

## Peer Review File

Article Information: <https://dx.doi.org/10.21037/apm-23-492>

### Review comments

#### Reviewer A

Introduction:

Line 33: What do you mean by "sicker than the non-Veteran population?" I think more specifics should be provided so the reader has more context (ie. increased mortality? more hospitalization?)

*Response: We added more specifics.*

Line 34-37: This sentence should be shortened or split into 2 sentences; it is hard to follow.

*Response: Change was made.*

Line 61: What do you mean by "Veteran patients with challenges in the physical or sensory domains?" Please specify.

*Response: We re-wrote this phrase to be clearer.*

Veterans with geriatric syndromes:

Line 72: Consider adding what aspects of their ambulatory care were of worse quality? The specifics would help strengthen the argument.

*Response: Added a phrase to clarify that this was based on a comprehensive quality of care score.*

Line 77: If available, please quantify how the prevalence of frailty in Veterans has increased. This should help strengthen the argument for palliative care.

*Response: Adjusted this sentence to clarify the time frame of the data and how it has changed over time. The study from which this data comes was published in 2019 but only comments on frailty data from 2002-2012. Other more recently published studies only include frailty data up until 2014 which did not significantly differ from the 2012 data when using the same frailty index to compare, so we did not include the study with 2014 data (Orkaby 2023 <https://doi.org/10.1093/gerona/glad157>).*

Line 116: Add "though the evidence of OF low certainty."

*Response: This word was added to the sentence.*

Lines 134-137: Did this group of patients receive palliative care consultation? The way it is written is unclear.

*Response: In this study, 61% of Veterans with dementia received palliative care consultation, but the authors did not comment on the overlap of how many Veterans*

*with dementia in the other groups had palliative care consultations (ie those who had DNR orders, died on hospice, or whose families reported excellent care). We made edits in our manuscript to hopefully make the synopsis of this study more clear.*

Lines 1137-139: Is this study in a patient population with dementia? Please specify since the next sentence applies this info to the dementia population.

*Response: Yes, this study was for a patient population with dementia; we have updated the sentence to reflect that.*

Veterans with mental health diseases:

Lines 170: "Mental health disorders" is the preferred term over "mental health diseases".

*Response: Thank you, we made this change.*

Line 201: In the sentence, "50% great than for non-Veteran US adults," delete "for."

*Response: Change was made.*

Line 202: "With Veterans who HAVE seen."

*Response: Change was made*

Veterans with concerns in physical and sensory domains:

Line 256: "Prisoners OF war" instead of "prisoners OR war".

*Response: Change was made*

Veterans with other serious illnesses:

Line 269: Do you mean "suggest THE NEED FOR further evaluation of Veterans' conditions"?

*Response: yes, thank you, we made this change.*

Line 276: Please add more context to the statement "most especially hepatocellular carcinoma" since this risk has not previously been discussed (or consider deleting "most especially" since you discuss the risk of liver disease later in the manuscript.

*Response: Removed the phrase "most especially"*

Line 284: I assumes you mean "presumptive diagnoses" rather than "presumption"

*Response: yes, thank you, we made the change.*

Line 286: Consider adding "RECOGNIZING liver disease" so the sentence is clearer.

*Response: Thank you for this suggestion, we made the change*

Lines 293-295: Please provide a citation for these two sentences.

*Response: The citation was the same for the 3<sup>rd</sup> sentence, however since that 3<sup>rd</sup> sentence is more common medical knowledge, we moved the citation to the end of the two sentences that you referred to.*

Line 297: Diabetes is more prevalent in US Veterans compared to what other group? Non-Veterans?

*Response: Added phrase to clarify that this is compared to the general US adult population*

General notes:

- Please read through the manuscript and add commas to shorten run-on sentences. This will help increase the readability of the manuscript.

*Response: We have done this, thank you.*

- Make sure you either capitalize all uses of "Veterans" or lower case all uses of "veterans"

*Response: These changes have been made*

- The section titled "Palliative Care Considerations for Veterans with Other Serious Illnesses" discusses important aspects of caring for Veterans but does not include much information about how palliative care is important in the variety of conditions mentioned. Discussing information about palliative care for these conditions would help tie this paragraph back to the overall theme of the paper.

*Response: Thank you for pointing this out, we have added discussion about palliative care aspects of these conditions.*

- The overall message of the manuscript is well stated and important for readers of this journal. Making the above changes will strengthen the message of the manuscript.

- If possible, consider adding links to programs mentioned in the supplement so readers can access additional information.

*Response: Thank you for this suggestion, we have done this.*

## **Reviewer B**

I enjoyed reading this paper and palliative care services specific to the needs of Veterans is an important topic. However, there are some issues that need to be addressed. See below.

Service-connected disability and service-connectedness is hyphenated. (VHA convention)

*Response: this phrase has been updated to include hyphens throughout.*

The paper is missing citations throughout.

Examples:

Lines 215-218: The Whole Health program is an all-encompassing view of one's health, aimed at identifying what is most important to each Veteran and what provides purpose in life. Many feel that the Whole Health initiatives will become the future of healthcare, with Whole Health interventions aimed at optimizing mental health and resiliency.

*Response: Thank you, citation added.*

Lines 297-298: Diabetes is more prevalent in US Veterans. The diagnosis of diabetes was associated with obesity, lower education level and poverty.

*Response: Citation added.*

I see that, overall, the last paragraph of each section contains information related to VHA initiatives. Consider creating a separate section for all the content regarding VHA services (HBPC, Geri-PACT, Whole Health etc.) since many services address a wide variety of palliative care related conditions.

*Response: Thank you for this comment, and we understand your point. After carefully considering, we decided to keep the information regarding VHA initiatives within the individual sections to which they are most relevant, as we felt this added to the strength of discussion in the individual sections. Despite this, we recognize that many VHA initiatives span a variety of palliative care related conditions, and we hope that readers will recognize that as well.*

Consider including more information on how non-VA providers can better coordinate with VA providers in the context of palliative care.

*Response: We have been extremely fortunate at our Philadelphia location to be able to collaborate with numerous VA and community providers. We created a direct phone line for the Palliative Care team and have built our staffing and educated our colleagues, both VA and non-VA, to call us with any questions or concerns. We believe that we have been able to use VA policies to their absolute fullest to obtain the best possible care for Veterans with the need for Palliative Care and Hospice.*

*As we've communicated with many other VA locations we have found that often they have not yet been able to create the structures and practices that we feel so fortunate to have. Therefore, the best and most accurate information that we can provide would be to contact the local Palliative Care providers by calling the local VA. We have included this information in the manuscript.*

The authors did a nice job highlighting the unique health care needs of Veterans but did not discuss the unique social determinants of health faced by Veteran populations and how these might impact palliative care needs.

*Response: Thank you for this important comment. We have added discussion about SDOH faced by Veterans and their impact on palliative care needs.*

## **Reviewer C**

We think overall the manuscript is well written and succeeded in covering a rather broad topic specific to veterans.

After our discussion, we suggest the following edits

1. Instead of switching between use of ‘Veteran patients’ and ‘veterans’, would suggest switching entirely to veterans (rather than veteran patients) which seems redundant given the context.

*Response: This change has been made*

2. Suggest addition of a relevant reference in the section on page 6 starting line 208 where they talk about Whole Health approach to care:

Krist AH, South-Paul JE, Meisner M. Achieving Whole Health for Veterans and the Nation: A National Academies of Sciences, Engineering, and Medicine Report. JAMA Health Forum. 2023;4(5):e230874. doi:10.1001/jamahealthforum.2023.0874

*Response: Thank you for this reference, we have incorporated it.*