

Peer Review File

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Reviewer A

Comment 1: Were patients tested for COVID19 PCR or IgG, IgM?

Reply 1: Both patients reported in this case series presented with alectinib-induced pneumonitis before (>12 months) the current COVID-19 pandemic. As a result, COVID-19 testing was not clinically indicated at the time of presentation and was therefore not performed. To make it clear to readers why COVID-19 testing was not performed, we have added the year of diagnosis to each patient's case description.

Changes in the text: Under the section, 'Case Presentation #1' on page 3, line 68, we have added the year of diagnosis such that the opening sentence now reads: "An 80-year old Asian, non-smoking man with a history of stroke presented **in 2018** with chest pain, fatigue, and weight loss". Similarly, under the section, 'Case Presentation #2' on page 5, lines 112-113, we have again added the year of diagnosis such that the sentence now reads: "A 66 year old Caucasian, never-smoking woman with a history of depression presented **in 2018** with several weeks of intermittent pain in the right upper back".

Comment 2: Please consider to report OS for case 1.

Reply 2: We agree with this comment from the reviewer and have added overall survival (OS) data to the description of case 1.

Changes in the text: At the conclusion of the section, 'Case Presentation #1', we have added the following sentence on page 5, lines 108-109: "[The patient] passed away shortly thereafter, **with overall survival (OS) lasting approximately 7 months** from the time of diagnosis".

Comment 3: Please consider to improve the resolution of Figure 1 and 2.

Reply 3: We appreciate the reviewer's comment regarding our figures. We have improved their resolution by saving them as .PDF files rather than .JPG files. We hope that the editorial team will find them to be of higher quality.

Changes in the text: No changes to the main text. Higher-resolution versions of figures 1 and 2 have been included with the manuscript.

Reviewer B

Comment: This case series shared two cases of applying Lorlatinib following Alectinib-induced pneumonia in two NSCLC patients with ALK rearrangement. The two cases indicated the safety of Lorlatinib and provide new evidence on this topic, making this manuscript in line with TLCR. Moreover, this manuscript is very well organized, presented in details and discussed in depth. I recommend accepting with no further revisions.

Reply: We appreciate the feedback provided by reviewer B.