

## Peer Review File

Article information: <https://dx.doi.org/10.21037/shc-23-26>

### Review Comments

Thank you for your interesting review.

I think it will be very useful for readers.

Could you please add your comments to the points below?

1. data after middle lobe resection
2. data after segmentectomy compared to lobectomy

**Reply 1 and 2: Dear reviewer, thank you for your comments. We proceeded to add notions about the adaptive compensations in middle lobectomies and pulmonary segmentectomies in the text. Thank you for your suggestions.**

**Changes in the text: from page 8 r. 29 to page 9 r. 13.**

### Editorial Comments

1. Please modify the Title to be identified as a narrative or literature review. For example, POSTOPERATIVE PULMONARY COMPENSATION AFTER LUNG CANCER SURGERY: A SHIFT TOWARDS A MODERN AND COMPREHENSIVE MODEL. A NARRATIVE REVIEW.

**Corrections made.**

2. Please provide explanation for the symbol in **Authors**.

**Authors:** Mirko Barone1\*, Regina Frontera2,3†, Rita Vaia Liouras2,3, Luigi Guetti1, Ivan Dell'Atti2, Luigi Vetrugno 2,3, Felice Mucilli1,3, Salvatore Maurizio Maggiore2,3¶

The symbol \* refers to the Autor for contacts.

During the review process, my affiliation changed. Please make changes.

3. In the text, the citations of references should be in round brackets with a space before. Please check through and revise. Where more than one number is required, they should appear consecutively [e.g., “women (1,2)”; “radical therapy (3)”].

Lung cancer is the second most common neoplasm and the first cause of cancer-related death in both sexes with a projected increasing incidence, especially in women [1,2]. A straightforward surgery is mandatory for early-stage Non-Small Cell Lung Cancer (NSCLC) and pulmonary lobectomy represents the gold standard approach for radical therapy [3]. However, anatomical resections result

4. In the reference list, sources should be referenced according to the Vancouver reference style. The titles of journals should be abbreviated according to the style used in Index Medicus. For reports with up to three authors, all the author names should be listed. However, if a report has more than three authors, the first three authors should be listed followed by “et al.”

Example 1 ( $\leq 3$  authors):

McLeer-Florin A, Lantuéjoul S. Why technical aspects rather than biology explain cellular heterogeneity in ALK-positive nonsmall cell lung cancer. *J Thorac Dis* 2012;4:240-1.

Example 2 ( $> 3$  authors):

Lin X, Li W, Lai J, et al. Five-year update on the mouse model of orthotopic lung transplantation: Scientific uses, tricks of the trade, and tips for success. *J Thorac Dis* 2012;4:247-58.

**Corrections made.**