

Peer Review File

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Reviewer A

The data of the SEER is too heterogeneous to establish a nomogram. Therapy has been altered tremendously over the last 20 years – therefore the value of this nomogram is not established. Further, there is a bias regarding the therapy and severity of the disease. The nomogram is misleading regarding the conclusion.

Response: Thank you for your professional review. As with most rare diseases, there is no uniform recommendation for primary ocular adnexal lymphoma (POAL). Our current knowledge of POAL is principally derived from small series of retrospective analyses or individual case reports. Studies of the survival of POAL at large population levels have not been reported. The SEER database provides an advantageous resource for rare malignant tumors (POAL, etc.) in the context of limited clinical trials or prospective data. Regarding the lack of population-based data and prognostic tool specific for POAL, the SEER database was used to examine possible prognostic factors in patients diagnosed with POAL and create a dependable nomogram for predicting their survival. We also described the conditional survival of these patients for the first time. Our investigation could potentially offer significant insight into the survival trajectory of such tumors through examining a sizable cohort. Concurrently, our research furnished useful prognostic data for patients affected with such tumors on a macroscopic scale. Thanks again for your valuable comments.

Reviewer B

Introduction

Line 54 It would be better to avoid repetition “pathologically - pathological”.

Response: Thanks for your careful review. we have modified our text as advised (see line 56)

Line 59 add reference. Iuliano A et al. Primary cutaneous anaplastic large-cell lymphoma of the eyelid: report of two cases and review of the literature. Orbit Journal 2020.

Response: Thanks for your careful review. we have added this reference as your advised (see line 60).

Results

Line 113 add information mean age, female and male ratio for instance.

Response: Thanks for your careful review. we have modified our text as advised (see

line113)

Discussion

Line 180 – change afflicted with affected.

Increase linking words in the discussion section.

Response: Thanks for your careful review. we have modified our text as advised (see line 178). And we have added linking words in the discussion section in our revised manuscript.

Add in the limitation that the study did not consider the results in term of classification of the ocular adnexal lymphoma.

Response: Thanks for your valuable suggestion. We have added related content in limitation part “Moreover, establishing a stable prediction model with favorable performance necessitates a substantial sample size. To avoid reducing the sample size, we refrained from subclassifying and modelling specific pathologic types. In future endeavors, larger multicenter datasets are requisite to distinguish specific pathologic types uniquely to develop a survival prediction model” (see line 233- 237).