

## Preliminary Metaanalysis

We conducted a careful Medline search (up to May 2017) and consecutive reference survey of retrieved studies to identify all studies that investigated the diagnostic performance of  $^{18}\text{F}$ -FDG PET for differential diagnosis of parkinsonism in individual patients in a double-masked manner (i.e., imaging analysis unaware of clinical diagnosis and vice versa), included at least 3 diagnostic patient groups (typically PD, MSA, and PSP, to reflect clinical reality), and provided sufficient data on individual patients to calculate study-specific and pooled diagnostic measures. Clinical diagnosis after follow-up served as the reference standard in these studies. Summary receiver-operating-characteristic curves and estimates of diagnostic performance were calculated by metaregression with the R packages “mada” (version 0.5.7.; <https://CRAN.R-project.org/package=mada> (1)) and “meta” (<http://meta-analysis-with-r.org/> (2); <https://www.R-project.org/> (3)), in which the PET analysis method was used as the covariate (i.e., observer-dependent visual reads supported by voxel-based statistical analyses or observer-independent automated classifications). This also in part accounts for overlapping patient populations between the 2005 (4) and 2010 (5) studies of the Eidelberg group and between the 2013 (6) and 2016 (7) Tripathi papers, where an observer-dependent visual analysis supported by SPM was used in the earlier studies and an observer-independent automated classification based on metabolic covariance patterns was used in the later studies.

## REFERENCES

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