

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 "**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

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International Journal of Cancer Management

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Peer Review Report for "Survival Rates and Prognostic Factors Among Patients with Endometrial Cancer"

Author(s): Zahra Shiravani, Fatemeh Sadat Najib, Sima Kamkari, Samaneh Bahrami

Review Timeline:

Submit Date:	22 Jan 2024
Revised Date:	20 May 2025
Accepted Date:	24 May 2025

Revision (0)

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

REFEREE : Associate Editor

3 Apr 2024

Thank you for submitting your valuable manuscript to the journal. We would like to inform you that the peer review of your manuscript is now completed, and despite several useful points, it needs "Major Revision". Below you may find the peer review comments. Please reply to them one-by-one and resubmit it again

1. In the introduction, much has been said about physiology and etiology, which is unnecessary. The main topic of the article is related to overall survival and disease-free survival and factors affecting it, which should be focused more on these issues.
2. The first line of the method section: Why are metastatic patients mentioned while it includes all patients with cancer in any stage
3. figures one and two are unclear, please use the original file.
4. Discussion: line 3 and 4 :What area is the reported survival and DFS from?

5. Discussion: There is little and scattered talk about the survival rate and disease-free survival rate, it is necessary to focus and compare it with the comprehensive and important studies of the world.
6. In stage two, the disease-free survival rate is 87% for what year? 1, 3, and 5 years old?
7. The discussion needs a fundamental review and revision

REFeree : EIC

7 Apr 2024

Dear author,

Please revise the manuscript according to the comments of the associate editor and resubmit.

Thank You

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.

Response to reviewers' comments:

Dear Editorial board

Thank you for giving me the opportunity to resubmit a revised draft of my manuscript titled "**Survival rates and prognostic factors among patients with endometrial cancer**" to *International Journal of Cancer Management*. I appreciate the time and effort that you have dedicated to providing your valuable feedback on my manuscript.

Comments

1. In the introduction, much has been said about physiology and etiology, which is unnecessary. The main topic of the article is related to overall survival and disease-free survival and factors affecting it, which should be focused more on these issues.

Reply: Thank you for this comment. I added some point about mortality rate and recurrence of Endometrial cancer and deleted some extra definitions in the Introduction section and highlighted in the text. I change the Data availability explanations both in the manuscript and the system.

2. The first line of the method section: Why are metastatic patients mentioned while it includes all patients with cancer in any stage

Reply: I deleted metastatic patients from method section and abstract section and highlighted.

3-. figures one and two are unclear, please use the original file.

Reply: The figures were replaced by their original files.

4. Discussion: line 3 and 4: What area is the reported survival and DFS from?

Reply: The reported areas of OS and DFS were corrected and rewritten. They all were highlighted.

5. Discussion: There is little and scattered talk about the survival rate and disease-free survival rate, it is necessary to focus and compare it with the comprehensive and important studies of the world.

Reply: Yes you are right but there is paucity of studies about 1, 3, and 5 –year survival of Endometrial cancer in the literature. Due to this fact we used the available studies in the literature. According to this comment I searched again in the literature and added some studies to be compared by our results.

6. In stage two, the disease-free survival rate is 87% for what year? 1, 3, and 5 years old?

Reply: according to Table 2 all three years of 1, 3, and 5 years DFS were 87% that the writing was corrected and highlighted.

7. The discussion needs a fundamental review and revision

Reply: Yes we reviewed it and corrected the given related comments.

OPEN PEER REVIEW

Revision (1)

REFEREE : Associate Editor

5 Jun 2024

Dear EIC,

1. Because the study is about the survival of patients with uterine cancer in Iran, it is necessary to discuss information about the prevalence, incidence and survival rate in Iran and the epidemiology of survival in Iran

REFEREE : EIC

8 Jun 2024

Dear Author,

We kindly request that you make revisions to the manuscript in accordance with the feedback provided by the associate editor. Once the revisions are complete, please resubmit the manuscript at your earliest convenience.

Thank you.

OPEN PEER REVIEW

Revision (2)

Reply to Reviewers

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Response to reviewers' comments 2:

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Comments

Associate

Editor

1:

1. Because the study is about the survival of patients with uterine cancer in Iran, it is necessary to discuss information about the prevalence, incidence and survival rate in Iran and the epidemiology of survival in Iran

Reply: Thank you for this comment. I added some references about breast cancer statistics in Iran and highlighted in the text.

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Revision (2)

REFEREE : EIC

11 Mar 2025

Dear Author,

After careful review, we find the study valuable and well-structured. However, we request minor revisions before proceeding with acceptance.

It would be helpful to elaborate on patient inclusion/exclusion criteria, particularly regarding missing data and how loss to follow-up was handled in survival analysis. The comparison with previous studies is appreciated. However, highlighting key differences in patient demographics, treatment protocols, or survival rates could further contextualize the findings.

We encourage you to revise and resubmit your manuscript, addressing these points.

OPEN PEER REVIEW

Revision (3)

Reply to Reviewers

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Response to reviewers' comments 2:

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After careful review, we find the study valuable and well-structured. However, we request minor revisions before proceeding with acceptance.

1- It would be helpful to elaborate on patient inclusion/exclusion criteria, particularly regarding missing data and how loss to follow-up was handled in survival analysis.

Reply: Patients with critical data missing were excluded. Patients with and incomplete follow-ups were excluded.

2- The comparison with previous studies is appreciated. However, highlighting key differences in patient demographics, treatment protocols, or survival rates could further contextualize the findings.

Demographic features of patients such as gender and age and treatment protocols, or survival rates were discussed and compared with previous studies and highlighted in the text.

OPEN PEER REVIEW

Revision (3)

REFeree : EIC

24 May 2025

Dear Author,

Thank you for submitting your work to IJCM.