

## Peer Review File

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### Reviewer A

In this review, the authors evaluate the role of SBRT in the treatment of solitary pulmonary nodules without pathological confirmation. The topic of this paper is highly contemporary and of particular interest to the readers of the journal. Understandable research questions were posed and answered well, considering the current literature. The title of the article reflects the topic of the paper. The review is systematically presented with a good methodology and is reproducible. The single table in the script clearly summarises the studies on histologically proven and non-solitary pulmonary nodules.

The results are obtained and the conclusions are drawn comprehensibly and reflect the current state of research. The discussion section is very informative and useful for clinical practice.

The references are up-to-date, relevant, and representative of the field.

Overall, this is very good work.

**Bruni : Thank you very much for your review and your suggestions**

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### Reviewer B

In this paper authors described the narrative review of SBRT in treating solitary lung nodule without pathological confirmation. Solitary lung cancer may be treated without pathological confirmation, and it is very important issue for radiation oncologist. Therefore, this is a paper that contains useful information. However, this paper has some problems described below.

Authors described 2-year local control in the abstract, but 3-year local control in the Result section. I think it should be unified to either one.

**Bruni : Thank you very much for your review and your suggestions. I corrected the abstract; now all the study is mainly focused on 3 year local control**

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Are there description of reason for non-pathological diagnosis in the reviewed literature. If there are descriptions, it may be better to summarize them.

**Bruni: I added a sentence in the “results” shortly explaining the main reasons for not-pathological diagnosis of pulmonary nodules**

It is mentioned in the discussion about the possibility of surgery.

It is better to describe how many surgical cases are included in each literature.

Please list in the table if possible.

Bruni: unfortunately all the studies we reported only mentioned that patients were not suitable for surgery in general terms. In each work the distinction between surgical or not surgical nodules was not reported and clear data on that topic are not available. However, our study wants to focus on the suitability of the SBRT treatment, underlying its potential curative intent even in patients without histopathology confirmation. The primary aim of the study was not the comparison between the two different local approach, but just to highlight the chance of an alternative non-invasive approach.

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#### Reviewer C

This seems to be a well-written one that summarized the issue of difficulty in histopathologic confirmation of malignancy in the patients with solitary lung nodule when SBRT is regarded a reasonable alternative to surgery.

Bruni : Thank you very much for your review and your suggestions

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#### Reviewer D

This is a narrative review of using SBRT for solitary solid pulmonary nodules. This review evaluated existing literature on this subject and gave comprehensive discussions. This manuscript gives up-to-date information on this area. It is suitable for publication.

Bruni : Thank you very much for your review and your suggestions

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