

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 74018

Title: Psychosocial adaptation and influencing factors among patients with

chemotherapy-induced peripheral neuropathy

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03768526 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-12-11

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-12 03:56

Reviewer performed review: 2021-12-19 10:25

Review time: 7 Days and 6 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements | Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors investigated the influences on the level of adaptation of patients with CIPN using PAIS-SR. This is a meaningful study with interesting results. On the other hand, there are some dissatisfactions with the interpretation and consideration of the results. I would like the author to review the discussion and conclusion of the paper based on the following points. 1. The result of this study is the fact that CIPN was an independent factor influencing the PAIS-SR score. The results of this study recognize the importance of therapeutic strategies that aim to improve psychosocial adaptation by preventing or relieving the CIPN through interventions. However, there is no evidence that the psychophysiological approach can improve the PAIS-SR scores worsened by CIPN. Therefore, from the results of this study, it is a logical leap to consider health care professionals should guide patients and their families to adopt positive coping strategies to avoid the poor adaptation caused by negative coping. 2. PAIS-SR is an excellent questionnaire, but it is old and not a major questionnaire for investigating the quality of life. The authors need to clarify why they used PAIS-SR in this study. 3. The discussion of this article consists of merely the citation of the literature. There is a need to shorten the description a little more and add some discussions on how to treat CPIN.



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Peer-review model: Single blind

Reviewer's code: 05817733 Position: Peer Reviewer Academic degree: PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Iran

Author's Country/Territory: China

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Reviewer performed review: 2021-12-27 15:29

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Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

it is well designed and complete study about psychological problems after chemotherapy in patients with cancer.



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Peer-review model: Single blind

Reviewer's code: 05776245 Position: Peer Reviewer Academic degree: BSc, MSc

Professional title: Academic Research, Research Scientist, Teaching Assistant

Reviewer's Country/Territory: Poland

Author's Country/Territory: China

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Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Dear Authors, a very solid observational research. Inclusion of study limitations and highlights is highly welcomed. The study is sound and diligent. Prepared tables are also made with aesthetics. I have only minor points, please see below: [1]. In such short section as "Sociodemographic information", please mention "Table 1" only once. I understand you want to underline both demographic and disease-related data separately but this can be improved. Consider e.g. changing the beginning of second sentence, or add semicolon to avoid repetition. [2]. In section "Psychosocial Adjustment to Illness Scale-Self Report (PAIS-SR)" there is a mention about total score which is divided to low, moderate and severe. I see that moderate is up to 50, and severe starts with 51. On the contrary, low is up to 34 but the moderate also starts with 34. Is this intentional or should one number be changed to either 33 or 35? Figure 1, I would standardize the use of "0" (zero) before dot - most of the time (e.g. Tables 1, 3, 4) it is present but sometimes not (e.g. some examples in Table 2, Figure 1). At first I thought it is left for correlation's r-values but in first row of Table 2 (Sensory neuropathy), "r" is with zeros for Sub1, 2, 4, 5, 6. In Figure 1 it will be also beneficial to spot minus sign when adding zero before dot. Moreover, I am not sure if the minus signs in Figure 1 are actually minuses or hyphens; please double-check it when making [4]. A few circles in Figure 1 could be bigger, I mean some "ecorrections. values/numbers" are not well visible when the number is higher. Example is "e26" on the left or all "e" from the top or the bottom. It is also applicable for some in the middle and on the right.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Reviewer's code: 05776245 Position: Peer Reviewer Academic degree: BSc, MSc

Professional title: Academic Research, Research Scientist, Teaching Assistant

Reviewer's Country/Territory: Poland

Author's Country/Territory: China

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Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Dear Authors, thank you for your revisions, the article is ready to be published in my If possible during production process, please see again my suggestion from opinion. Point 1, I indeed asked to mention "Table 1" in such short sections like a "Sociodemographic information" but I was referring to short section from "Materials and Methods" and not "Results". I see you put semicolon before "Disease relevant data" in "Results" (page 9) but I wanted you to correct the part on page 7 which is: "The demographic data consisted of 16 items, including gender, age, ethnicity, religiosity, and others. (Table 1). The disease-related data consisted of 14 items, including cancer diagnosis, tumor stage, CIPN grade, and others. (Table 1)." As you can see, there are two mentions of Table 1 in such short sentences and I think the semicolon could be applicable in this part to avoid repetition. Other than that, everything is corrected as requested. Congratulations!



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Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Unfortunately, there have been few changes to the content compared to the previous version. 1. From the results of this study, it seems difficult to consider that coping by health care professionals induces positive adaptation for CPIN. Please re-consider the conclusion. 2. There is a duplication in the abstract's conclusion. Please delete it. 3. Please shorten the Discussion to make it easier to read.