

## Peer Review File

**Article information:** <https://dx.doi.org/10.21037/med-21-47>

### Review Comments

Thank you for the opportunity to revise and resubmit our manuscript entitled “**Multidisciplinary approach for rare thoracic tumors in the pandemic COVID-19 scenario**” to Mediastinum.

We thank the reviewer for the constructive evaluation of our manuscript.

We have revised the manuscript to address all the insightful comments of the reviewer. Particularly, we eliminated the redundant sections; all the statements not supported by sufficient evidence, and further focused the discussion on the main topic. We tried to be as concise as possible for the interests of the readers, as suggested by your Editorial Team and by the reviewer.

We report below a point-by-point response to reviewer’s comments.

**Comment:** This manuscript is listed as an "editorial commentary", and therefore has no abstract, but seems quite long for an editorial. With 24 references, it looks more like a genuine article, for which an abstract is required.

**Reply:** Despite long, the manuscript was within the limit of length and number of references for an Editorial, as per Journal guidelines. However, we thank the reviewer for this observation and substantially shortened the length of the manuscript and reduced the number of references (now 18).

**Comment:** What is the source of table 1?

**Reply:** Table 1 was removed, as it was not sufficiently supported by published evidence.

**Comment:** The idea behind this article is interesting, but the way it is written is rather chaotic, the authors repeating themselves, information not clustered but spread through the article. I also read too many statements without enough evidence provided. The manuscript also comes quite late during the pandemic, as most clinicians will

already have reestablished their practice.

I would rewrite this article and systematically address the evidence:

What is known about the course of Covid in these tumors?

Are there any guidelines/evidence on postponing treatment?

Is there evidence on when to restart?

What is the evidence for CS, Ab? ...

Are you still going to the ICU in metastatic disease? ...

The narrative character of the manuscript now makes it less clear as it is all mixed up.

**Reply:** We thank the reviewer for this appropriate and useful comment. We eliminated all the redundant sections and all the statements not supported by sufficient evidence. We also updated the manuscript with the latest available evidence and further focused the discussion on the main topic. We finally substantially re-organized the sequence of the topics, in order to make the information clustered and the manuscript easier to read.

#### MINOR COMMENTS

**Comment 1.** "in the pandemic Covid-19 scenario"

I don't think this is linguistically correct. We are not living in or preparing for a scenario.

**Reply 1.** Thank you for this suggestion, we modified the title as follows "Multidisciplinary approach for rare thoracic tumors during COVID-19 pandemic".

**Comment 2.** Lock down > Lockdown

**Reply 2.** It was corrected in the text.

**Comment 3.** Have been seeing > we have been seeing OR have been seen (it remains a grammatically poor sentence)

**Reply 3.** The sentence has been corrected as follows "have been seen".

**Comment 4.** Referencing is incorrect: sometimes authors are referenced with first name first, some with last name first, some with full first name, some with a single character. This should be uniform across the entire reference list.

**Reply 4.** Thank you for this comment. The reference list was revised as per author's guidelines and shortened.

**Comment 5.** Cancer patients has > have

**Reply 5.** This typo is no longer in the manuscript as it was in a sentence that has been eliminated.

**Comment 6.** There is no evidence that a cancer patient is at increased risk of contracting SARS-Cov-2 infection > please provide reference to support this

**Reply 6.** Thank you for the comment. This sentence was eliminated

**Comment 7.** The results of published studies confirm an increased risk of complications in this specific population. > please provide references to (some of) these studies.

**Reply 7:** Thank you for your observation. This sentence was eliminated.

**Comment 8.** Rare tumors are heterogeneous > heterogeneous in what?

**Reply 8.** Thank you for this careful observation. The sentence was eliminated.

**Comment 9.** In the current pandemic scenario > remove "scenario" (see previous comment)

**Reply 9.** We removed the word "scenario".

**Comment 10.** Patients with > patients with

**Reply 10.** We corrected the typo, please see in the text

**Comment 11.** masses > mass

**Reply 11.** We corrected the typo, please see in the text

**Comment 12.** line 60: remove AND

**Reply 12.** The word "AND" was removed.

**Comment 13.** COVID-19becomes > COVID-19 becomes

**Reply 13.** We corrected the typo, please see in the text

**Comment 14.** COVID-19has > COVID-19 has

**Rely 14.** We corrected the typo, please see in the text

**Comment 15.** withhold > withheld

**Reply 15.** We corrected this error, please see in the text

**Comment 16.** there ARE no more

**Reply 16:** We corrected this error, please see in the text

**Comment 17.** it has been demonostrated a long course of SARS CoV-2 viral shedding in such patients > a long course ... has been DEMONSTRATED

