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://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

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Peer Review Report for "The Prognostic Value of Preoperative Serum CA125 in Endometrioid Endometrial Cancer with Cervical Stromal and Parametrial Invasion"

Author(s): Tahereh Ashrafganjoei, Atieh Bahman, Maryam Sadat Hosseini, Maliheh Arab , Farah Farzaneh, Atefeh Moridi, Nafiseh Faghih, Somayeh Sohrabi

Review Timeline:

Submit Date: 28 Jan 2019
Revised Date: 23 Jul 2019
Accepted Date: 10 Aug 2019

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) — 16 May 2019

Dear AE,
I have read the article about the prognostic value of preoperative serum CA125 in endometrioid endometrial cancer with cervical stromal and parametrial invasion. Something about the investigation that interests me is the probable role of CA125 in changing the treatment approach in endometrioid endometrial cancer and it can be the most important reason for this investigation. therefore I suggest the authors to highlight it more in your abstract.
Thanks.

REFEREE: Associate Editor | **Revision** (0) — 25 May 2019

Dear EIC,
Many thanks for the valuable efforts of the authors, as they can see bellow there are some

comments that reviewers mentioned:

1. Abstract, background: please revise it, it should talk about the correlation between CA125 and endometrial cancer, clarify it
2. There is no correlation with keywords and manuscript, revise it
3. Introduction line 7: mention the reference number
4. Introduction line 9: mention the reference number
5. The introduction is too short and brief
6. There are too many tables
7. what is the novelty of this study?
8. We recommend comparing the survival and also complications between patients who underwent neoadjuvant CT than surgery with patients who have adjutant sugary in the same stages(so in this situation we can talk about the validity of CA125).

Thanks.

REFEREE: EIC | **Revision** (0) 26 May 2019

Dear Author,

Your manuscript needs major revision, please revise your manuscript according to the comments and resubmit again.

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.

Dear Journal Editors,

Thanks a lot for your valuable comments of our study. We have made some modifications regarding the comments and resubmitted the manuscript.

Q1: Abstract, back ground: please revise it, it should talk about the correlation between CA125 and endometrial cancer, clarify it

A1: It is revised and more data about the tumor marker CA125 and endometrial cancer are presented.

Q2: There is no correlation with keywords and manuscript, revise it

A2: Keywords are revised.

Q3: Introduction line 7: mention the reference number

A3: The reference numbers are mentioned.

Q4: Introduction line 9: mention the reference number

A4: The reference numbers are mentioned.

Q5: The introduction is too short and brief

A5: The introduction is revised.

Q6: There are too many tables

A6: The tables are as less as possible and each; contain the different data of the results. Unfortunately, none could be omitted, because the data would be missing.

Q7: what is the novelty of this study?

A7: The aim and novelty of our study is evaluating the correlation of the tumor marker CA125 with cervical stroma and parametrial invasion. Though cervical invasion could not be a predictor for parametrial invasion, their correlations with CA125, were evaluated separately in the patients under this study. As the prediction of parametrial/ cervical involvement could change the treatment plan and there exists no consensus for a cut-off level, this study could be helpful in decision- making for these patients.

Q8: We recommend to compare the survival and also complications between patients whom underwent neoadjuvant CT than surgery with patients who have adjutant sugary in same stages (so in this situation we can talk about the validity of CA125)

A8: Thanks a lot for your nice suggestion. The main approach in this center in former years, has been radical surgery and staging at first. The recommended plan for adjuvant surgery after neoadjuvant radiotherapy is a newer one and the sample size is still too little for compartment.

In future investigations, we will surely consider about the subject of comparing patients

in the two arms:

- Radical hysterectomy and adjuvant therapy.
- Extrafascial hysterectomy after neoadjuvant radiotherapy with relation to CA125 level.

I would be grateful for your kindness

Best Regards

The corresponding author

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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) 17 Jun 2019

Dear EIC,
Thanks to the author for the revision.
1. Key words should be revised again: for ex. there is no need for blood, Multivariate Analysis, Predictive Value of Tests.
Tanks.

REFEREE: EIC | **Revision** (1) 19 Jun 2019

Dear author
Due to the associate editor's comments, please revise your keywords. Consider that all keywords should be provided according to the MeSH terms at http://www.nlm.nih.gov/mesh/MBrowser.html. Note that the preferred expression is indicated by the label "MeSH Heading" and not "Entry Term". The desired terms may then be copied from the MeSH Browser. Another way of finding appropriate headings is to search PubMed to find articles on similar topics and review the MeSH headings assigned to those articles.
In addition, the abstract is too long so, please reduce it and resubmit again.
Thank you

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Revision (2)

Reply to Reviewers

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

Dear Journal Editors,

Thank you for your kind review, here are the modifications regarding the comments and we resubmitted the manuscript.

[Q1]: Key words should be revised again: for ex. there is no need for blood, Multivariate Analysis, Predictive Value of Tests,

[A1]: Key words are revised again according to MeSH terms.

[Q2]: The abstract is too long so, please reduce it

[A2]: The abstract is revised and reduced.

I would be grateful for your kindness

Best Regards

The corresponding author

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Revision (2)

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** (2) 1 Jul 2019

Dear EIC,
Thanks to the authors for the revision.
- The abstract especially the background should be revised again, no need to mention reference number in abstract, please refer to instruction for authors as you can see in website;
http://intjcancermanag.com/en
- Principal data such as national data and the importance of endometrial cancer should be mentioned.
Thanks.

REFEREE: EIC | **Revision** (2) 2 Jul 2019

Dear Author,
Please revise your manuscript according to the comments.
Thanks.

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Revision (3)

Reply to Reviewers

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

Dear Journal Editors

Thanks a lot for your comments. The revisions in the abstract were done:

[Q1]: No need to mention reference number in abstract

[A1]: The reference numbers were omitted.

[Q2]: Principal data such as national data and importance of endometrial cancer should be mentioned.

[A2]: The national data for endometrial cancer, from “Cancer Incidence in Five Continents” Vol. X published by WHO were added in the manuscript (abstract and introduction).

Best regards,

The corresponding author

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Revision (3)

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** (3) 17 Jul 2019

Dear EIC,
Thanks to the authors for their consideration:
They should revise the abstract again, should be more formal.
Thanks.

REFEREE: EIC | **Revision** (3) 20 Jul 2019

Dear Author,
Please revise your manuscript and resubmit again.
Thanks.

OPEN PEER REVIEW

Revision (4)

Reply to Reviewers

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

Dear Journal Editors

Thanks a lot for your comment.

[Q1]: The abstract should be more formal

[A]:Revision was performed . We tried our best to do it. The last published Annual National Cancer Registry book is used as reference in abstract and introduction parts of the manuscript.

Best regards,

The corresponding author

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Revision (4)

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** (4) 31 Jul 2019

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

REFEREE: EIC | **Revision** (4) 10 Aug 2019

Dear Author,
This is my pleasure to announce to 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.