

Appendix 1

Patient perspective

At the beginning, I found a 13-mm nodule in the right middle lobe due to physical examination in January, 2023. Then I underwent the thoracic surgery in April, 2023. As I have a history of coronary heart disease, I decided to perform a wedge resection of the right middle lobe. The incision to place the chest tube was painful, and I felt bloated. But because postoperative pain is common, we did not pay attention to this problem. Routine histopathological findings confirmed the diagnosis of invasive lung adenocarcinoma.

After leaving the hospital, my belly became bulging, which I had never had before. My weight is also a normal weight, not caused by fat. My doctor recommended an ultrasound of the abdomen at the nearest hospital, but nothing was abnormal. It was only after I went to the hospital where the operation was performed for reexamination that we began to pay attention to the rare complication.

Then my doctor suggested a conservative treatment for me. The operation was carried out in a hot summer, and the lap band was hot for me. But I did not want to undergo further surgery, because I was concerned about the impact of the trauma of the operation on me. Although the doctor told me that it may be permanent and there is no way to return to the way I was before, it has not greatly affected my life.

Of course, I don't wear a lap band all the time, but I don't feel bloated anymore, although it's still about the same size.

All in all, up to now:

- ❖ I think this is a rare complication. I hope my experience can be known to more people.
- ❖ I feel that the current treatment method is not effective for me, I wish there was a better treatment but I think that the operation is more traumatic.
- ❖ Besides, the doctor who treated me solved my lung nodule and also diagnosed the abdominal wall pseudohernia at the first time. All in all, I am very grateful to them.