## Table 2 Long-term outcomes of SBRT vs. sublobar resection in general

Ordered by degree of confidence that results reflect the effect of the treatment, stage

			Stud	y charac	teris	tics				Adju	stme	ent f	for c	onfoundi	ng								
1 <sup>st</sup> author year (reference)	Source	Yrs	n	e a	extent		Mean Age <sup>b</sup>	% Charlson score ≥2 <sup>b</sup>	ogr F	CoMorbid Hi stage	span	Time span Q Settings	Q Treatmt Fav tumor Statistical methods	for/ ets	Confid RE Tmt effect	l (mo) urg/SBRT <sup>b</sup>	Adjusted % 5-yr OS SBRT vs. SL		Adjusted % 5-yr LCSS SBRT vs. SL				
				Stage	Surg	Other	Mear	% Cha	Demogr	CoMo Hi sta	Time	Q Sei	Q Treatmt Fav tumor	Statistical methods	# adj for/ Subsets	Confid Tmt eff	f/u (mo) Surg/SE	SBRT	SL	HR	SBRT	SL	HR
SBRT vs. sublob	ar resect	ion							<u> </u>	_	· · · ·			_									
Mayne 2020 (8)	NCDB	04-15	558 °	cIA	W	≥90 d	73/73	24/24						MV, PM	15/2	Н	28	31	53	1.64	-	-	-
Chi 2019 (42)	NCDB	04-15	16,525	T <sub>any</sub> N0	Seg		-/75 <sup>d</sup>	20/19 <sup>d</sup>						MV, PM	19/4	Н	-	32 <sup>f</sup>	<b>62</b> <sup>f</sup>	1.67	-	-	-
Chi 2019 (42)	NCDB	04-15	26,756	T <sub>any</sub> N0	W		-/75 <sup>d</sup>	20/19 <sup>d</sup>						MV, PM	19/4	Н	-	32 <sup>f</sup>	55 <sup>f</sup>	1.49	-	-	-
Khorfan 2020 (40)	NCDB	04-16	2,146 °	T <sub>any</sub> N0	W	Decl S	>70 <sup>d</sup>	12 <sup>d</sup>						PM	11/4	Н	-	38	49	>1 <sup>e</sup>	-	-	-
Yerokun 2017 (58)	NCDB	08-11	3,168 °	cIA1,2	W		73/73	15/13						PM	10/4	М	36	31	50	>1 <sup>e</sup>	-	-	-
Wu 2020 (59)	NCDB	04-14	11,346 °	cIA1,2	SL		-	-						PM	15/3	М	32	38	55	1.63	-	-	-
Wu 2020 (59)	NCDB	04-14	11,797 °	cl	Seg		-	-						PM	15/3	М	32	33	57	1.89	-	-	-
Wu 2020 (59)	NCDB	04-14	18,104 °	cl	W		-	-						PM	15/3	М	32	33	48	1.5	-	-	-
Wu 2020 (59)	NCDB	04-14	19,934 °	cl	SL		73/73	17/16						PM	15/3	М	32	34	52	1.6	-	-	-
Bryant 2018 (9)	VA	06-15	926	cl	SL		-	-						MV	12/2	М	31/18	-	-	-	-	-	1.6
Bryant 2018 (9)	VA	06-15	1,083	cl-IIA	SL		69/71	45/39						MV	12/2	М	31/18	44 <sup>f</sup>	56 <sup>f</sup>	1.17	55 <sup>f</sup>	68 <sup>f</sup>	1.25
Bryant 2018 (9)	VA	06-15	157	cIIA	SL		-	-						MV	12/2	М	31/18	-	-	-	-	-	1.62
Puri 2015 (49)	NCDB	98-10	9,110	cl-IIA	W°		74/74	14/15						PQ, PM	9/3	L	28/16	25	42	>1 <sup>e</sup>	-	-	-
Dong 2020 (60)	China ×1	12-16	° 08	cl-IIA	SL		65/67	-						PM	9	L	49	67	80	>1 <sup>e</sup>	75	85	>1 <sup>e,p</sup>
Yuan 2021 (61)	China ×1	12-15	98 °	cl-IIA	SL		68/67	_						PM	6	L	37/32	[85] <sup>h</sup>	[73] <sup>h</sup>	-	[87] <sup>h</sup>	[75] <sup>h</sup>	
Ajmani 2018 (62)	NCDB	05-13	4,519 °	cl	W	Hi Q	74/74 <sup>d</sup>	18/19 <sup>d</sup>						MV, PM	11/3	L	66	38	66	2	-	-	-
Ajmani 2018 (62)	NCDB	05-13	4,085 °	cl	W	Low Q	74/74 <sup>d</sup>	18/19 <sup>d</sup>						MV, PM	11/3	L	66	38	34	.88	-	-	-
lguchi 2020 (63)	Japan ×1	02-14	251	cl-IIA	SL	Fav T	67/75	-						PM	14	VL	60/32	64	71	>1 <sup>e</sup>	-	-	-

Legend (for *Tables 1,2*):  $\geq$ 90 d W, delayed wedge  $\geq$ 90 days after diagnosis vs. early SBRT (within 30 days); CC =0, only patients with Charlson comorbidity category of 0 included; Decl S, patients recommended to have resection, but refused; Fav T, favorable tumors (25% were pure ground glass); f/u, median follow-up duration of cohort; Hi Q, high quality wedge (defined as R0 and >5 nodes assessed); HR, hazard ratio; Incl GG, includes some ground glass tumors; LCSS, lung cancer specific survival; L, lobe, lobectomy; LE >5 y, life expectancy >5 years; Low Q, low quality wedge (defined as R1,2); NCDB, US national cancer database; OS, overall survival; SBRT, stereotactic body radiotherapy; SEER, Surveillance, Epidemiology, and End Results database; Seg, segmentectomy; SL, sublobar resection; VA, Veterans Health Administration Database (US), W, wedge resection; Yrs, years.

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, 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 Ittle 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		

<sup>a</sup>, 8<sup>th</sup> edition stage classification; <sup>b</sup>, for surgery/SBRT cohort; <sup>c</sup>, propensity matched pairs (total); <sup>d</sup>, % among entire study cohort, not reported by subgroup; <sup>e</sup>, direction of trend is clear but HR not reported; <sup>f</sup>, unmatched cohort; <sup>g</sup>, all VATS resections; <sup>h</sup>, 3-year survival (in brackets because not comparable to 5-year OS); <sup>i</sup>, cancer specific survival (not specifically lung cancer); <sup>j</sup>, "best stage," i.e., mixture of clinical (nonsurgical patients) and pathologic stage (surgical patients); <sup>k</sup>,  $\geq$ 3; <sup>m</sup>, included 10–20% pneumonectomy and bilobectomy, <sup>n</sup>, 20% sublobar; <sup>o</sup>,  $\geq$ 80%; <sup>p</sup>, P=0.056.