

S4 Table. Details of previous studies and our present study for nodal staging in NSCLC with normal mediastinum

Author, Year	Patient number (rN0/1)	Study design	Prevalence of pN2/3 (%)	No. of sampled LN from N2/3 stations per patient	Sedation	ROSE	Sensitivity (95% CI)
Herth et al. (2006) [1] ^{a)}	100 (all rN0) ^{c)}	Prospective, multicenter	17.0	0.8	GA (78%) CS (22%)	No	94 (71-100)
Herth et al. (2008) [2] ^{a,b)}	97 (all rN0) ^{c)}	Prospective, multicenter	6.2	1.6	GA	No	100 (54-100)
Shingyoji et al. (2014) [3] ^{a,b)}	113 (all rN0)	Retrospective, single center	17.7	1.5	CS	-	35 (15-59)
Ong et al. (2015) [4] ^{a,b)}	220 (all rN0)	Retrospective, multicenter	7.7	1.9	GA	Yes	41 (18-67)
Shin et al. (2020) [5]	145 (all rN0)	Retrospective, single center	13.1	2.4	CS	No	47 (25-71)
Hwangbo et al. (2009) [6] ^{a,b)}	61 (rN0/1) ^{d)}	Prospective, single center	14.8	1.9 ^{d)}	CS	No	67 (30-93)
Szlubowski et al. (2010) [7] ^{a,b)}	120 (rN0/1)	Prospective, single center	16.7	1.3	CS	No	25 (9-49)
Sakairi et al. (2013) [8] ^{b)}	126 (rN0/1) ^{d)}	Retrospective, single center	18.3	-	CS	Yes	52 (31-73)
Yasufuku et al. (2013) [9] ^{a,b)}	163 (rN0/1)	Retrospective, single center	9.8	2.1	CS	Yes	56 (30-80)
Oki et al.	107 (rN0/1) ^{d)}	Prospective,	11.2	2.1 ^{d)}	CS	No	25 (5-57)

(2014) [10] ^{a)b)}		single center					
Naur et al.	120 (rN0/1)	Retrospective,	17.5	2.5	GA	Yes	43 (22-66)
(2017) [11] ^{a)}		single center					
Dooms et al.	100 (all rN1)	Prospective,	24.0	2.3	GA	Available but not	38 (18-57)
(2015) [12] ^{b)}		multicenter				routinely performed	
Present study	279 (all rN1)	Retrospective, single center	29.8	2.1	CS	No	39 (28-50)

Two meta-analysis articles [13,14] and our previous [5] and present studies are summarized in this table. However, we excluded two papers published only as abstracts and two papers without sensitivity results among 13 papers in El-Osta et al.'s meta-analysis article [13]. CI, confidence interval; CS, conscious sedation; GA, general anesthesia; LN, lymph node; NSCLC, non-small cell lung cancer; OMM, occult mediastinal metastases; pN, pathological N stage; rN, radiological N stage; ROSE, rapid on-site evaluation. ^{a)}These are nine papers included in the meta-analysis article by El-Osta et al. [13], ^{b)}These are nine papers included in the meta-analysis article by Leong et al. [14], ^{c)}These studies reported the sensitivity for detection of OMM including hilar LN metastasis. We recalculated the results for OMM based on the raw data reported by the authors, ^{d)}These studies included rN2/3 patients. The prevalence and the sensitivity for OMM in rN0/1 patients were recalculated based on the raw data reported by the authors. However, since the numbers of sampled LN from N2/3 stations per patient were reported only for all patients including rN2/3 patients, it was not possible to recalculate the value for only rN0/1 patients.

References

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