

## Peer Review File

**Article information:** <http://dx.doi.org/10.21037/atm-20-5170>

### **Reviewer Comments**

The manuscript “The diagnostic performance of the Gynecologic Imaging Reporting and Data

System (GI-RADS) in adnexal masses” reports on a meta-analysis to evaluate the diagnostic performance of an imaging reporting system in differentiating benign and malignant adnexal tumors. Following PRISM guidelines, the authors identified 10 eligible studies with a total of about 2,500 patients.

This is a timely and important clinical topic and the message of the article is clear. However, there are several issues the authors need to address

Minor:

1) There are multiple typos and grammar issues in the manuscript – please ask a native to edit the manuscript.

**Reply 1: We asked a PhD doing research in the US to make linguistic changes to the paper**

**Changes in the text: There were a lot small changes in the paper, so it was difficult to describe all of them. Most of the changes were about usage of tenses, articles, and phrases.**

2) Multiple references are formatted poorly – please correct.

**Reply 2: Sorry for that we did not notice the formatted mistakes. We had already correct these problems.**

**Changes in the text: We checked all the reference format, and correct them. (see reference section)**

3) Abstract – objective: Mention that this is a meta-analysis. Specify the aim (“diagnosing genital tumors” – there are several genital tumors not only adnexal ones) similar to the conclusion and actual aim of GI-RADS (to differentiate benign and malign adnexal masses).

**Reply 3: Thanks for the suggestion to specific the aim and the study classification, and we mentioned these in the abstract.**

**Changes in the text: we have modified our text as advised (see page1 line9-10)**

4) p.3, L.6: Remove the footnote. Also, the PRISMA checklist attached is completely blank

**Reply 4: We have removed the footnote. There were some problems when we**

**uploaded the PRISMA checklist, and we re-uploaded the PRISMA checklist based on the lasted version of the manuscript.**

**Changes in the text: We have removed the footnote, the updated PRISMA checklist were re-uploaded to the website**

5) p.3, L.17: Please specific the minimal required follow-up time

**Reply 5: thanks for your suggestion, and we identified the follow-up time as 6 weeks period interval according to the guidelines.**

**Changes in the text: we have modified our text as advised (see page4 line5-6)**

6) p.4, L.22: Move the sentence reporting on the results of the QUADAS assessment to the results section

**Reply 6: We have move sentence reporting on the results of the QUADAS assessment to the results section, and retain the description of the QUADAS methodology**

**Changes in the text: we have modified our text as advised (see page5 line10-16 and page7 line 17-19)**

7) p.6, L.2: Specify the follow-up time of the single studies

**Reply 7: We described the golden standards of each studies, and separately described the timing of the followup of the studies which had the follow-up patients.**

**Changes in the text: we have modified our text as advised (see page6 line21-22, page7 line1-4 and table 1)**

8) p.6/7, LL.19-1: Delete this section or discuss later - these are not the main results of the article and should not be mentioned in the first paragraph of the discussion

**Reply 8: Thanks for your advise and we moved this part to the end of the discussion section.**

**Changes in the text: we have modified our text as advised (see page9 line9-22)**

9) p.7, LL.12-13: In the methods section the authors state that studies using other imaging techniques than ultrasound were excluded. However, in this sentence says that other imaging techniques were used in the included studies. Please explain. Exclusion criteria on p.3 L.20 "2) the adnexal mass was evaluated by other imaging methods or methods combined with ultrasound"

**Reply 9: Here it might be that our language was not accurate. We did want to exclude the use of GI-RADS using other imaging techniques than ultrasound in adnexal masses. Because the aim of our study was the evaluation of the diagnostic ability of GI-RADS combined with ultrasound, the evaluation would not be**

**possible if we included studies that combined other examinations. However, we mentioned in the discussion section the comparison of the diagnostic efficacy of GI-RADS combined different examinations.**

**Changes in the text: We have modified our text as advised (see page9 line9-11)**

10) There is a conference abstract reporting a meta-analysis on this topic by Amor et al from 2018 (<https://obgyn.onlinelibrary.wiley.com/doi/full/10.1002/uog.19410>). Amor et al, at this time, included 6 studies with a total of 2460 masses – the authors of the present meta-analysis included 10 studies with a total of 2723 masses. Please comment on this because looking at the caseload and the number of included studies, there seem to be inconsistencies in the study selection process between the conference abstract and the present paper.

**Reply 10: Thank you for raising this issue for us. We looked at the conference abstract that you mentioned. And we have searched again according to the search keywords mentioned in this conference abstract. We found that the number of articles that could be included in pubmed with "GI-RADS" as search term was 11, and we have included all the articles that could be included. In addition, in order to avoid some articles being missed, we again searched "Gynecologic Imaging Reporting and Data System" and "GI-RADS" in the restricted time period searched in these 3 databases. The final decision to include articles remained the same, and the included studies were not changed in our study. We believed that the inclusion criteria for this conference article might differ from those used in our study. Our study only included studies of GI-RADS combined with ultrasound, so we did not include those articles that mentioned the combination of GI-RADS and other screening methods in the patients. I think this was where our study selection differed from this conference abstract, resulting in the difference in numbers afterwards.**