





Figure S2 The postoperative pathological downstaging rate of TNM stage and N stage.



Figure S3 Kaplan-Meier survival curves of all participants.

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Figure S4 Kaplan-Meier survival curves according to the stage and PD-L1 TPS level. (A) Progression-free survival comparisons: PD-L1 TPS ≥50% *vs.* PD-L1 TPS <50%; (B) overall survival comparisons: PD-L1 TPS ≥50% *vs.* PD-L1 TPS <50%; (C) progression-free survival comparisons: stage IB-IIB *vs.* stage IIIA-IIIB; (D) overall survival comparisons: stage IB-IIB *vs.* stage IIIA-IIIB. PD-L1, programmed death-ligand 1; TPS, tumor proportion score; HR, hazard ratio.

Table S1 Immunotherapy and chemotherapy drugs and treatment regimens

Chemotherapy/immunotherapy	Camrelizumab	Pembrolizumab	Tislelizumab	Sintilimab	Nivolumab	Toripalimab	Durvalumab
Paclitaxel-albumin	44	52	15	10	5	2	0
Pemetrexed	2	11	1	2	2	0	0
Docetaxel	1	3	0	1	0	0	0
Gemcitabine	0	2	0	0	0	0	1
Paclitaxel	0	0	2	0	0	0	0
Liposome paclitaxel	0	2	0	0	0	0	0

Table S2 Adjuvant treatment

Patients receiving adjuvant treatment ${}^{\!\!\!a}$	N (%)
Any	36 (22.8)
Chemotherapy	18 (11.4)
Radiotherapy ^b	5 (3.2)
Immunotherapy ^c	29 (18.4)
Targeted therapy	6 (3.8)

^a, patients may have received more than one type of subsequent therapy; ^b, patients with risk factors such as N2 station lymph node metastasis who could not tolerate adjuvant chemotherapy or immunotherapy were advised to undergo adjuvant radiotherapy; ^c, most patients with adjuvant immunotherapy were suggested to take up to 1 year, and partial patients with pCR may be recommended to shorten it to 6 months.

Table S3 Postoperative adverse events

Adverse events	Grade 2-4, N (%)	Grade 5, N (%)	
Blood loss >400 mL	18 (11.4)	0	
Pneumonia	4 (2.5)	3 (1.9)	
Chylothorax	3 (1.9)	0	
Respiratory failure	2 (1.3)	1 (0.6)	
Pulmonary embolism	1 (0.6)	0	