Appendix 1 Smoking in PM patients

The smoking habits of PM patients in this manuscript were collected and analyzed. Group of 239 smokers (recent and past smokers) compared to 188 who were never smokers. No association between perioperative morbidity such as postoperative pneumonia, empyema, or prolonged air leak in the smoking group was seen. In addition, smoking was not found to be a significant negative prognostic factor. In a group of 58 high risk smokers defined by at least 20 pack years during the last 15 years, no association with perioperative morbidity or overall survival was seen.

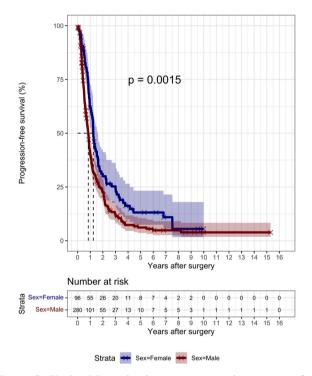


Figure S1 Kaplan-Meier plot depicting estimated progression-free survival functions according to sex status.

Table S1 Morbidities for females who underwent intended ePD (n=114)

Complications	Number of patients (%)
Major complications	52 (45.6)
DVT total	20 (17.5)
Upper DVT	11 (9.5)
Pneumonia	10 (8.8)
Chyle leak	10 (8.8)
Lower DVT	9 (8.0)
Pneumothorax	8 (7.0)
Vocal cord damage	8 (7.0)
Surgical site infection	6 (5.3)
Empyema	2 (1.8)
Pulmonary embolism	2 (1.8)
Hemothorax	2 (1.8)
CVA/TIA	2 (1.8)
Horner syndrome	1 (0.9)
ARDS	0
Seizures	0
MI	0
Epidural abscess	0
Minor complications	47 (41.2)
Prolonged air leak (>14 days)	38 (33.3)
Atrial Fibrillation	7 (6.1)
Delirium	7 (6.1)
Urinary tract infection	5 (4.4)
lleus	1 (0.9)
Urinary retention	0

ePD, extended pleurectomy decortication; DVT, deep vein thrombosis; CVA, cerebral vascular accident; TIA, transient ischemic attack; ARDS, acute respiratory distress syndrome; MI, myocardial infarction.