

Peer Review File

Article Information: <https://dx.doi.org/10.21037/jtd-23-1924>

Reviewer A

Simple and straightforward summary.

Reply: Thank you for your comment.

Changes in text: None.

Reviewer B

I would like to thank the authors for this editorial on a hot topic. This editorial describes the recent development of anesthesia in video assisted thoracoscopic surgery where the classic thoracic epidural analgesia was used as gold standard. The search for regional anesthesia techniques with fewer side effects and complications has led Wu to do a RCT on a modified paravertebral technique. In this editorial the authors describe different aspects of this study; including the limitations of the Chinese setting and the lack of extrapolating this technique to non-videoscopic procedures.

In the last alinea, the authors encourage anesthesiologists and thoracic surgeons to undertake more RCT's on other regional anesthesia techniques in thoracoscopic procedures. I hope that the authors can elaborate a little more on what they hope these studies will add to current patient care. What is it that we are looking for?

Reply: Thank you for this comment and for highlighting the limitations of this study including the small sample size, the population, and the difficulty in extrapolating this technique to non-VATS procedures. Further investigation would allow us to overcome some of these limitations and offer a tailored approach to patient care by helping us identify which patient populations would most benefit from these unique techniques.

Changes in text: Added “in order to elucidate which patient populations derive the most benefit from these unique techniques” to the final line of the manuscript.

Reviewer C

Please check this following sentences.

1. Line 26, the authors described the current work of Wu and colleagues. Was that reference 1? (Wu Z, Fang S, Wang Q, Wu C, Zhan T, Wu M. Patient-Controlled Paravertebral Block for Video-Assisted Thoracic Surgery: A Randomized Trial. The Annals of thoracic surgery. 2018;106(3):888-94). The authors should add the corresponding reference in the end of this sentence. Please check the numbers of patients of Wu et al., these numbers of patients should be 171 instead of 176 patients. Patients were allocated to receive either modified PVB or IVPCA, not TEA.

Reply: Thank you for your comments. The current work by Wu and colleagues is Wu Z, Wang Q, Wu C, Wu C, Yu H, Chen C, He H, Wu M. Paravertebral vs Epidural Anesthesia for Video-assisted Thoroscopic Surgery: A Randomized Trial. The Annals of thoracic surgery. 2023;116(5):1006-12. The reference has been updated. This study had 176 participants and were randomized to modified PVB vs TEA.

Change in text: Reference 1 was added to reflect the appropriate cited study.

2. Line 29, Nonetheless, block failures, hypotension, and urinary 30 retention rates were substantially more frequent in the TEA arm. Please check this sentence. If this referred to reference 1.

Reply: Thank you for highlighting this.

Changes to text: This refers to reference 1 and a citation has been added to reflect this.

3. Line 29, Nonetheless, block failures, hypotension, and urinary 30 retention rates were substantially more frequent in the TEA arm. If the authors meant to reference 1. The incidence of vomiting and hypotension in PVB arm was significantly lower. Please check this information.

Reply: Thank you for highlighting this.

Changes to text: This refers to reference 6 and a citation has been added to reflect this. The statement about vomiting has been removed as PONV was not statistically higher in the TEA group.