Reviewer's report

Title: A phase I/II study of weekly nab-paclitaxel plus cisplatin in chemotherapy-naïve patients with advanced non-small-cell lung cancer

Version: 0 Date: 20 Oct 2019

Reviewer: Giorgio Scagliotti

Reviewer's report:

The results of this phase 1/2 trial showed promising activity and acceptable tolerability for the combination of cisplatin plus nab-paclitaxel in chemo-naïve advanced NSCLC patients, requiring further investigation in larger randomized studies.

The article requires major revisions to be suitable for publication:

- In the background: current treatment scenario of advanced NSCLC should be further detailed, including treatment options recommended according to molecular status, PD-L1 expression and histological subtype;

At page 7, line 18-25, the comparator arm should be specified;

The efficacy results of CA031 study trial have been reported at beginning of background while safety at the end: I suggest to report the overall results only once, better at the end;

At page 9, line 18-21, the sentence is not clear: do you mean…is supposed to be associated with an improved toxicity profile…? please check and rephrase this sentence.

- Along with molecular alterations, it would be interesting to know also PD-L1 expression status, since patients with PD-L1≥50% should be candidate to first-line pembrolizumab. Furthermore of platinum-pemetrexed is recommended as best upfront regimen in adenocarcinoma patients, representing about half of your study population. Please explain about that.

- It would be useful providing specific subgroups of stage IV (M1a, M1b, or M1c) according to the 8th TNM version, since it may have relevant prognostic implications, with impact on final OS results.
- Even if are very few patients it could be interesting evaluating any potential survival differences according to the histological subtype. Furthermore the OS results should be discussed in light of Pemetrexed maintenance data, representing current standard in non-squamous NSCLC.

- More relevant hematological and non-hematological toxicity rates should be reported in the results section, as well as a brief comment on 30% grade ≥3 neutropenia, in the discussion.

- The subgroup analysis of KEYNOTE-407 trial could be discussed, showing that the type of taxane (60.1% of patients in the study received paclitaxel, while 39.9% nab-paclitaxel) did not significantly influence efficacy and safety of immuno-chemotherapy combination, with an interesting trend toward a longer survival and an increased incidence of grade ≥3 AEs in favour of nab-paclitaxel.

- English language revision is recommended

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

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Needs some language corrections before being published
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