OPEN PEER REVIEW

Open Peer Review (OPR)

As a new feature for progressing towards transparency, we decided to open a new window for all of our editors as well as authors titled "**Open Peer Review**". We hope by this new facility, our reviewers will be more motivated and authors will be more satisfied with the review process. We believe that publishing our peer review reports could make a transparent and clear environment for all our efforts within a journal, but not all reviewers tend to publish their comments.

What is "Open Peer Review" process?

An "Open Peer Review" process is making the details of all review process (including reviewers, associate editors, and EICs comments) as "Public" as it is agreed by EIC, Authors, and reviewers.

Advantages of "Open Peer Review" process

- More transparency, constructiveness and tactful comments of the peer review process: leads to an increase in the quality of reviews
- More motivations for all involved roles in the review process
- Authors' satisfactions from the review process: Increases honesty between authors and reviewers
- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://brieflands.com/briefland/knowledgebase/category/tree.html#opr.html

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Peer Review Report for "The Troponin-I Release in Patients with Left-Sided Early-Stage Breast Cancer Undergoing Adjuvant Whole Breast Radiotherapy: An Iranian Experience"

Author(s): Amir Shahram Yousefi Kashi, Maryam Karimi, Afshin Rakhsha, Amir Javadzadegan, Farzad Taghizadeh-Hesary

Review Timeline:

Submit Date:	1 Jul 2020
Revised Date:	8 Jul 2020
Accepted Date:	11 Jul 2020

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (0) 4 Jul 2020

Dear AE,
The submitted manuscript highlights the sensitivity pf troponin-I in patients with breast cancer receiving adjuvant whole breast radiotherapy. It is one of a few studies valuating the Radiation-induced cardiotoxicity among Iranian patients. Therefore, in my opinion it is valuable. Although, it needs a minor revision as follows:

• Abstract, line 10: please change mean (SD) => mean ± SD
• Line 30: candidate => candidates
• Line 31: Radiotherapy => radiotherapy
• Line 39: Segmentation => segmentation
• Line 62: Baseline => baseline

- Line 9: Put reference!
- Line 49: Put the full-term of acronyms for first appearance in the text.

For example: radiation therapy (RT): at third line under Endpoints subheading

- Table 1: Put the unit of age.
- Line 93: Please complete this sentence!
Thanks

REFEREE: Associate Editor | **Revision** (0) 5 Jul 2020

Dear EIC
The reviewer(s) have recommended publication, but also suggest some minor revisions to the manuscript. Therefore, I invite the author to respond to the reviewer(s)' comments and revise his manuscript.
Kind regards,

REFEREE: EIC | **Revision** (0) 5 Jul 2020

Dear authors,
Thank you for submitting your manuscript to IJCM. Please revise your manuscript according to the reviewer's and associate editor's comments.
Thanks

OPEN PEER REVIEW

Revision (1)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

July 6, 2020

Dear esteemed editors and reviewers

We would like to express our most sincere gratitude to you for your effort and patience in reviewing our manuscript. We deeply appreciate your constructive comments on the manuscript. We have studied the valuable comments and tried our best to revise it. The point to point responses are listed as following:

Esteemed reviewer #1

Comment #1A: Please correct the typographical errors as follows:

● Abstract, line 10: please change mean (SD) => mean ± SD

● Line 30: candidate => candidates

● Line 31: Radiotherapy => radiotherapy

● Line 39: Segmentation => segmentation

● Line 62: Baseline => baseline

Response: Thank you for your valuable comment. We have reviewed all the text and corrected the mentioned typographical errors.

Comment #2: Please put reference for information given in line 9.

Response: Thank you very much. We have added the following reference as reference No. 6:

National Cancer Institute. (2019, November 8, 2019). Statistics, Graphs and Definitions. Available: https://cancercontrol.cancer.gov/ocs/statistics/index.html

Comment #3: Please put the unit of age in Table 1.

Response: Thank you so much for your effort and patience in reviewing our manuscript. We have added the unit of age to Table 1

Comment #4: Please complete this sentence in line 93!

Response: We are sorry that we have neglected to provide coherence for the text. The missed words are added.

Esteemed reviewer #1

Comment #1: In the result section of the abstract, you mention: "Mean (SD) of hscTn1 for the whole study population was 12+-2", but it should be: "Mean +- SD". In addition, all abbreviations should be defined, when they are used for the first time in the abstract, such as SD, IQR.

Response: We appreciate for your careful work. The changes are applied to the text.

Comment #2: In the result section of both the abstract and manuscript body you mention that: "There was a significant difference in hscTnI levels before and after radiotherapy (p=0.0).". It is necessary to state the exact p-value, not "0.0".

Thank you for your detailed review. The p-value is changed to 0.001.

Comment #3: The discussion section is too short. The authors should compare the results of the current study to other similar published studies.

This is a valuable comment. I appreciate that. The following sentences are added to the “Discussion” section:

Likewise, Hughes-Davies et al. demonstrated similar results for high-sensitivity cardiac troponin T (hscTnT) in fifty women with early-stage breast cancer who underwent RT to the entire left breast following conservative surgery [16]. They concluded that RT to the left breast does not affect hscTnT levels, even though a portion of the myocardium lies within the high-dose region. In 2017, Zaher et al. evaluated the effect of radiation on cardiac function by examining the left ventricular ejection fraction (LVEF). They concluded that in patients with left-sided breast cancer LVEF is an appropriate prognostic factor for radiation-induced cardiotoxicity [1]. Moreover, they found that hscTnI can predict the subclinical damage to the heart.

We tried our best to improve the manuscript and made some changes in the manuscript. We genuinely appreciate Editors/Reviewers’ valuable work, and hope that the corrections could meet the requirements for approval.

Best regards

Farzad Taghizadeh-Hesary, M.D.
Maryam Karimi, M.D.

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Revision (1)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Associate Editor | **Revision** (1) 11 Jul 2020

Dear EIC
Based on the authors' answers to the reviewers' comments, the reviewer(s) have recommended publication.
Kind regards.

REFEREE: EIC | **Revision** (1) 11 Jul 2020

Dear Authors,
This is my pleasure to announce you that your article has been accepted by the editorial committee after peer review in the International Journal of Cancer Management (IJCM). Hopefully, it will be published in future issues.
Thanks