ANSWER TO PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

Manuscript NO: 70999

Title: Immunotherapy in triple-negative breast cancer (TNBC): A literature review and new advances

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SPECIFIC COMMENTS TO REVIEWERS

First reviewer (Anonymous, number ID 05387238)

1. "This interesting review includes an update of the advances in immunotherapy for TNBC. The review is summarizing distinct ongoing clinical trials using anti PD-L1 antibodies in metastatic and early -neoadjuvant, adjuvant TNBC treatment. The review is written in a very comprehensive and clear way, granting the information about the last advances in immunotherapy for the already unmet clinical need TNBC. Comments: Please update about atezolizumab therapy concerns and the new data presented by Roche. Update the last FDA approval (July 2021) of Pembrolizumab + chemotherapy in the neoadjuvant regimen for TNBC. Minor comment: Page 12, line 11: Replace Another with Other"

   This sections have been updated:

   - **Atezolizumab therapy concerns and the new data presented by Roche**
   - **Update of the last FDA approval (July 2021) of Pembrolizumab + chemotherapy in the neoadjuvant regimen for TNBC**
   - **Minor comment of page 12, line 11 was corrected**

   In addition, all the manuscript was revised and updated carefully in order to improve the information.

Second reviewer (Anonymous, number ID 05232251)

1. "The topic appears interesting. However, the entire manuscript is written in a

haphazard manner. The drug trials are mixed with biomarkers. More clarity is required."

The review structure was organized in three topics:

- **First, immunotherapy agents approved in TNBC (Atezolizumab, Pembrolizumab) divided by scenario (metastatic, early) and type of therapy (monotherapy, combination with chemotherapy). After the trials details, authors showed FDA approvals and platforms used for PD-L1 expression.**
- **Second, similarities and differences between two important trials in mTNBC (IMpassion130 and KEYNOTE-355), a huge topic for discussion about immunotherapy in this metastatic population.**
- **Third, Emerging biomarkers of response to immunotherapy in TNBC. Authors identified all the potential biomarkers that can predict response to immunotherapy, including validated biomarkers (TILs, PD-L1, TMB, MSI-H/dMMR) and other under investigation (clinical – visceral liver disease-, biochemistry - LDH -, MHC I-II, etc).**
- **In addition, authors cite first reviewer: "The review is written in a very comprehensive and clear way, granting the information about the last advances in immunotherapy for the already unmet clinical need TNBC"**
- **Finally, all the manuscript was revised again and updated carefully in order to improve the information.**