Supplementary

Table S1 Definition of locally advanced gastric cancer*

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Author, year	Type of study	Country (E/W)	Patients	Staging method	Definition
Yu <i>et al.</i> 2019 (43)	RCT	China (E)	1,056	Histology, EUS, CT scan	cT2-4a, N0-3, M0
Li e <i>t al.</i> 2019 (44)	RCT	China (E)	96	Histology, CT/MRI, or diagnostic laparoscopy	cT2-4a, N+, M0
Lee et al. 2019 (45)	RCT	Korea (E)	1,050	Histology, EUS, CT scan	cT2–4a, N0–1, M0
Guo <i>et al.</i> 2019 (46)	RCT	China (E)	550	Histology, CT scan or diagnostic laparoscopy	cT3/4, Nany, M0
Wang et al. 2019 (47)	RCT	China (E)	446	Histology, EUS, CT scan	cT2-4aN0-3M0
Shi <i>et al.</i> 2019 (48)	RCT	China (E)	328	Histology, EUS, CT scan	cT2-4aN0-3M0
Zhao et al. 2018 (49)	RCT	China (E)	114	Histology, CT scan	cT2-4aN0-3M0
Shi <i>et al.</i> 2018 (50)	RCT	China (E)	328	Histology, EUS, CT scan	cT2–3, N0–3, M0
Wang et al. 2016 (28)	RCT	China (E)	73	Histology, CT scan	cT2–cT4, N+, M0
He et al. 2016 (51)	RCT	China (E)	105	Histology, EUS, CT scan	cT3-4N1-3M0
Hwang et al. 2015 (52)	RCT	Korea (E)	136	Histology, CT scan	Clinical stage IIA-IIIC (M0)
Ma et al. 2015 (53)	RCT	China (E)	80	Histology, CT scan	cT3–4, N1–3, M0
Inaki <i>et al.</i> 2015 (54)	RCT	Japan (E)	180	Histology, CT scan	cT any, N0–2, M0
Ahn <i>et al.</i> 2014 (55)	RCT	Korea (E)	51	Histology, CT scan	Clinical stage IB, II, IIIA, or IIIB
Tsuburaya <i>et al.</i> 2013 (56)	RCT	Japan (E)	52	Histology, EUS, CT scan	Clinical stage III–IV (M0)
Inoue <i>et al.</i> 2012 (57)	RCT	Japan (E)	27	Histology, CT scan	cT2-3N2-3M0 or cT4NanyM0
Shi <i>et al.</i> 2012 (58)	RCT	China (E)	158	Histology, CT scan	Clinical stage III–IV(M0)
Lee et al. 2012 (59)	RCT	Korea (E)	31	Histology, CT scan	Clinical stage T2N+, T3–T4 and/or N+
Batista <i>et al.</i> 2015 (60)	Prospective	Brazil (W)	16	Histology, CT scan	cT3-4 and/or N+, M0
Trip <i>et al.</i> 2014 (61)	Prospective	Netherlands (W)	25	Histology, EUS, CT scan, PET scan	Clinical stage IB-IV(M0)
Badakhshi <i>et al.</i> 2013 (62)	Prospective	Germany (W)	25	Histology, CT scan, EUS or diagnostic laparoscopy	cT2–4 and N2–3, M0
Schuhmacher et al. 2010 (63)	RCT	Germany (W)	144	Histology, CT scan	Clinical stage III and IV (cM0)
Orditura <i>et al.</i> 2010 (64)	RCT	Italy (W)	29	Histology, CT scan	Clinical stages III-IV (M0)
Biffi <i>et al.</i> 2010 (65)	RCT	Italy (W)	70	Histology, CT scan or diagnostic laparoscopy	cT3–4 any NM0 or any T, N1–3, M0

*, High grade evidence studies were included if histologically proven adenocarcinoma of the stomach and clinically staged using AJCC staging system. RCT, Randomized Clinical Trial; (E), Eastern country; (W), Western country; EUS, Endoscopic Ultrasound; CT, computed tomography; AJCC, American Joint Committee on Cancer.

Table S2	Subgroup	analysis NAC	treatment burden
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XXXX	Robotic + NAC (n=32)	Open + NAC (n=19)	P value
Efficiency	7 (21.9)	8 (42.1)	0.125
Readmission within 90-day, No. (%)	7 (21.9)	7 (36.8)	0.246
LOS > 75th percentile, No. (%)	7 (21.9)	9 (47.4)	0.057
Oncological efficacy	10 (31.3)	8 (42.1)	0.432
Positive margin (R1/R2), No. (%)	2 (6.3)	2 (10.5)	0.582
<16 Lymph Node resected, No. (%)	8 (25.0)	6 (31.6)	0.610
Major morbidity	7 (21.8)	8 (42.1)	0.125
Clavien-Dindo ≥ 3A, No. (%)	7 (21.9)	8 (42.1)	0.432
CCI ≥32, No. (%)	5 (15.6)	7 (36.8)	0.084
Reoperation within 90-day, No. (%)	0 (0.0)	2 (10.5)	0.061
Narcotic use			
Narcotic use > 75th percentile, No. (%)	3 (9.4)	8 (44.0)	0.004
Composite treatment burden, No. (%)	18 (56.3)	18 (94.7)	0.003

*, Clavien-Dindo classification of complications. NAC, Neoadjuvant chemotherapy; LOS, Length of Stay; CCI, Comprehensive Complication Index.



Figure S1 Kaplan-Meier curves illustrating percentage survival at 2-year for the Robotic + NAC, SOC + NAC subgroups and SOC no NAC respectively. NAC, neoadjuvant chemotherapy; SOC, standard of care.

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