

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	PEDAL Protocol: A prospective single arm paired comparison of multiparametric MRI and 18F-DCPFyl PSMA PET/CT to diagnose prostate cancer
AUTHORS	Tran, Vy; Hong, Anne; Sutherland, Tom; Taubman, Kim; Lee, Su-Faye; Lenaghan, Daniel; Sethi, Kapil; Corcoran, Niall; Lawrentschuk, Nathan; Woo, H; Tarlinton, Lisa; Bolton, Damien; Spelman, Tim; Thomas, Lauren; Booth, Russell; Hegarty, Justin; Perry, Elisa; Wong, Lih-Ming

VERSION 1 - REVIEW

REVIEWER	Ferro, Matteo European Institute of Oncology
REVIEW RETURNED	02-May-2022

GENERAL COMMENTS	<p>The primary objective of this study is to compare the diagnostic accuracy of 18-fluorine PSMA (18F DCFPyL PSMA) PET scans to multiparametric magnetic resonance imaging (mpMRI) to detect primary prostate cancer at prostate biopsy</p> <p>I suggest to define these critical questions: - Evaluate costs with DCA and benefit on potential use of Prostate specific membrane antigen positron emission tomography (PSMA-PET)</p> <p>Discuss potential integration of Biomarkers in your study Protocol as : Cancers (Basel). 2021 Sep 21;13(18):4723. doi: 10.3390/cancers13184723 Minerva Urol Nephrol. 2021 Aug;73(4):442-451. doi: 10.23736/S2724-6051.21.04098-4. Epub 2021 Mar 26.</p> <p>Futurible application on reclassification biopsy during AS: Eur J Nucl Med Mol Imaging. 2021 Feb;48(2):477-482. doi: 10.1007/s00259-020-04944-2. Epub 2020 Jul 22</p>
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REVIEWER	Song, Bin Sichuan University West China Hospital Department of Radiology
REVIEW RETURNED	16-May-2022

GENERAL COMMENTS	The manuscript presented a detailed and well-designed study protocol for comparing the diagnostic accuracy of PSMA-PET/CT scans to mpMRI to detect primary prostate cancer in a multicenter prospective setting. The eligibility criteria, imaging procedures, outcome evaluation, and diagnostic accuracy assessment were
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	<p>clearly defined. In general, it is able to consider this paper for publication on BMJ open.</p> <p>Minor flaw:</p> <ol style="list-style-type: none"> 1. Table 1: The author stated this is a non-randomised phase III trial. I'm confused about the term 'within 3 years of randomization' in exclusion criteria 2 and 3. Can the authors explain this to me? 2. page 12 line 4: A full stop between 'software' and 'Reporting' is missing. 3. page 14 line 7: There is an extra comma between 'cancer' and 'the'.
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VERSION 1 – AUTHOR RESPONSE

1. emission tomography (PSMA-PET).
 - Thank you for this comment, and we agree that cost evaluation of some form is important in a study like ours. We have added a decision cost analysis component as a secondary outcome. Please see lines 275, 277 (table), 342-350.
2. Discuss potential integration of Biomarkers in your study Protocol as:
 - A. Cancers (Basel). 2021 Sep 21;13(18):4723. doi: 10.3390/cancers13184723
 - B. Minerva Urol Nephrol. 2021 Aug;73(4):442-451. doi: 10.23736/S2724-6051.21.04098-4. Epub 2021 Mar 26.
 - Biomarkers have been increasingly examined in recent times, with promising results. While our study focuses on the utility of PSMA PET/CT, we recognise the importance of considering biomarkers as an adjunct to diagnosis of clinically significant prostate cancer. Please see lines 87 and 383-394 for further discussion of biomarkers.
3. Futurible application on reclassification biopsy during AS: Eur J Nucl Med Mol Imaging. 2021 Feb;48(2):477-482. doi: 10.1007/s00259-020-04944-2. Epub 2020 Jul 22
 - This is an excellent point, and is included in our introduction and discussions. Please see lines 115-118, as well as lines 383-394

Reviewer #2 – Dr. Bin Song, Sichuan University, West China Hospital, Department of Radiology

Comments:

Comments to the Author:

4. Table 1: The author stated this is a non-randomised phase III trial. I'm confused about the term 'within 3 years of randomization' in exclusion criteria 2 and 3. Can the authors explain this to me?
 - Thank you for pointing this out. The table reflects an inaccuracy that is now rectified. Please see line 183 (table)
5. Page 12 line 4: A full stop between 'software' and 'Reporting' is missing.
 - These punctuation errors are now rectified. Please see line 239.
6. Page 14 line 7: There is an extra comma between 'cancer' and 'the'.
 - This is corrected. Please see line 286.