

**Reviewer #1:**

“The authors present a meta-analysis on 3 observational studies and 1 RCT (summed to 226 patients) that compared stent-in-stent (SIS) versus side-by-side (SBS) techniques for malignant hilar biliary obstruction (MHBO). The outcomes analysed were efficacy (e.g. technical and clinical success) and safety (e.g. procedure-related mortality). This is an interesting study on a rare entity (i.e. endoscopic palliation of MHBO), which is well suited for a meta-analysis. The study has been well conducted respecting all the important steps for a systematic review and meta-analysis and provides the current literature new information. Nevertheless, the manuscript has a few parts that might appear unclear to a non-specialist reader in addition to some typos. Therefore, I would like to offer some constructive criticism through the following: 1 – Even though the authors describe their search strategy had no restrictions regarding language, my understanding is that utilising terms in English for the search strategy inherently excludes papers which do not have at least an abstract in English. Even though this does not happen often, this could happen. I strongly suggest that the authors rectify their statement to account for this (e.g. as per the search strategy, this meta-analysis was restricted to studies that had at least the abstract in English). 2 – Suggest clearly stating in the abstract (methods section) the comparisons (e.g. SIS vs SBS through ERCP). 3 – Please elaborate and specify what the authors have considered to be a “suitable quality” study (page 6, Eligibility criteria). Was an objective criteria used to exclude low quality studies, or was the quality of studies assessed but not used as inclusion/exclusion criteria? 4 – Abstract: please correct typos (i.e. RTC instead of RCT; included instead of included) 5 – Abstract: please include the unit for the patency outcome (i.e. days); also would suggest not using the abbreviated form of mean deviation in the abstract 6 – Although implicit, it would be useful to state in the inclusion criteria that only metallic stents are being look at, (e.g. SBS plastic stents versus SIS metallic stents)”

## ANSWER:

Dear reviewer, we would like to thank you first for your time spent evaluating our manuscript and for the comments.

For additional comments:

- 1) Thank you for your comment on the search strategy of our article, we have rectified our statement and we believe it has become clearer. Thank you!
- 2) Right. We made the modification as suggested. Thank you!
- 3) This is an interesting question. Regarding the quality of studies, the risk of bias was assessed in cohorts studies by the Risk of Bias in Non-randomized Studies-of Interventions (ROBINS I) Cochrane tool. For randomized controlled trials, the risk of bias was defined by version 2 of the Cochrane Risk-of-Bias tool for Randomized Trials (RoB2). The quality of evidence was assessed using the objective criteria from GRADE (Grading Recommendations Assessment, Development, and Evaluation). Otherwise, quality of studies was not used as inclusion or exclusion criteria. Therefore, we are very grateful for your criticism and we have excluded the term “suitable quality studies” from eligibility criteria, because it was not used for this purpose. Thank you very much for your comment.
- 4) Excellent suggestion. We have corrected the typos. Thank you!
- 5) Thank you for your suggestions! We have made the corrections.

- 6) Thanks for the comment. We have stated in the inclusion criteria that only metallic stents are being look at.

*Dear reviewer, we hope that we have answered all your questions and hope that your new analysis is positive. We look forward to your response and are available for any further questions.*

**Reviewer #2:**

“Malignant hilar biliary obstruction (MHBO) is a complicated issue in the practise of GI department. SIS and SBS are two kinds of ERCP treatments of this problem. Each ona has its own features. After searching and analyzing several literatures, the authors found that compare to SBS, SIS showed superiority in stent patency. It is a very important clue while GI doctors chosing one strategy in the management of MHBO. But, we also notice that there is still very few documents focus in this field. So, RCT study need to performed in the near future in order to make this conclusion more solid.”

**ANSWER:**

We would like to thank the reviewer for the time in reading our article, evaluating it and for the compliment made in the commentary. Reviewers like you make the difference in our scientific environment.

**Science Editor:**

"1 Scientific quality: The manuscript describes a meta-analysis of the endoscopic retrograde cholangiopancreatography drainage for palliation of malignant hilar biliary obstruction. The topic is within the scope of the WJH. (1) Classification: Grade A and Grade B; (2) Summary of the Peer-Review Report: The study has been well conducted respecting all the important steps for a systematic review and meta-analysis and provides the current literature new information. The article is interesting. However, the questions raised by the reviewers should be answered; and (3) Format: There are 3 tables and 9 figures. A total of 44 references are cited, including 27 references published in the last 3 years. There are 4 self-citations, which are related to this paper. 2 Language evaluation: Classification: Grade B and Grade A. 3 Academic norms and rules: The authors provided the Biostatistics Review Certificate, and the PRISMA 2009 Checklist. No academic misconduct was found in the Bing search. 4 Supplementary comments: This is an invited manuscript. The topic has not previously been published in the WJH. 5 Issues raised: (1) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor; and (2) The "Article Highlights" section is missing. Please add the "Article Highlights" section at the end of the main text. 6 Re-Review: Required. 7 Recommendation: Conditional acceptance."

**ANSWER:**

I would like to thank the Science Editor for the time in reading our article, for the patience in elaborating the suggestions and for the great help.

Issues raised:

1. Perfect ! We did it according to your suggestion, preparing the figures using Power Point. Thank you!
2. Sorry about that. Thank you so much. We have added the "Article Highlights" section. Thank you.

We thank you again we hope your approval.

**Company Editor-in-chief:**

“I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Hepatology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office’s comments and the Criteria for Manuscript Revision by Authors.

**ANSWER:**

I would like to thank you so much for you time and your comments. We have reviewed the manuscript and we are available for any further questions.