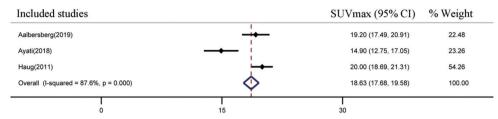
Supplementary

Table S1 Quality Assessment of Diagnostic Accuracy Studies-2 revision

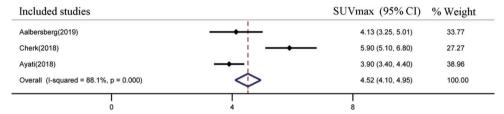
Domain	Patient selection	First scan	Second scan	Flow and timing
Description	Describe methods of patient selection	Describe the first scan and how it was conducted and interpreted	Describe the second scan and how it was conducted and interpreted	Describe any patients who did not receive the first scan and/or the second scan (refer to flow diagram)
	Describe included patients (presentation, intended use of 2 scans, and setting)			Describe the time interval and any interventions between the first scan and second scan
Signaling questions (yes/no/unclear)	Was a consecutive or random sample of patients enrolled?	Were the first scan results interpreted without knowledge of the results of the second scan?	Is the second scan likely to correctly classify the target condition?	Was there an appropriate interval between the first scan and second scan?
	Was a case-control design avoided?		Were the second scan results interpreted without knowledge of the results of the first scan?	Did all patients receive both scans?
	Did the study avoid inappropriate exclusions?			Were all patients included in the analysis?
Risk of bias (high, low, or unclear)	Could the selection of patients have introduced bias?	Could the conduct or interpretation of the first scan have introduced bias?	Could the second scan, its conduct, or its interpretation have introduced bias?	Could the patient flow have introduced bias?
Concerns regarding applicability: yes/no/unclear	Are there concerns that the included patients do not match the review question?	Are there concerns that the first scan, its conduct, or interpretation differ from the review question?	Are there concerns that the target condition as defined by the second scar does not match the review question?	_ n

The SUVmax on pretreatment scan

Adrenal gland



Thyroid



Pituitary gland

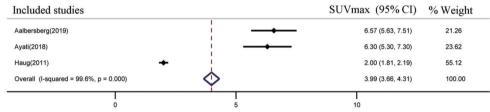
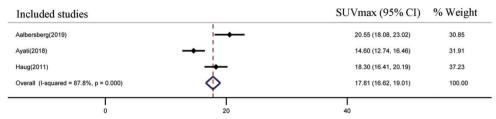


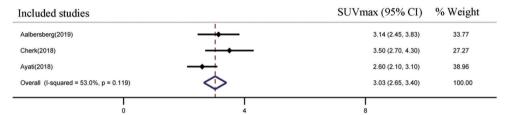
Figure S1 Forest plots of SUVmax in the adrenal gland, thyroid, and pituitary gland before SSAs treatment. SUVmax, maximum standardized uptake value; CI, confidence interval; SSAs, somatostatin analogs.

The SUVmax on posttreatment scan

Adrenal gland



Thyroid



Pituitary gland

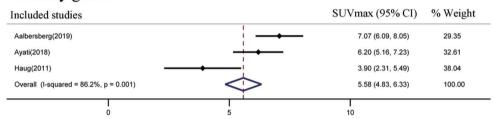
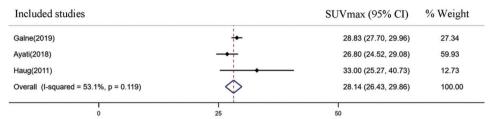


Figure S2 Forest plots of SUVmax in the adrenal gland, thyroid, and pituitary gland after SSAs treatment. SUVmax, maximum standardized uptake value; CI, confidence interval; SSAs, somatostatin analogs.

The SUVmax on pretreatment scan

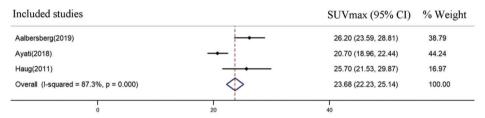
The hottest lesion



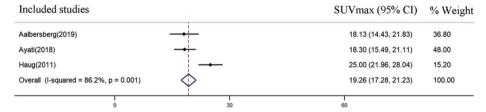
Primary tumor lesion

Included studies	SUVmax (95% CI)	% Weight
Aalbersberg(2019)	28.87 (6.64, 51.10)	4.44
Ayati(2018) — •	15.30 (11.04, 19.56)	17.78
Haug(2011)	32.90 (25.52, 40.27)	77.78
Overall (I-squared = 95.5%, p = 0.000)	29.59 (23.72, 35.46)	100.00
0 30	1 60	

Liver metastases



Lymph nodes metastases



Bone metastases

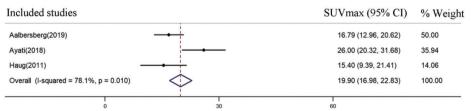
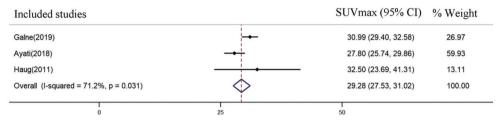


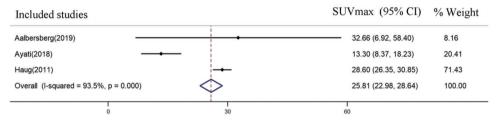
Figure S3 Forest plots of SUVmax in tumor lesions before SSAs treatment. SUVmax, maximum standardized uptake value; CI, confidence interval; SSAs, somatostatin analogs.

The SUVmax on posttreatment scan

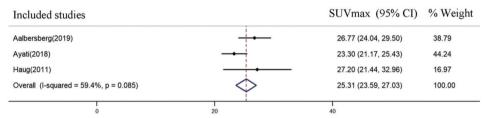
The hottest lesion



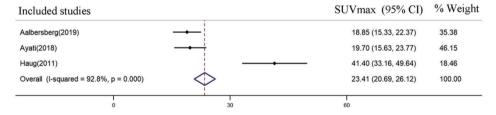
Primary tumor lesion



Liver metastases



Lymph nodes metastases



Bone metastases

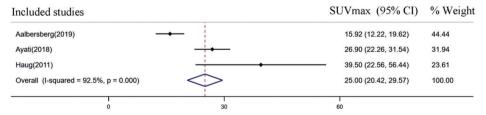


Figure S4 Forest plots of SUVmax in tumor lesions after SSAs treatment. SUVmax, maximum standardized uptake value; CI, confidence interval; SSAs, somatostatin analogs.