

Peer Review File

Article information: <https://dx.doi.org/10.21037/tcr-23-488>

Review Comments

Reviewer A

Comment 1: Please revise minor typos and syntax errors.

Reply 1: This has been corrected using track changes.

Comment 2: Please comment on sequencing of RT-IO: any data to suggest that RT followed by IO or IO followed by RT is better?

Reply 2: Asian guidelines do support use of radiation therapy (RT) followed by immune checkpoint inhibitor therapy for selected patients including those with greater than 5 cm as reported in the Hong Kong guidelines [1]. However, I did not include this reference in the article as the study for review was conducted in the United States where external beam radiation is still under investigation due to lack of evidence in clinical trials. I was not able to find any randomized clinical trials conducted in the West or in Asia evaluating immune check point inhibitor therapy followed by radiation therapy.

Cheung TT, Yu SCH, Chan SL, et al. The Hong Kong consensus statements on unresectable hepatocellular carcinoma: narrative review and update from 2021. *Hepatobiliary Surg Nutr* 2022 Feb 10;doi:10.21037.

Comment 3: Please comment on dose of SBRT used.

Reply 3: The SRBT dose was 40Gy in 5 fractions delivered at least 40 hours between each fraction. I have included this information in the commentary using track changes.

Reviewer B

Comment 4: This well written commentary highlights strengths, weaknesses and perspectives of an important phase 1 trial with appropriately chosen recent references. There is 3 typos lines 22-23:[...] stereotactic body radiation (SBRT) followed by Nivolumab (Nivo) plus Ipilimumab (Ipili) [...] To me, after correcting these errors during manuscript processing, this editorial commentary will be acceptable as is.

Reply 4: I have corrected the typo on line 22-23 using track changes.