Reviewer A:

Comments:
This paper presents the current knowledge about the Preoperative and postoperative radiotherapy for non-small cell lung cancer.

I propose a major revision:
- Add a section describing the interest of this paper since there is no originality. It is difficult to understate the objective of this study.
- Use the recommended subheadings to divide the sections of the article manuscript as Introduction, Methods, Results, Discussion, Conclusions. The Methods section can describe the factors influencing the local tumor control, for example.
- Some section is very poor; I propose to add more information and critical view or some proposition.

Reply: Regarding the first comment, the paper was requested and the goal was to make a review on this topic by adding the new published papers and also to outline some of the differences in our practice to-day in comparison with the practice in the era of most randomized trials.

Regarding the second comment, I have a problem to use the subheadings as this is a review paper and not a classical study. I have added a comment in the introduction to explain how the review was performed.

Reviewer B:

Comments:
This is a well written and comprehensive review of the role of the title subject.

Specific comments:

Page 5 line 83 Typo, should be find, not found

Page 6 lines 100 following: It is worth emphasising that in the studies by Rusch and Kunitoh (refs 15 and 16), patients with N2 disease were excluded (supporting comment in line 122).
Page 9, line 185. My reading of the MD Anderson paper is that 179 patients had cN2 disease, not ypN2; it was the subset of 61 patients who received PORT and were the subject of this analysis who had ypN2 disease. No conclusions regarding PORT can be drawn from this study; the main conclusion was that postoperative chemotherapy did not affect locoregional failure when given in addition to PORT, but was associated with longer survival. I suggest omitting this paper.

Page 10 line 193-197: This section summarising the results of the study by Billiet et al needs to be rewritten. The current review refers to patients with ypN0 disease, but the focus of Billiet’s study was on PORT in patients with ypN2 or R1/R2 disease. The numbers of patients given in the current review do not agree with the numbers reported in the Billiet’s study. My interpretation of Billiet’s study is that there were no significant differences in survival or local recurrence rates whether PORT was given or not, but because the patients with PORT had worse prognostic features (residual N2 or incomplete resection), it can be inferred that PORT had a beneficial effect. This is a questionable conclusion.

Page 10 line 198. This should be rewritten “Another question is the role of PORT in chest wall invasion…” as that is the subject of reference 37.

**Reply:**
Page 5 line 83 this has been corrected
Page 6 line 100 I have added the comment
Page 9 line 185 Thank you for this comment I have taken out this paper
Page 10 line 193-197 I have first changed the place of ref 32 as this is for ypN0,1 and not N2 adding to the confusion of this para.
Page 10 line 198 I made the correction

**Reviewer C: Major Revision**

For detailed comments please see the file “TLCR-20-472-Reviewer C”.

**Reply:** I took the comments and made the modifications within the paper.