

Peer Review File

Article information: <https://dx.doi.org/10.21037/shc-22-23>.

Reviewer A:

Thank you for describing the thoracoplasty plombage literature and also the novel Kinchu method.

Some questions/comments:

Comment 1: Can the authors show some operative pictures both real photos as well as diagrams to show the different procedures, especially the Kinchu method? this would be very helpful to readers

Reply 1: We have added Fig.1 and Fig.2 which are showing diagrams on the extrapleural method and the Kinchu method. However, we do not have real photos.

Comment 2: Also do the authors have data for their own results with the Kinchu method vs. other plombage strategies?

Reply 2: We are very sorry; we have data for our own results.

Comment 3: Can the authors go into further risk of infection with Kinchu method and incidence of intrapleural infection with the "pooled" blood?

Reply 3: There were no report on infection of intrapleural pooled blood. Under negative pressure, the pooled blood is absorbed and disappear, and no further risk of infection with Kinchu method, so that this is an advantage of this method.

Comment 4: Also can the authors specify their specific postop protocol and management plan for the Kinchu method?

Reply 4: Postoperative management of the Kinchu method is only the continuous suction drainage under negative pressure, and the expanded lung was confirmed. So, we do not have postoperative protocol particularly. Specifically, we added sentences in the end of 1st paragraph in "Tips on surgical technique and perioperative management".

Reviewer B:

Comment 1: The authors describe the technique for modified air plombage. This technique, although probably helpful in very specific cases, is unlikely to be routinely utilized in everyday practice owing to the morbidity associated with it. For the most part, the lung does re-expand and fills the remaining space after a resection. However, the description of this technique could be of benefit to the larger audience. If the authors have data of their own, it would be of benefit to describe the outcomes of this technique in their own hands.

Reply 1: We are sorry that we do not have our own data.

Comment 2: Otherwise, if there is any more recent literature on the topic, it would be of benefit to report it here - the only papers discussed are from the 1950s.

Reply 2: There have no recent literature on PubMed. The paper we can get on Kinchu Method is in these time.

Comment 3: Finally, the authors should consider including images or perhaps a video of their technique. This is especially helpful when describing a technique that is not routinely performed by most thoracic surgeons.

Reply 3: We have added Fig.1 and Fig.2 which are showing diagrams on the extrapleural method and the Kinchu method. However, we do not have real photos.

Reviewer C:

Comment: We congratulate the authors on their manuscript entitled “second surgery for complications of major pulmonary resection: The knack of air plombage in thoracoplasty”. Please find our major comments below.

General remark: The article is submitted as a review article. However, isn't it more a best evidence topic? It may even be considered an expert opinion paper. In addition, the article is not presented with a clear aim/objective, and lacks a beginning and end which is connected by the middle part (including methods and results). Moreover, the study lacks discussion. The given info is not necessarily wrong, but the above is lacking as a result of which the clinical relevance/significance and impact is not clear. i.e., what does this paper add to the existing literature?

Reply: This is invited paper on a review article on “The knack of thoracoplasty: Air plombage” to the Special Series “Second Surgery”. Therefore, we cannot describe it so far.