

Peer Review File

Article information: <https://dx.doi.org/10.21037/jtd-21-1109>.

Reviewer A:

Comment: This is an excellent overview of the growing activity in thoracic surgery in UAE. Congratulations for your successful effort. However, I don't think that such article take place in this journal. There are no objective data or results (for example: increased number of cases per year, type of procedure, etc...)

Reply: There is no nationwide data collating numbers of surgeries performed in the UAE. We have added a graph of case numbers performed at CCAD and increase in recent years per the recommendation (Graph 1).

Reviewer B:

Comment: The paper is well written and interesting to read.

Reply: We are pleased that the reviewer found our manuscript of interest.

Reviewer C:

Comment: This paper is a presentation which the authors and briefly characterize the development of thoracic surgery in UAE. It is not a strictly scientific study. However it is impossible to not to appreciate the high technology of thoracic surgery in UAE, I would rather prefer to see the results of surgical treatment of lung diseases.

Reply: This was an invited article summarizing the state of Thoracic Surgery in the UAE and hence is not intended to be a scientific manuscript. Please see our response to re- viewer A's comments with regards to data on procedure numbers.

Reviewer D:

Please consider these points that may improve the manuscript.

Comment 1: What percentage of UAE GDP is used for healthcare?

Reply 1: This data is not available, however we have added a sentence clarifying the % of the federal budget spent on healthcare in the UAE in 2020 in the introduction. ("In 2020, 6.9% of the federal budget was allocated to healthcare.")

Comment 2: A timeline showing the key moments in thoracic surgery for UAE would be helpful for readers .

Reply 2: We covered this briefly at the end of Section II and Section III of the manuscript.

Comment 3: Do they have a graphical representation of how the number of thoracic cases have changed in last 5 or 10 years in UAE? May be also a chart of how the type

of cases they are undertaking and the surgical approach (open, VATS, uniportal, robotic) have changed?

Reply 3: This information is not available for the UAE. There is no nationwide registry for thoracic surgery cases. However, our enquiries have found that approximately 800 cases including chest trauma were performed in 2020. Older data is lacking. Most of them are VATS, Robotic thoracic surgery is still under development at present.

Comment 4: Which patient population do you screen for lung cancer?

Reply 4: The UAE specific criteria for lung cancer screening are UAE DOH criteria, have been added to section IV.

Comment 5: Any data on the number of patients treated in the hybrid theatre? The percentage of different procedures performed in the hybrid theatre?

Reply 5: We have added a figure (Figure 1) demonstrating thoracic surgery numbers at CCAD. The hybrid program is in its infancy and thus far the number of hybrid cases performed has reached 20 this year to date.

Comment 6: Can the authors make the conclusion more succinct, in particular the history and choice of Cleveland Clinic may fit better into sections II and III.

Reply 6: We feel that the conclusion brings the manuscript to a close nicely.

Comment 7: Any conflict of interest from the authors to declare relating to this article?

Reply 7: The authors have no conflict to declare other than being employees at Cleveland Clinic Abu Dhabi.

Reviewer E:

Comment: In this perspective (?) paper, the authors described the changes in contemporary thoracic care in UAE in aims of delineating plans for the future for this country. This paper perhaps is perceived as propaganda rather than scientific paper as it is filled with somewhat self-boasting words such as ‘advanced’, ‘innovative’, ‘world-leading’, ‘ambitious’ and with a cliché “patient first” derived from CCF. I do not find any objective data/analysis to deliver significant scientific values from this paper. The paper, however, may be of interests for next-generation surgeons in UAE and other countries in their developing stages in socio-medical environments.

Reply: This was an invited article summarizing the state of Thoracic Surgery in the UAE and hence is not intended to be a scientific manuscript.

Reviewer F:

Comment 1: Dr. Souilamas has submitted the manuscript entitled “Thoracic Surgery United Arab Emirates.” I read this manuscript with the greatest interest. The authors introduced the significant contributions which Cleveland Clinic Abu Dhabi has provided to people in UAE. As we can expect, UAE is developing at the fastest pace, and the quality of medicine and research is also advancing at the same speed.

