

Peer Review File

Article information: <https://dx.doi.org/10.21037/vats-22-10>

Review comments & responses

Comment 1: Title

"current status" Please specify the timeframe or country (if applicable), e.g., "Lung cancer screening: current status in the UK in 2022".

Response 1:

We thank the reviewer for their insightful and constructive comments, and we have attempted to improve the manuscript accordingly.

The title has been amended to better set it in the current point in time, as well as to describe the nature of the review: "*Lung cancer screening in 2022: a narrative review*"

Comment 2: Abstract (200-350 words)

The abstract is too short and not informative enough. It is suggested to rewrite it.

Response 2:

A structured abstract has now been added (229 words).

Comment 3: Introduction

(1) Please add citations to back up the claims: "Encouragingly, the proportion of patients with lung cancer undergoing surgery in the UK, although low, is increasing" (Lines 54). Please check the entire manuscript to address similar concerns.

(2) To better highlight the value of this review, we suggest the authors explain the rationale for reviewing the current status of lung cancer screening. For example, what is the significance (update or new findings?) and objective of this review? The authors could clarify it by clearly identifying existing research gaps or points of contention in the field.

Response 3:

(1) The paragraph which begins with the sentence you have highlighted offers an explanation to support this point and introduces a reference from a UK national body which reports on the incidence of lung resection in the UK. The reference has been moved to the end of the first sentence to ensure that it is clear where this point comes from.

(2) A subsection has been added at the end of the Introduction to explicitly state our objectives.

Comment 4: Methods

There is no Methods section provided. Detailed literature search information can help assess whether the search is comprehensive and up-to-date.

Response 4:

A Methods section has now been added.

Comment 5: Discussion

- (1) Lines 138: "In total, nine RCTs have investigated LDCT screening, as summarised in Table 1 (16-26)". References 22, 24 were not included in Table 1.
- (2) For a clearer article structure, we strongly suggest the authors number the subheadings.
- (3) This review paper has too many abbreviations. A list of full terms should be provided in the manuscript.

Response 5:

- (1) We are grateful that these extraneous references were highlighted; they have now been removed.
- (2) Numbering the sections should indeed aid navigation of this review, so this has now been added.
- (3) Including so many aspects of screening does bring quite a bit of terminology, but indeed avoiding abbreviations should aid clarity for the reader. Several abbreviations have been removed, and a list of abbreviations used is added at the end of the manuscript.