

**Table 1.** Actual forms of spin in clinical studies evaluating performance of biomarkers in ovarian cancer.

| Category of spin                            | Type of spin   | Criteria   | Spin frequency, n= 200<br>n (%) [95% CI]   |
|---|--|--|--|
| <b>Misrepresentation</b><br><br><b>a. 1</b> | Incorrect presentation of results in the abstract or discussion conclusion | <p>Abstract conclusion OR discussion conclusion for BM's clinical performance is not in accordance with or is stronger than results justify.</p> <p>Actual spin if all the following:</p> <ul style="list-style-type: none"> <li>a. Exaggerating the performance of the BM in the conclusion despite low performance measures reported in the results;</li> <li>b. Claiming effect of the BM despite statistically non-significant results;</li> <li>c. Claiming effect despite not providing imprecision or statistical test (confidence interval or <i>P</i> values) between different biomarker models tested or patient groups (subgroups);</li> </ul> | <p><b>40 (20% [15% - 26%])</b></p> <p>Frequency in the abstract conclusion: (7% [4% - 12%])</p> <p>Frequency in the discussion conclusion: (18.5% [14% - 25%])</p> |
| <b>a. 2</b>                                 | Mismatch between results reported in abstract and main text                | <p>Results reported in the abstract is not in accordance with results reported in main text.</p> <p>Actual spin if all the following:</p> <ul style="list-style-type: none"> <li>a. Results reported in the abstract contains statement in which statistical significance is claimed, despite not providing imprecision or test of significant (CI or p-values) in results reported in the main text;</li> </ul>   | <b>33 (16.5% [12% - 23%])</b>  |

|             |                   |   |                             |
|-------------|-------------------|---|-----------------------------|
|             |                   | b. Selective reporting of statistically significant outcomes in the abstract compared to the results reported in the main text;<br>c. Results reported in the abstract that do not match results provided in the main text; |                             |
| <b>a. 3</b> | Mismatch in title | The title contains wording misrepresenting BM's clinical performance compared to results in the main text;  | <b>11 (5.5% [3% - 10%])</b> |

| <b>Category of spin</b>           | <b>Type of spin</b>   | <b>Criteria</b>  | <b>Spin frequency, n= 200<br/>n (%) [95% CI]</b>   |
|-----------------------------------|---|--|--|
| <b>Misinterpretation<br/>a. 4</b> | Other purposes of biomarker claimed not pre-specified and/or investigated | Abstract conclusion OR discussion conclusion contains statement suggesting BM purposes not pre-specified and/or investigated.  | <b>Total: 65 (32.5% [26% - 40%])</b><br>Frequency in the abstract conclusion: (20.5% [13% - 24%])<br>Frequency in the discussion conclusion: (30% [24% - 37%]) |
| <b>a. 5</b>                       | Mismatch between intended aim and abstract or discussion conclusion       | Abstract conclusion OR discussion conclusion for BM's clinical performance is stronger than study design.<br>Actual spin if all the following:<br>a. The discussion conclusion contains statement in which BM utility is claimed | <b>Total: 57 (28.5% [23% - 35%])</b><br>Frequency in abstract conclusion: (20.5%) [15% - 27%]<br>Frequency in discussion conclusion: (15.5%) [11% - 21%])      |

|             |   |  |                          |
|-------------|---|--|--------------------------|
|             |   | <p>despite not evaluating clinical effectiveness (i.e. useful);</p> <p>b. The discussion conclusion contains statement in which BM performance improvement is claimed despite not evaluating incremental measures (i.e. improve);</p> <p>c. The discussion conclusion contains statement that uses causal language for BM(s) being assessed despite the use of a nonrandomized design;</p> |                          |
| <b>a. 6</b> | Other benefits of BM claimed not pre-specified and/or investigated          | The discussion conclusion contains statement claiming BM benefits not pre-specified and/or investigated.   | <b>10 (5% [3% - 9%])</b> |
| <b>a. 7</b> | Extrapolation from study participants to a larger or a different population | The discussion conclusion contains statement that extrapolates BM's clinical performance to a larger or a different population, not supported by recruited subjects.   | <b>10 (5% [3% - 9%])</b> |

\* All results presented in abstract and main text, excluding supplementary material.

Abbreviations: BM, biomarker; HR, hazard ratio; OS, overall survival; PFS, progression-free survival

**Table 2.** Facilitators of spin in clinical studies evaluating performance of biomarkers in ovarian cancer.

| Potential facilitators of spin   | Spin frequency, n= 200<br>n (%) [95% CI] |
|--|--|
| Not stating sample size calculations                                       | 200 (100% [98% - 100%])                  |
| Not mentioning potential harms   | 200 (100% [98% - 100%])                  |
| Not pre-specifying a positivity threshold for continuous biomarker         | 84/164* (51.2% [43% - 59%])              |
| Incomplete or not reporting imprecision or statistical test for data shown | 26 (13% [9% - 19%])                      |
| Study objective not reported or unclear                                    | 24 (12% [8% - 18%])                      |

\* 164 articles included evaluation of continuous biomarkers.