

Peer Review File

Article Information: <https://dx.doi.org/10.21037/tlcr-24-10>

Reviewer A

Comment 1: I think DLL3 might be promising target for SCLC treatment, and CAR T against DLL3 will become the alternative treatment option in the near future. However, there are some limitations of CART to solve like immune reaction especially in allogeneic CART and target heterogeneity. This paper reflects diverse respects of CART against DLL3 like efficacy, toxicities, and limitations. For those reasons, it is worthy of acceptance.

Reply 1: Thank you taking the time to read our paper and for the kind comment

Changes in the text 1: no changes

Reviewer B

Comment 2: The authors discuss a study recently published in Clinical Cancer Research by Zhang et al., which described the development of allogeneic CAR T cells targeting DLL3 for treatment of patients with small cell lung cancer (SCLC). In that study, a large panel of anti-DLL3 scFv-based CARs were characterized for both in vitro and in vivo activity. The authors prove the preclinical efficacy and safety supporting further evaluation of DLL3 CAR T cells as potential clinical candidates for the treatment of SCLC, a deadly disease with limited treatment options so far.

The authors of the editorial comment are experts in the field and can provide an independent judgement of the above approach from an academic point of view. The present a broad overview on the potential issues of CAR T based therapies, and on how the above mentioned study by Zhang et al tackled these issues. Besides some minor points the editorial comment can be published in its present form.

Reply 2: Thank you taking the time to carefully read our paper and for your kind comment.

Changes in the text 2: no changes in the text

Comment 3: The minor issues are:

- 1) Be consistent in spelling either CART, CAR-T or CAR T throughout the article (latter preferred)
- 2) line 23: has not been successfully instead of have not been successfully
- 3) line 25: lack of highly specific targets instead of lack of a highly specific targets
- 4) line 46: TRAC add full name
- 5) line 50: revise sentence (add "diminish" HVG rejection?)
- 6) line 57: it does make them (instead of the) more susceptible?
- 7) throughout the text: on-target and off-tumor instead of on target and off tumor

Reply 3: Thank you for ensuring the consistency of the text, accuracy of terms and spotting some typos.

Changes in the text 3: All of those have been corrected in the main text using the Track Changes tool in Word.