Reviewer's report

Title: Para-aortic lymphadenectomy in advanced stage cervical cancer, a protocol for comparing safety, feasibility and diagnostic accuracy of surgical staging versus PET-CT; PALDISC trial

Version: 0 Date: 20 Apr 2017

Reviewer: Melanie Morris

Reviewer's report:

Thank you for asking me to review this manuscript. It is a very worthwhile study with implications for practice if it proceeds to a phase 3 trial. The article is well-written and the study protocol clearly thought out. I have just a few minor issues to point out for the authors' consideration.

Minor Issues:

Generally, there were places where I felt a bit more explanation was needed for the general (non-specialist cancer) readership of this journal e.g. FIGO - needs definition and explanation at first use (and perhaps do not use in the abstract, could just say "late (or advanced) stage" there). There is quite a bit of technical language in the abstract e.g. lymphadenectomy - could be changed to a more lay term and then explained in the body of the manuscript.

* Title: you may want to explain the PALDISC acronym somewhere, or perhaps not needed?

* Line 25: could add "A small study established a sensitivity and specificity estimate for PALN metastases of..." otherwise the wide CIs are a red flag immediately!

* Line 31: it is not clear here that there will be 30 women overall (as opposed to 30 in the intervention arm all receiving surgical staging). Rephrase e.g. by adding "or usual PET-CT staging" at the end of the sentence.

* Line 59: clarify whether this is 700 new diagnoses across the whole population (and if so, give the rough female adult population in the Netherlands, for those not familiar) or 700 per 100,000 women per year?

* Line 61: "failure rates" - failure of what? I assume, being able to determine an accurate stage?
* Line 61: are these FIGO stages or TNM stages referred to here? Non-cancer specialists may not know what these refer to, may be better to say: early / late or advanced, or explain numbers more fully?

* Line 62: typo - para-aortic

* Line 73: the sentence on sensitivity and specificity is a little unclear - why does it "seem to have" a certain sensitivity and specificity? The following sentence makes it clear that the figures are based on the one small study (ref 8?) but then it is unclear what the other references in the original sentence (i.e. refs 6, 9 and 10) are adding?

* Line 80: In the LILACS trial, if a patient is found to be PET-CT negative (which, if assumed to be accurate, I understood to mean: no nodes found with metastases) then why would they go on to have surgical staging? Clarify or reword.

* Line 90: Perhaps add "...diagnostic accuracy of the tests and the clinician's experience with both PET-CT and surgical staging." if this is what you mean here? Do you have a reference for this assertion?

* Line 105: typo - phase 2

* Line 150: typo - optionally

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