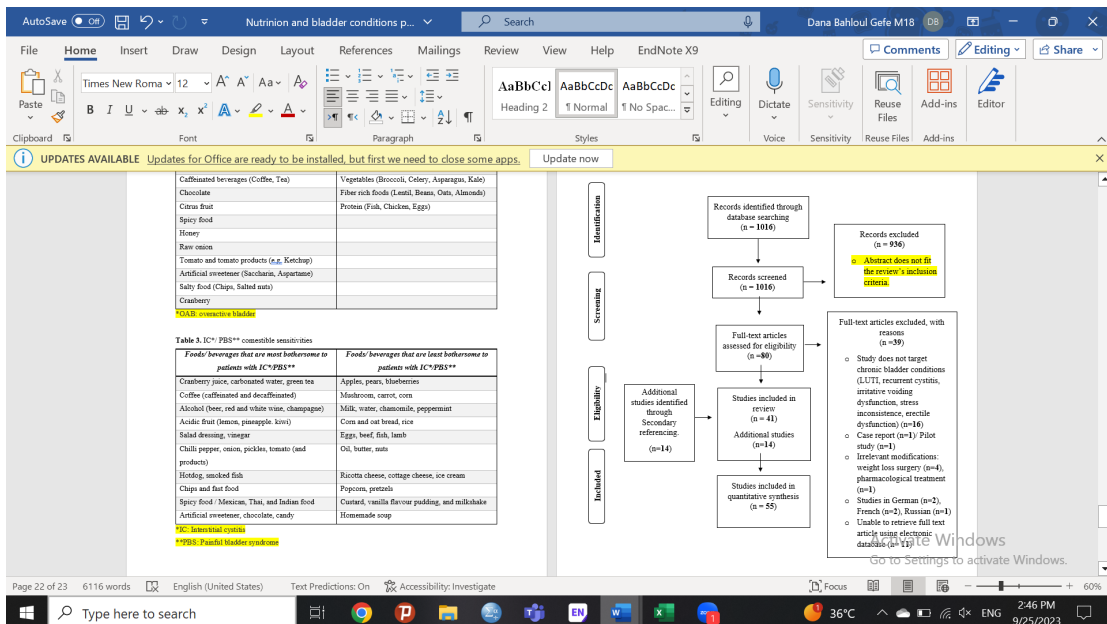
## Comment 2: Figure & Tables

(1) Could the authors specify the reasons for the exclusion of 936 articles and the respective numbers?

(2) Please add a footnote to tables to explain the abbreviations.

**Reply 2:** Reason for exclusion is that the 936 articles did not fit our inclusion criteria during initial screening of title and abstract (refer to table 1).

**Changes in text 2:** Highlighted in yellow.



## Comment 3: Discussion

(1) As mentioned in comment 1(2), the authors could further explore how lifestyle modifications (e.g., physical exercise) change nutritional status.

**Reply:** Thank you for your comment. However, we explored that in 2 paragraphs: treatment of obesity with physical activity as well as disease specific physical activity. (Refer to page 7-8, section 5, paragraphs 9-10)

(2) Differences in dietary habits (e.g., preference for processed foods, availability of fruits and vegetables) across countries may also lead to different nutritional intakes. Could the authors summarize the regional differences as well as nutritional differences in the included literature and give recommendations accordingly?

**Reply:** Thank you for your comment. Our paper focuses on the ingredients of different comestibles in the prevention and treatment of chronic bladder conditions. Our search did not come across regional differences.

(3) Similarly, there are many differences in patients, such as race, gender, age (elderly, children), special identity (pregnant women, athletes), etc. Have the authors considered the impact of these factors on nutritional status?

**Reply:** Thank you for your comment. The authors are aware of the race, gender, age factors as a potential contributing factor to various bladder conditions, however, these are extensively discussed in the literature under different headings which are beyond the scope of this paper.

(4) In the herbal treatment, we suggest the authors could explore in depth its dosage, mechanism of action, safety, and potential toxicities, which could help readers understand more comprehensively the effects of herbal medicines on chronic bladder disease.

**Reply:** Thank you for your recommendation. The discussion has been modified accordingly.

**Changes in the text:**

(5) It is necessary and important to transparently discuss the study's LIMITATIONS in the Discussion. A separate paragraph is highly suggested.

**Reply 3:** Thank you for your recommendation. The introduction has been modified accordingly.

## Changes in the text 3:

The screenshot shows a Microsoft Word document titled "Nutrition and bladder conditions p...". The document content is as follows:

THE IMPACT OF NUTRITION AND LIFESTYLE ON CHRONIC BLADDER CONDITIONS: A LITERATURE REVIEW

**Limitations of the review:**

Despite the maximal efforts in providing a comprehensive review that displays evidence published over the past few years, there are limitations that arise. Firstly, consideration of nutritional variations in different regions as well as diverse patient factors (age, gender, comorbidities etc) were not discussed in this review as it was beyond the scope of the search. Secondly, even though papers were collected from a wide range of publication dates (from the early 2000s to 2020), including more recent papers would have added further value to our review. Finally, following the exclusion criteria of omitting papers published in non-English language limited the evidence that could have been impactful from other international authors. We aim to explore those differences in the future and compile a broader and more up to date review.

**Acknowledgements:**

I would like to express my gratitude to my supervisors, Doctor Noor Buchholz, and Doctor Ali Thrwaini, who guided me throughout this project. I would also like to thank my parents and brothers who supported

The document includes a yellow notification bar at the top stating "UPDATES AVAILABLE Updates for Office are ready to be installed, but first we need to close some apps." and a status bar at the bottom showing "Page 14 of 23 6599 words English (United States) 32°C Partly cloudy 12:13 AM 10/11/2023".