Unfortunately, this manuscript failed to provide actual/scientific data and is primarily narrative. Even with the significant contribution of Cleveland Clinic, the authors need to be prudent to write specifically about what Cleveland Clinic Abu Dhabi offers in more than half of the manuscript when submitting to the scientific journal.

Reply 1: This was an invited article summarizing the state of Thoracic Surgery in the UAE and hence is not intended to be a scientific manuscript. It is indeed narrative by design.

Questions/Concerns

Comments 2: Authorship: With this type of manuscript, I could not find how thirteen authors contributed to writing. The correspondence authors should provide the justification and how each author contributed to this manuscript.

Reply 2: The journal guidelines do not require listing authors’ contributions for this type of manuscript and hence this was not included in the submission.

Comments 3: Abstract has to be the summary of this article and have to be informative enough. This abstract may not provide sufficient information to give some insights about this topic to the readers who read only this abstract. This abstract seems “introduction.”

Reply 3: We feel that the abstract adequately summarizes what the manuscript discusses.

Comment 4: The twelve board surgeons are board-certified abroad?

Reply 4: The 12 thoracic surgeons in the UAE are board certified outside the UAE, mostly in the USA and Europe.

Comment 5: How many cases are referred outside UAE every year? What condition(esophageal cancer, lung cancer, needs for a lung transplant?) leads to referral outside UAE? Does the government cover this cost or private insurance for the rich people?

Reply 5: The exact numbers are not available, however since CCAD opened the number of thoracic surgery cases referred abroad has dramatically reduced to a few cases per year. Every request for treatment abroad submitted to the Health Authorities is re-

ferred to the CCAD thoracic surgery department to confirm that treatment is not available in the UAE. If treatment is available in the UAE, requests for travel are now declined.

Comment 6: What is the allocation system of organ donation? Were there any specific law amendments before starting organ transplantation, especially related to brain death?

Reply 6: Law amendments are mentioned in section VI. As the only lung transplant centre in the UAE, the transplant committee at CCAD uses the Lung Allocation Score (LAS) and clinical urgency criteria to allocate. When there are no suitable recipients the organs are offered to the Saudi Lung Transplant group.

Comment 7: Could you provide the annual thoracic surgery cases since Cleveland Clinic Abu Dhabi opened for each thoracic disease? How many hybrid cases performed each year?

Reply 7: We have added a figure (Figure 1) demonstrating thoracic surgery numbers at CCAD. The hybrid program is in its infancy and thus far the number of hybrid cases performed has reached 20 this year to date.

Comment 8: What is the protocol for lung cancer screening? How are the patients screened for the needs of CT scanning? Does the government offer chest X-rays or chest CT at certain ages? The UAE lung cancer screening program described after line 146 needs reference or has to be described in detail.

Reply 8: UAE DOH Lung Cancer screening criteria

Comment 9: How many patients were placed on ECMO for COVID-ARDS, and how many patients were weaned from ECMO /discharged from the hospital? Lung transplantation for COVID ARDS was performed in Abu Dhabi? How many lung transplants are performed? There are ambiguous descriptions in this manuscript, even for the case number from Cleveland Clinic Abu Dhabi. A scientific manuscript needs the actual numbers to make its evidence robust.

Reply 9: This was an invited article summarizing the state of Thoracic Surgery in the UAE and hence is not intended to be a scientific manuscript. Numbers & survival of VV ECMO and lung transplant were added in the main article.

Comment 10: Education and Research section needs the description of these outside Cleveland Clinic Abu Dhabi because this manuscript is focused on thoracic surgery in UAE, not Cleveland Clinic Abu Dhabi.

Reply 10: We have discussed the Emirates Thoracic Society as a pan-UAE institution which oversees various educational and research activities for thoracic surgery in the UAE.

Comment 11: Need revision for citation—too many citations from webpage including one from youtube.

Reply 11: We have revised the references