Peer Review File

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Reviewer A

Dear author, thank you for having spent your time on research in the field of breast reconstruction, I suggest you dedicate a separate chapter to the "mastectomy without reconstruction" specifying that it is a surgical practice that does not fall within world standards (except some borderline cases); I also suggest you highlight that the most used and most valid questionnaire to talk about breast reconstruction is the Breast Q; by now it is clear to the whole scientific community that breast reconstruction is fundamental after mastectomy, it would be more interesting to compare the different reconstructive techniques.

Comment 1: I suggest you dedicate a separate chapter to the "mastectomy without reconstruction" specifying that it is a surgical practice that does not fall within world standards (except some borderline cases)

Reply 1: Thank you for your suggestions. We agree that "mastectomy without reconstruction" deserves a mention in the paper. We have included a comparison between mastectomy and breast reconstruction versus mastectomy alone (mastectomy without reconstruction) on line 280. Here, we assert that women who had mastectomy followed by BR had significantly decreased incidences of anxiety and depression compared to women who had mastectomy alone, and note that some studies have concluded that BR is beneficial in improving perceptions of body image and improving overall mental health postoperatively. While mastectomy alone is always an option for individuals with breast cancer, it is implied in these results that reconstruction is a viable and beneficial option that can increase patient postoperative quality of life and is considered to be the world standard.

Comment 2: I also suggest you highlight that the most used and most valid questionnaire to talk about breast reconstruction is the Breast Q; by now it is clear to the whole scientific community that breast reconstruction is fundamental after mastectomy, it would be more interesting to compare the different reconstructive techniques.

Reply 2: Thank you for the note. We have added an acknowledgment that the Breast Q a common and valid questionnaire to discuss breast reconstruction Q on line 235.

Reviewer B

Comment 1: This systematic review on the psychological impacts of post-mastectomy breast reconstruction is well done and I do not have specific critiques that need to be addressed. The purpose of the review has been clearly stated, and the limitations and biases of this study design have been addressed. This review will allow breast and reconstructive surgeons to further understand the impact that breast reconstruction has on patient psychology, specifically when addressing different reconstruction modalities and timings.

Reply 1: Thank you for your statements regarding the strengths of this study. We appreciate the time and efforts made to review our manuscript.