

## 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>	Interrupted versus continuous suturing for vesicourethral anastomosis during radical prostatectomy: protocol for a systematic review and meta-analysis.
<b>AUTHORS</b>	Kowalewski, Karl; Tapking, Christian; Hetjens, Svetlana; Nickel, Felix; Mandel, Philipp; Ritter, Manuel; Kriegmair, Maximilian

### VERSION 1 – REVIEW

<b>REVIEWER</b>	Hideyasu Matsuyama Department of Urology, Graduate School of Medicine, Yamaguchi University, Japan
<b>REVIEW RETURNED</b>	03-Oct-2017

<b>GENERAL COMMENTS</b>	This is an unique protocol paper of Meta-analysis comparing the outcome between intermittent and continuous vesicourethral anastomosis during radical prostatectomy procedure, although well designed RCTs are limited.
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<b>REVIEWER</b>	Theodoros Tokas General Hospital Hall i.T, Hall in Tirol, Austria
<b>REVIEW RETURNED</b>	23-Oct-2017

<b>GENERAL COMMENTS</b>	<p>This protocol is well structured and clearly approaches the methodology of a planned review. The hot topic of two different techniques for vesicourethral anastomosis during radical prostatectomy is clearly unfolded and presented.</p> <p>I only have a minor revision</p> <p>I would focus on papers describing the vesicourethral anastomosis to present the pros and cons of each method. From this standpoint, I would replace references 16 and 18 with more relevant articles.</p>
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### VERSION 1 – AUTHOR RESPONSE

#### Reviewer #1 (Hideyasu Matsuyama)

Comment:

This is an unique protocol paper of Meta-analysis comparing the outcome between intermittent and continuous vesicourethral anastomosis during radical prostatectomy procedure, although well designed RCTs are limited.

Answer: We thank you for your feedback and advice. In preparation for the manuscript (preliminary searches, development of the search strategy) we came to the same conclusion that there is little evidence about this important topic. Therefore, we believe that a systematic and structured approach will help to answer the questions for the preferred anastomotic technique and underline the requirement for well-designed RCTs. Our review will summarize existing studies, provide a broad

overview about alternatives and will also assess the quality of the evidence in order to make recommendations for future research. This will be an important step to detect limitations of current techniques and further optimize surgical quality.

## Reviewer #2 (Theodoros Tokas)

Comment:

This protocol is well structured and clearly approaches the methodology of a planned review. The hot topic of two different techniques for vesicourethral anastomosis during radical prostatectomy is clearly unfolded and presented.

I only have a minor revision:

I would focus on papers describing the vesicourethral anastomosis to present the pros and cons of each method. From this standpoint, I would replace references 16 and 18 with more relevant articles.

Answer: We followed your advice and replaced reference 16 with a RCT about different suture techniques for the vesicourethral anastomosis. Additionally, we advanced our introduction on a potential impact of the suture technique on the development of strictures (page 4, lines 18-24). There is limited evidence reporting on the stricture rate after a certain suture technique for the vesicourethral anastomosis (e.g. Teber et al. reported similar outcomes). However, for other surgical procedures, a continuous techniques was associated with higher incidence of strictures. In fact, we do not know the answer yet and hope that our review will help to answer is important question.

## VERSION 2 – REVIEW

<b>REVIEWER</b>	Theodoros Tokas Department of Urology and Andrology, General Hospital Hall i.T., Hall in Tirol, Austria
<b>REVIEW RETURNED</b>	03-Nov-2017
<b>GENERAL COMMENTS</b>	No further comments