Peer Review File

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<mark>Reviewer A</mark>

1. I suggest reviewing the first sentence from a grammatical point of view, for example, "Artificial intelligence has long captivated the imagination. Most recently, a number of large language models (LLMs) have been launched, including ChatGPT (OpenAI/Bing), Bard (Google/Alphabet), and LLaMA (Meta).

Reply: this was adjusted Changes in text: changes as above

clinical responses (3).

- 2. It could be interesting to compare the results of the authors' research with the ones of a similar article, "Quality of information and appropriateness of ChatGPT outputs for urology patients," DOI: 10.1038/s41391-023-00754-3. Reply: This article was included in discussion Changes to text: In a similar project, 100 urology case studies were presented to ChatGPT 3.5 and found only 52% of responses appropriate. This suggests that the models have a long way to go for trustworthy direct patient facing
- 3. In general, to make the editorial more interesting, it would be nice to include information and opinions on the role of artificial intelligence obtained from the numerous articles available in literature.

Reply: More articles were included. However this is meant to be a short commentary on a specific article and as such, expanding substantially felt incorrect. I did expand discussion of novel ways to improve chat bots in a urologic specific manner.

Changes to text: Additionally, a process termed retrieval-augmented generation has LLMs use specific datasets or trusted technical or policy documents as external sources that can be cited by the LLM output. For instance, a urology specific chat bot was developed based on the EAU Oncology guidelines. When built directly on guidelines, it is no surprise that accuracy of response to patient queries improved (4).

<mark>Reviewer B</mark>

A reasonable commentary, but misses an opportunity for a more in-depth discussion on certain arenas, such as the ongoing discussion around evaluation of LLM output and the use of AI to generate training data for AI models. I have noted a number of papers/commentaries comment on the readability of LLM output, this of course as the authors of this editorial have mentioned, are easily amended through appropriate prompts/meta-prompts. It is a good opportunity to highlight such misconceptions and the stochastic nature of many of these models. The

emerging trend of RAG-models should also be discussed, instead of just finetuning, which is computationally and financially expensive.

Reply: excellent suggestion for the RAG model and citation. This has been done

Changes to text: Additionally, a process termed retrieval-augmented generation has LLMs use specific datasets or trusted technical or policy documents as external sources that can be cited by the LLM output. For instance, a urology specific chat bot was developed based on the EAU Oncology guidelines. When built directly on guidelines, it is no surprise that accuracy of response to patient queries improved (4).

<mark>Reviewer C</mark>

It is a contemporary and well-written editorial that excellently introduces the various aspects of using artificial intelligence in medicine, particularly in urology. I have no objections and recommend the acceptance of the editorial.

Perhaps it could be added that the next step for LLMs (Large Language Models) doesn't solely lie in fine-tuning the models or improving algorithm training, but also in the development of domain-specific LLMs. In urology, there already exists such a model called 'Uro_Chat,' which has been published and validated (Khene ZE, Bigot P, Mathieu R, Rouprêt M, Bensalah K; French Committee of Urologic Oncology. Development of a Personalized Chat Model Based on the European Association of Urology Oncology Guidelines: Harnessing the Power of Generative Artificial Intelligence in Clinical Practice. Eur Urol Oncol. 2023 Jul 18:S2588-9311(23)00139-6. doi: 10.1016/j.euo.2023.06.009. Epub ahead of print. PMID: 37474402. // May M, Körner-Riffard K, Marszalek M, Eredics K. Would Uro_Chat, a Newly Developed Generative Artificial Intelligence Large Language Model, Have Successfully Passed the In-Service Assessment Questions of the European Board of Urology in 2022? Eur Urol Oncol. 2023 Sep 14:S2588-9311(23)00178-5. doi: 10.1016/j.euo.2023.08.013. Epub ahead of print. PMID: 37716835.).

Reply: I appreciate the references and did include the most relevant.

Changes to text: For instance, a urology specific chat bot was developed based on the EAU Oncology guidelines. When built directly on guidelines, it is no surprise that accuracy of response to patient queries improved (4).