

## 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

<b>TITLE (PROVISIONAL)</b>	Eyelid sebaceous gland carcinoma: a protocol for a systematic review and meta-analysis of clinicopathological studies of prevalence
<b>AUTHORS</b>	Thagaard, Mikkel; Vest, Stine; Heegaard, Steffen; Marcussen, Niels

### VERSION 1 – REVIEW

<b>REVIEWER</b>	Olaofe, Olajirinde Olaniyi Obafemi Awolowo University, Dept of Morbid Anatomy and Forensic Medicine
<b>REVIEW RETURNED</b>	18-Apr-2024

<b>GENERAL COMMENTS</b>	Kindly consider if the use of the search term "carcinoma" will be of added benefit.
-------------------------	---

<b>REVIEWER</b>	Li, Jing Sun Yat-Sen University
<b>REVIEW RETURNED</b>	30-Apr-2024

<b>GENERAL COMMENTS</b>	This will be a very interesting and meaningful review. However, given that pathology is highly dependent on the expertise of pathologists, how do you plan to control for the credibility of the evidence included in your study? Will there be an analysis of pathological images to support the findings?
-------------------------	---

### VERSION 1 – AUTHOR RESPONSE

Reviewer 1: We kindly thank you for your comment.

The authors agree and the search term 'carcinoma' and also 'adenocarcinoma' to our searches in all of the databases.

Reviewer 2: We thank you for your kind comment regarding the meaningfulness of our review, to which we certainly agree.

Concerning the credibility of the evidence, the authors strongly agree. Unfortunately, at the moment, no consensus regarding the evaluation of quality in pathologic studies for inclusion in systematic reviews exists. These steps are often not included in pathologic systematic reviews. We have revised our manuscript to further elaborate on the matter.

Since we do not expect that all of the included studies will include pictures of eyelid sebaceous gland carcinomas, and of sufficient high quality to enable us to evaluate the diagnosis, this approach may be less suitable.

The quality control of the studies will instead be a two step process to align our review to the rigorous standards of a systematic review. Firstly, we have adjusted the JBI Checklist for Prevalence Studies to accommodate pathologic studies – specifically item no. 7 which asks if the condition (sebaceous gland carcinoma) has been measured in standard reliable way. We will scrutinize each study's methods and materials for relevant information such as, but not limited to, whether trained or specialized pathologists, or any machine learning or AI tools were involved in the diagnosis. Special attention will be given to whether pathologic revisions of the samples have been performed and if inter-rater reliability statistic such as Cohen's  $\kappa$ -coefficient has been applied.

Secondly, the authors will evaluate the body of evidence of the included studies similar to the GRADE standard, a standardized tool in interventional systematic reviews. Special attention will be given to the directness of the evidence, and also concerning imprecision of the findings e.g. to what extent do the findings match the expectations based on the statistics from the included studies.

The results of these quality steps will be presented in the final review by tables and as a narrative context.