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Gastric Cancer Patients' Pathology and Diagnostic Laparoscopy Evaluation

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

3 comments · 25 Nov 2023 – 4 Dec 2023

Referee 1 Reviewer

MAJOR REVISION 25 Nov 2023

I reviewed the manuscript, and I would like to discuss some points (16 comments):
Abstract:
1- We are not allowed to cite any figure or table in the abstract.
2- Some of the aims of the study concerned pathologic, imaging, and surgical findings, but I did not see any further information about those. Please include this information.
3- The Conclusion section was not justified. It should be based on the actual findings in the Results section.
Introduction:
4- It needs a complete revision. The introduction should include a better representation of the main rationale of the study and emphasize the limitations of previous studies in Iran, but I did not see these addressed.
5- What new question do the findings of this study answer? Many studies have been done in this regard. Why did the authors decide to conduct this study again?
6- What was the novelty of your research? Please define it precisely and clearly.
Methods:
7- Lines 2-4 were repetitive and belong to "objects". Please delete them.
8- What was the study design? It seems to be a "cross sectional study". Please define it precisely.
9- The date of the study should be mentioned clearly.
10- The inclusion criteria must be stated precisely.
Results:
11- What were the Helicobacter pylori (H. pylori) infection statuses of the subjects?
12- It is suggested that some of the tables be merged (tables 1-3, in two columns).
13- Each figure needs a caption. The caption should be inserted beneath the figure (not above).
Discussion:
14- It was good. However, it should emphasize the limitations of previous studies in Iran and compare the present findings with those of other research in Iran.
15- What was the new clinical statement of the study? Please explain it in more detail.
Conclusion:
16- It needs a complete revision. This section must be based on the main findings. The conclusion was vague. Any recommendation must be stated in the last paragraph of the discussion.
Thanks

Associate Editor

MAJOR REVISION 4 Dec 2023

major revision

Editor-in-Chief

MAJOR REVISION 4 Dec 2023

major revision

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Reviewer 1:

I reviewed the manuscript, and I would like to discuss some points (16 comments):

Abstract:

1- We are not allowed any citing figure or table in abstract.

Response: It has been revised.

2- Some of aims of study were pathologic, imaging, and surgical findings, but I did not see any more about those. Pl inserts.

Response: "Younger mean age at the diagnosis, advanced stages of cancer at the first visit, low rates of comorbidity and risk factors, an overall survival rate of 43.3%, and a mean survival time of 8.4± 2.1 months in two years of follow-up were our primary findings" is mentioned briefly in the abstract section and other findings (pathologic, imaging, and surgical) are mentioned in the results section in details.

3- Conclusion section was not justified. It should be noted according to real findings of results.

Response: It was corrected in the revised manuscript.

Introduction:

4- It needs revision, totally. The introduction should include a better representation of the main rationale of the study and emphasis on the limitations of previous studies in Iran, but I did not see anymore.

Response: Kindly it was done in the revised manuscript.

5- Which new question does the findings of this study answer? Many studies have been done in this regard. Why the authors decided to conduct this study again?

Response: It is crucial to have a comprehensive understanding of various factors such as demographic characteristics of patients, clinical symptoms, laboratory data, EUS staging, CT scan findings, histopathologic subgroups, and associated risk factors to plan for reducing the incidence of gastric cancer. Therefore, this study aims to investigate the above-mentioned factors of gastric cancer. To the best of our knowledge, such a comprehensive study has not been conducted in Iran yet.

6- What was the novelty of your research? Pl defines it precise and clear.

Response: This study aims to investigate the factors related to reducing the incidence of gastric cancer, including patient demographics, symptoms, lab data, staging, CT scan results, histopathology, diagnostic laparoscopy evaluation and risk factors. To our knowledge, this is the first comprehensive study of its kind in Iran.

Methods:

7- Lines 2-4 were repetitive and belong to "objects". Pl deletes it.

Response: kindly it was done in the revised manuscript.

8- Study design? It seems "cross sectional study". Pl defines it, precise.

Response: kindly it was done in the revised manuscript.

9- Date of study should be mentioned, clear.

Response: kindly it was done in the revised manuscript.

10- Inclusion criteria must be noted, precise.

Response: kindly it was done in the revised manuscript.

All gastric cancer patients who were referred to the hospital and underwent diagnostic laparoscopic staging during the study period were included.

Results:

11- What were Helicobacter pylori (H. pylori) infection statuses of subjects?

Response: kindly There was missing data on H. pylori, so it was not included in the final analysis.

12- It is suggested to merge some of tables (tables 1-3, in two Colum).

Response: As reviewer suggested, table 2 and 3 were merged in the revised manuscript.

13- Each figure needs a caption. The caption should be inserted beneath the figure (not above).

Response: Kindly it was done in the revised manuscript.

Discussion:

14- It was good. However, it should be emphasis on the limitations of previous studies in Iran and comparing the present finding with others research in Iran.

Response: Kindly it was done in the revised manuscript. Limitations and contrasts of this study in comparison to previous ones conducted in Iran are discussed in the corresponding section and marked.

15- What was the new clinical statement of study? Pl explain it in more details.

Response: This study will investigate the demographic characteristics, clinical symptoms, laboratory data, EUS staging, CT scan findings, histopathologic subgroups, and risk factors associated with gastric cancer in Iran.

Conclusion:

16- It needs revision, totally. This section must be expressed according to main finding. Conclusion was vague. Any recommendation must be noted in last paragraph of discussion.

Response: It was done in the revised manuscript.

Thanks

2 Revision 1

1 comment · 10 Dec 2023

Editor-in-Chief

ACCEPT 10 Dec 2023

accept