

Peer Review File

Article information: <https://dx.doi.org/10.21037/ccco-23-92>

Reviewer A

Comment 1: First, in the title the authors need to indicate that this is a literature review. The authors need to consider whether the term “Clinical perspective on the application” is appropriate, which should be more accurate and reflect the focuses of this review.

Reply 1: Thank you for your crucial suggestion. Following your key suggestion, we have considered the term “Clinical perspective on the application” in the title of the manuscript carefully, and eventually revised the title to “Clinical status and perspective on the application of immunotherapy combined with chemotherapy in advanced non-small cell lung cancer: a systematic review”. The revised title indicates the type of article as a literature review and may elucidate the primary research content of the article.

Changes in the text: Title in Page 1, Lines 1 and 2.

Comment 2: Second, the abstract is not adequate, since the authors did not explain the clinical needs for and questions to be addressed in this review. The authors did not describe how the studies reviewed were searched, how these studies were reviewed, and what the main findings from this review are. The authors also need to briefly comment the unaddressed questions and propose possible research directions.

Reply 2: We sincerely express our gratitude for your pivotal suggestion. The abstract of our manuscript has been reconsidered thoughtfully and then revised. The revised abstract contains the content of the literature search strategy, the main issues discussed, and the challenges nowadays faced, which may assist the readers in facilitating a better understanding of the research content and its significance.

Changes in the text: Abstract in Pages 2 to 3, Lines 38 to 47.

Comment 3: Third, in the main text of this review, the authors did not explain the clinical needs for this review, how the studies reviewed were retrieved, and how these studies were qualitatively analyzed. The review should not be limited to descriptive. Please also review the methodology and analyze their limitations and knowledge gaps. In the final conclusion part, please have an overall comment on the unaddressed issues in relation to the clinical implications of immunotherapy combined with chemotherapy for advanced non-small cell lung cancer and suggest possible solutions for these questions.

Reply 3: Thank you for your valuable suggestion. In accordance with your proposal, we have initially incorporated a section on the search strategy and selection criteria in order to elucidate the methodology of bibliographic retrieval. Subsequently, the conclusion part has also been rewritten, with an overall comment concerning the clinical implications of immunotherapy combined with

chemotherapy for advanced NSCLS and prospects for immunochemotherapy development in the future added to the revised manuscript. However, the methods of the research reviewed in our article were found to be highly similar and the relevant details had been comprehensively expounded upon in the preceding reviews, thus, we have decided not to cover these contents in our article. We would like to extend our heartfelt gratitude once again for your valuable suggestion and hope that our earnest revisions and explanations will be accepted by you.

Changes in the text: Page 4, Lines 79 to 84; Page 5, Lines 85 to 93; Page 21, Lines 448 to 458; Page 22, Lines 459 to 462.

Comment 4: Finally, please consider to cite several related papers: 1. Hirata T, Hakozaiki T. Efficacy of second-line chemotherapy after immunotherapy in advanced non-small cell lung cancer. *J Thorac Dis* 2023;15(7):3554-3556. doi: 10.21037/jtd-23-858. 2. Ge X, Zhang Z, Zhang S, Yuan F, Zhang F, Yan X, Han X, Ma J, Wang L, Tao H, Li X, Zhi X, Huang Z, Hofman P, Prelaj A, Banna GL, Mutti L, Hu Y, Wang J. Immunotherapy beyond progression in patients with advanced non-small cell lung cancer. *Transl Lung Cancer Res* 2020;9(6):2391-2400. doi: 10.21037/tlcr-20-1252. 3. Indini A, Rijavec E, Bareggi C, Grossi F. Immunotherapy for locally advanced non-small cell lung cancer: current evidence and future perspectives. *Curr Chall Thorac Surg* 2021;3:25.. 4. Liang H, Yang C, Gonzalez-Rivas D, Zhong Y, He P, Deng H, Liu J, Liang W, He J, Li S. Sleeve lobectomy after neoadjuvant chemoimmunotherapy/chemotherapy for local advanced non-small cell lung cancer. *Transl Lung Cancer Res* 2021;10(1):143-155. doi: 10.21037/tlcr-20-778.

Reply 4: Thank you for the relevant and significant literatures provided by you. We have meticulously read each of these literatures and conducted a thorough analysis of their findings. Subsequently, four articles have been cited in the appropriate chapters, thereby enriching the content of the relevant sections in the revised manuscript.

Changes in the text: Page 4, Line 68; Page 14, Lines 301 to 304; Page 16, Lines 341 to 344.

Reviewer B

Comment 1: The author's name cited in text should be consistent with the reference.

- Professor Chen et al. divided tumors into four types: PD-L1-/TIL-(type I), PD-L1+/TIL+(type II), PD-L1-/TIL+(type III), and PD-L1+/TIL-(type IV) based on the expression of PD-L1 in tumor cells and tumor-infiltrating lymphocytes (TIL) (43).

Reply 1: We deeply appreciate your meticulousness. Follow your reminder, we have checked our manuscript and references carefully and confirmed that the author's name cited in text is consistent with the reference.

Changes in the text: Page 18, Line 375.

Comment 2: All abbreviations should be spelled out on first occurrence in Abstract/ Highlight Box/Main Text.

Reply 2: Thank you for your pivotal suggestion. In the revised manuscript, we have confirmed that all abbreviations are spelled out on first occurrence. We sincerely appreciate your meticulous comments and diligent efforts in assistance of enhancing our manuscript.

Changes in the text: Page 2, Line 25; Page 4, Lines 64 to 66; Page 11, Lines 230 to 237; Page 13, Lines 273, 274; Page 14, Lines 283, 284; Page 17, Lines 362, 363; Page 19, Lines 400, 402; Page 20, Line 422.