

Peer Review File

Article information: <https://dx.doi.org/10.21037/jgo-21-890>

Reviewer A

Comment: The authors report on the homogeneity of treatment patterns in patients with gastric cancer or cancer of the GEJ. The manuscript is well-written. I have a minor request for revision: The X axis of figures 3a and 3b is quite confusing and should be revised.

Reply: These figures have been revised to clarify the content.

Reviewer B

The authors evaluated treatment heterogeneity of gastric cancer using the Herfindahl-Hirschman index (HHI). The authors showed statistically significant relationship between HHI score and concordance with NCCN treatment guidelines and concordance with category 1 guidelines.

Comment 1: The authors described HHI scores showed the degree of heterogeneity and homogeneity. and there was a statistically significant relationship between HHI score and concordance with NCCN treatment guidelines. I think that was only natural because of the meaning of HHI score.

Reply 1: Perhaps, but this is not a direct 1:1 relationship, and needed exploration, as they are different (although related) constructs. We have added to the discussion about this topic and its limitations. (page 12 lines 277-279).

Comment 2: The authors said it is not possible to determine if concordance with guidelines leads to better or worse outcomes in a retrospective study design. Why did you analyzed this study in a retrospective study design? I think it's best not to emphasize that point.

Reply 2: We were simply stating the limitations of causal inference in a way we hoped was clear to the reader. We have clarified that this is related to causality, not the validity of the significant associations observed in this study. (page 12 line 271-272).

Comment 3: P10, L236-237. Where was 0.126 and 0.144 listed?

Reply 3: This has been corrected. Thank you for noting this. (page 10 line 236-237).

Comment 4: Please show the difference of Abrams report in discussion.

Reply 4: We have clarified in the discussion how this report differs. Importantly, these are completely different patients and datasets. This shows the consistency of findings and provides support for the reliability of our conclusions. We have revised the wording to clarify this. (page 10 lines 233-235).