

Peer Review File

Article Information: <https://dx.doi.org/10.21037/jgo-23-808>

In response to **reviewer A**, we have the following comments

1)

Comment 1: Abstract: Background and conclusion parts were lengthy!

Reply 1: We welcome your suggestion and tried to abbreviate some excerpts while maintaining the main ideas and data

Changes in text 1: Lines 7-16 and 33-39

2)

Comment 2: Introduction: The goal of this study should be emphasized. And, possible results or hypothesis should be presented

Reply 2: We appreciate your comment and think that, indeed, the emphasis and hypothesis were not that clear. Thus we tried to make it clearer. The

Changes in text 2: Lines 104-105 and 117-123

3)

Comment 3: Discussion: Discussion part should give more information about authors results. Previous results in other articles were described extremely. Possible mechanism of its effect and clinical value of these data should be presented more.

Reply 3: We welcome and agree with your comments. We tried to comment further on our results and the possible implications from the clinical standpoint. We also discussed NLR possible mechanism and also added more references

Changes in text 3: Line 365-390 and 414-420 and 489-493

In response to **reviewer B**, we have the following comments

1)

Comment 1: Abstract Methods: Please mention all the literature and databases used to conduct this search; Define how poor OS and PFS is defined.

Reply 1: Thanks for these important details we previously forgot. We did a few modifications to address them

Changes in text: lines 18-19 and 23-24

2)

Comment 2: Materials and methods: Please provide a reference to Rayyan software

Reply 2: Thanks for the comment. We provided one

Changes in text: Line 137

3)

Comment 3: Materials and methods: Specify if PRISMA guidelines were used for this SLR and if not why so?

Reply 3: Thanks for the question. We used it indeed and now clarified in the manuscript

Changes in text: lines 139-140

4)

Comment 4: Materials and methods: Clarify what is the PICOS in this systematic literature review

Reply 4: We appreciate your comment and we clarified it in the appropriate section

Changes in text: Lines 141-146

5)

Comment 5: Materials and methods: What is the rationale for the search dates used in this study.

Reply 5: We appreciate your question. The rationale for the search dates was simply that it was agreed that the selection process during that week, in order to expedite the process of our research. We chose not to write that in the manuscript

Changes in text: none

6)

Comment 6: Materials and methods: Is this a global study or any country restrictions have been placed. Please specify.

Reply 6: Thanks for the question. This is actually a global study and no country restrictions were imposed. We clarified that in the manuscript

Changes in text: Lines 153-154

7)

Comment 7: Results: Table 1 please include footnotes for the table.

Reply 7: I apologize for any confusion. I wrote it previously but was misplaced a few lines below. Now moved to the bottom of the table

Changes in text: Line 259

8)

Comment 8: Discussion: Please provide a brief summary of the results from the SLR and NMA in the first paragraph of the discussion.

Reply 8: We appreciate your suggestion and added it to the first paragraph of the discussion

Changes in text: Lines 365-378

In response to **reviewer C**, we have the following comments

- 1) Comment 1: Introduction is well written and thoroughly presents the clinical issue. Materials and Methods are well constructed and presented in detail. Results are presented in a clear and organized manner. Conclusion is objectively summarizing the findings of the current study

Reply 1: We are so glad to read these comments. We appreciate them a lot

Changes in text: none

- 2) Comment 2: Discussion: Authors state themselves that both NCCN and ESMO guidelines for advanced gastric cancer do not recommend ICI use as third-line treatment; and vast majority of locally advanced cases (particularly in the West) are currently receiving multimodal treatment based on perioperative chemotherapy (FLOT regimen) and curative intent gastrectomy - for this reason

please insert a paragraph in Discussion regarding the role of NLR/PLR in locally advanced patients

Reply 2: We thank you and welcome your suggestion. It is timely and appropriate to discuss PLR and NLR roles in locally advanced GC and there are some studies delving into this matter. We added a paragraph in that regard and compared their results with ours

Changes in text: Lines 494-502