

Table 5 Long-term outcomes—ground glass and screen-detected tumors
 Ordered by degree of confidence that results reflect the effect of the treatment, resection type, stage

1 st author year (reference)	Study characteristics				Adjustment for confounding								Confid RE Tmt effect	Adjusted OS 5yr %		Adjusted OS W/Seg vs. Lobe		Adjusted LCSS W/Seg vs. Lobe		Comments			
					Demogr F	CoMorbid	Hi stage	Time span	Q settings	Q surgery	Fav tumor	Statistical Methods		Subset	# adj for	W/Seg	Lobe	HR	P		HR	P	
	Source	Years	n	Lobe vs. Stage ^a										W/Seg	Lobe	HR	P	HR	P				
Screen-detected																							
Altorki 2014 (120)	I-ELCAP	93-11	306	SL	clA1,2								PA PQ	-	17	L	86 ^b	89^b	1.5	NS	-	-	Solid, screening
Altorki 2014 (120)	I-ELCAP	93-11	347	SL	clA								PA PQ	1	17	L	84 ^b	91^b	1.3	NS	-	-	Solid, screening
Mostly GG tumors																							
Tsutani 2013 (121)	Japan x4	05-10	162 ^a	Seg	clA								MV PM	-	6	M	96	87	-	NS	[-] ^d	[NS]	Many GGN
Okada 2006 (122)	Japan x3	92-01	567	Seg ^c	clA1,2								MV	-	6	L	89 ^b	90 ^b	1.36	NS	[1.24] ^d	[NS]	Healthy pts, GGN
Zhang 2021 (123)	China x1	11-18	167	SL	clA1,2								MV PM	1	11	L	96	92	0.11	NS	-	-	CTR <0.5, ^f adeno
Zhang 2021 (123)	China x1	11-18	125	SL	clA1,2								MV PM	1	11	L	67	89	7.19	.02	-	-	CTR ≥0.5, adeno
Kodama 2016 (124)	Japan x1	97-10	138 ^a	Seg ^g	clA1,2								MV PM	-	6	VL	97	90	-	NS ^g	[1.99] ^d	[NS]	Excluded pure GGN
Chiang 2020 (125)	China x1	11-16	568 ^a	SL	clA								MV PM	-	4	VL	99	98	-	-	-	-	CTR < 0.5 in 56%
Okada 2014 (126)	Japan x1	05-?	200 ^a	Seg	clA								MV PM	-	6	VL	94	84	0.68	NS	-	-	Adenocarcinoma
Hwang 2015 (127)	S Korea x1	05-13	188 ^a	Seg ^g	cl-II								PM	-	7	VL	[94] ^h	[96] ^h	-	NS ^g	-	-	Many GGN

Inclusion criteria: studies using multivariate or propensity adjustment to compare wedge resection or segmentectomy vs. lobectomy, 2000–21, >50 pts per arm, ground-glass or screen-detected tumors. The HR reference is lobectomy, i.e., HR >1 reflects worse outcome compared with lobectomy. Bold highlights better outcome (>2-point difference); Red font highlights accrual occurring primarily before 2000; Light green shading highlights statistically significant difference.

Legend for adjustment for confounding: Demogr F, demographic factors (age, sex, socioeconomic); CoMorbid, comorbidities; Hi stage, occult stage inaccuracy due to differences in extent of assessment; Time span, adjustment for changes during the study period or differential use of the interventions; Q settings, discrepancy in the facilities or settings performing the interventions; Q Treatmt, quality of the treatment (e.g., margin distance, adjuvant therapy); Fav tumor, selection of less aggressive tumors for an intervention; Statistical methods, methods used to adjust for confounding; Subset, additional subset or sensitivity analyses; # adj for, number of factors adjusted for; Conf RE tmt effect, Confidence that results reflect the effect of the treatment vs. confounding factors. MV, multivariable model (e.g., Cox regression); PA, propensity score adjustment; PM, propensity matching; PQ, analysis of propensity score quintiles							
Color code:	Categories of confounding	Addressed	Neutral (likely little effect)	Limited concern	Moderate concern	High concern	Clearly confounded
	Confidence RE treatment effect	VH-very high	H-high	M-moderate	L-low	VL-very low confidence	

^a, 8th edition stage (reported stage is translated into current 8th edition nomenclature for the sake of uniformity and contemporary application); ^b, unadjusted results; ^c, predominantly (≥80%); ^d, disease free survival (shown in brackets because it is not fully comparable to LCSS); ^e, matched pairs (total); ^f, excluded pure GGN; ^g, ~50% were “lobe-like” segments (left upper tri-segmentectomy, lingulectomy or basilar quadri-segmentectomy); ^h, 3-year survival (shown in brackets because it is not comparable to 5-year OS).

Adeno, adenocarcinoma; CTR, consolidation/tumor ratio (solid size on lung windows/whole tumor size); GGN, ground glass nodule; HR, hazard ratio; I-ELCAP, International Early Lung Cancer Action Project; LCSS, lung cancer specific survival; Lobe, lobectomy; NS, not significant; OS, overall survival; pts, patients; Seg, segmentectomy; SL, sublobar resection; W, wedge.