

Peer Review File

Article information: <https://dx.doi.org/10.21037/amj-22-72>

Reviewer Comments

The authors provide a narrative review of sexual function of men undergoing conservative treatments for penile cancer. They do a very nice job summarizing the literature. This is a challenging topic to study given the low incidence of penile cancer and complex nature of sexual function in these patients. I commend the authors for completing this review and feel this article is a nice addition to the literature to provide one article compiling the data. I have a few minor comments.

Title-I recommend changing the title from 'sexuality' to 'sexual function' as that is what is really assessed in almost all of the studies. I think this will improve readership for the target audience by grabbing their attention more than sexuality.

Reply 1: We appreciate the reviewer's comment and changed the title to "SEXUAL FUNCTION AFTER PENILE CANCER TREATMENT LITERATURE REVIEW"

Abstract-Line 37-I feel mutilation is a poor choice of word given the connotation of this word, I recommend using morbid.

Reply 2: We agree with the reviewer and changed the word mutilation to morbid in line 37.

Introduction-Paragraph 3 could be condensed especially the in-depth discussion on TNM staging. This could be more concise highlighting the important points that PC treatments vary based on the TNM staging and depth of invasion. For less invasive treatments organ sparing or more conservative treatments are options.

Reply 3: We appreciate the reviewer's comments and made the modifications in the paragraph as suggested by the reviewer.

-Line 81-82 belongs in the sentence before- it seems out of place as a 1 sentence paragraph
-in the objective section, I would again change sexuality to sexual function

Reply 4: We agree with the reviewer and integrated lines 81-82 into the previous paragraph and changed the word sexuality to sexual function.

Methods-please add number of studies identified in the literature search and how many met inclusion criteria

Reply 5: We agree with the reviewer and included the following sentences in the “Methods” section: “The search returned 1172 results.”. “After applying the inclusion criteria, 31 papers were selected”

Discussion-I would change the title to Key Findings and Discussion or Results and Discussion as this section is the key results of your literature search not a typical discussion section.

Reply 6: We thank the reviewer's comment and changed the title “Discussion” to “Key Findings and Discussion”

-For the brachytherapy and RT studies, please include the mean or median follow-up as I would expect this to significantly impact how the results are interpreted with worsening rates of sexual function the further out from treatment given the cumulative nature of radiation side effects.

Reply 7: We appreciate the reviewer's comments. We included the median follow up of the brachytherapy and RT studies

-For the laser ablation studies, how was sexual function defined and assessed. The authors state it was preserved but was this subjective interpretation or assessed with validated surveys?

Reply 8: We appreciate the reviewer's comments and have added this information. The authors did not used validated surveys to asses sexual function

-Line 156 gland should be glans

Reply 9: We thank the reviewer's comment and changed the word to glans

-For the TIS patients treated with glans resurfacing is there any data on orgasm function. It was nice to include the sensitivity/sensation data but I am curious if this impacts orgasmic function

Reply 10: We appreciate the reviewer's comments and added orgasmic function results in the cited studies when they were described. However, these papers do not specify if the results are exclusive to Tis patients.

-Line 516 would avoid term mutilating again

Reply 11: We thank the reviewer's comment and changed the word to morbid

-Total penectomy was not included-obviously these men would not be able to have penetrative intercourse, however sexual activity extends beyond intercourse. I suspect the data is very limited on these men if even existent, however it would be nice to include to round out all PC treatments.

-Overall, the discussion is a nice summary, it would be nice to see this authors commentary and editorialize the findings some

Reply 12: We agree with the reviewer and appreciate the suggestion. We have added a new section "3.7 Total Penectomy", with the available data on total penectomy sexual function outcomes.

Conclusion-nicely done but I feel that often times with penile cancer the severity of the disease dictates the treatment options and thus significantly impacting sexual function. I recommend the authors including in the discussion that this information helps guide preoperative counseling however oncologic efficacy should still be considered primary when considering these treatment options.

Reply 13: We thank the reviewer's comment and have added the above cited observation.