**Reply 17.** Thank you for the observation. However the entire sentence was eliminated in the revised manuscript.

**Comment 18.** These findings, when not supported by a suggestive clinical scenario, are not signs of infection > I would just write suggestive symptoms

**Reply 18.** We thank the reviewer for this suggestion, however this sentence is no longer present in the revised manuscript.

**Comment 19.** possibility of a chemotherapy > possibility of chemotherapy

**Reply 19.** We remove the “a”.

**Comment 20.** line 72 explains that oncologic treatment cannot always be postponed because of ... and ends with a reason why it should be postponed. > This sentence is grammatically not correct and should be modified.

**Reply 20.** Thank you for your comment. The sentence was modified.

**Comment 21.** line 76 speaks about withholding chemotherapy; the next sentence then considers this the time for life-saving chemotherapy > this sentences are also not correct and should be modified (tip: ask an English speaker to rewrite the entire paragraph).

**Reply 21** Thank you for this comment. The entire paragraph was rewrote.

**Comment 22.** There aren't universally accepted guidelines on when cancer therapies can be safely resumed after a SARS CoV-2 positivity > but this means there are some (disputed) guidelines available? Could you reference these? Discuss them?

**Reply 22.** Thank you for this observation. We re-wrote the entire paragraph.

**Comment 23.** spend at least 24 hours after resolution > spend what? resolution of what? Resolution of symptoms can't be the case, because of improvement suffices according to this sentence.

**Reply 23.** Thank you for this comment. The entire paragraph was eliminated.

**Comment 24.** ICI should be avoided ... whether symptomatic or not [12] > in the next sentence the authors admit that there is hardly any evidence; in that context I would consider avoiding ICI a too strong recommendation

**Reply 24.** Thank you for your observation. We modified the entire paragraph according to updated published evidence and added two new references (references # 10 and 11 in the update reference list).

**Comment 25.** the chemotherapy > chemotherapy

**Reply 25. :** We corrected it.

**Comment 26.** thymic epithelial TET > this is twice the same

**Reply 26.** Thank you, we corrected as follows: "Thymic Epithelial Tumors"

**Comment 27.** COVID-19by > COVID-19 by

**Reply 27.** We corrected this typo.

**Comment 28.** COVID-19 and Covid-19 are used interchangeably > uniformity please

**Reply 28.** Thank you, we uniformly adopted COVID-19.

**Comment 29.** COVID-19management > COVID-19 management

**Reply 29.** We corrected this typo.

**Comment 30.** patients care > patient care

**Reply 30.** We corrected this typo.

**Comment 31.** approval for > approval of

**Reply 31.** We corrected this error.

**Comment 32.** Patients with rare cancer can be managed in the same way with a single dose administration of monoclonal antibodies even in mild cases with the aim of reducing the possibility of severe disease development. > do you have a reference for this or is this the opinion of the authors?

**Reply 32.** We rewrote the entire paragraph according to updated evidence and added a new reference (reference #16 in the update reference list)

**Comment 33.** availability have > has

**Reply 33.** We corrected this error.

**Comment 34.** THE general population

**Reply 34.** We corrected this.

**Comment 35.** the efficacy of vaccination is not clearly demonstrated > do you have a reference for this?

**Reply 35.** Thank you for your comment; we modified the paragraph according to ESMO recommendation.

**Comment 36.** Therefore, vaccination with mRNA vaccines, remains recommended in such patients > recommended by whom?

**Reply 36.** We modified the sentence adding the reference to the ESMO Recommendation (reference # 17 in the update reference list)

**Comment 37.** future prospective > future perspective(s)

**Reply 37.** We substituted prospective with perspectives