



**PEER-REVIEW REPORT**

**Name of journal:** *World Journal of Gastrointestinal Oncology*

**Manuscript NO:** 103515

**Title:** Caregiver-involved nutritional support and mindfulness training for gastrointestinal cancer patients: The effects on malnutrition risk and mood

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer’s code:** 07746741

**Position:** Peer Reviewer

**Academic degree:** Chief Physician

**Professional title:**

**Reviewer’s Country/Territory:** Japan

**Author’s Country/Territory:** China

**Manuscript submission date:** 2024-11-21

**Reviewer chosen by:** AI Editor

**Reviewer accepted review:** 2024-11-25 13:02

**Reviewer performed review:** 2024-12-05 14:02

**Review time:** 10 Days

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Novelty of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty



<b>Creativity or innovation of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation
<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

This study aimed to evaluate the impact of family nutritional support combined with mindfulness-based behavioral therapy on the risk of malnutrition and mood states in patients with gastrointestinal tumors. A total of 118 patients were randomly divided into two groups. The control group received standard treatment and basic nursing care, while the observation group, in addition to the control group's regimen, received family nutritional support and mindfulness-based behavioral therapy. After 6 months of follow-up, nutritional indicators, mood state indicators, compliance, and satisfaction were compared between the two groups. The results showed that the levels of BMI, ALB, and TRF, as well as the scores of some dimensions of the POMS questionnaire in the observation group, were better than those in the control group, and the NRS2002 and



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MAAS scores were lower than those in the control group. The compliance and nursing satisfaction in the observation group were also higher. This topic is actual and well described. The design of the article is reasonable and the results are reliable. Thank you for giving opportunity to review this study. However, improving the following aspects can make the article more scientific. 1. Some professional terms are expressed rather complexly and can be appropriately simplified or explained to improve the readability of the article. 2. The representation of data in the tables (such as the number of decimal places retained) can be further unified, and the titles of some tables can be made clearer and more accurate. 3. English language needs correction. 4. When comparing the results of the two groups, in addition to describing the differences, the possible reasons for the differences should be further analyzed in depth, such as the specific differences in the implementation of the nutritional support plan and the different acceptance degrees of patients for mindfulness training, to enhance the depth of the discussion.



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**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer’s code:** 07746808

**Position:** Peer Reviewer

**Academic degree:** Chief Physician, MD

**Professional title:**

**Reviewer’s Country/Territory:** United Kingdom

**Author’s Country/Territory:** China

**Manuscript submission date:** 2024-11-21

**Reviewer chosen by:** AI Editor

**Reviewer accepted review:** 2024-11-26 12:21

**Reviewer performed review:** 2024-12-09 00:35

**Review time:** 12 Days and 12 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Novelty of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty



<b>Creativity or innovation of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation
<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

“Caregiver-involved nutritional support and mindfulness training for gastrointestinal cancer patients: effects on malnutrition risk and mood” investigated the impact of an intervention model combining family nutritional support and mindfulness training on the malnutrition risk and mood of patients with gastrointestinal tumors. Through random grouping, the changes in nutritional indicators, mood states, compliance, and satisfaction were compared between the observation group (receiving comprehensive intervention) and the control group (receiving standard treatment and routine care). After 6 months of follow - up, it was found that multiple indicators in the observation group were better than those in the control group. This study focuses on important issues, has a good design with random assignment, uses comprehensive indicators, and



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an innovative intervention model, contributing to its scientific and practical value. The article has the following aspects that need to be improved. 1. The article contains some Chinese words in its writing. It is advisable to identify and rectify them. 2. Some paragraphs have a large amount of content and loose logic, and the paragraph structure can be appropriately optimized. For example, the content of intervention measures and assessment indicators can be described in separate paragraphs to make the article structure clearer and the logic more coherent. 3. In addition to mentioning the limitations of sample size and observation time, other possible limitations, such as the impact of patient loss to follow - up on the results and the differences between the research environment and the actual clinical environment, should be further discussed, and corresponding improvement measures should be proposed. 4. At the end of the discussion section, future research directions should be more clearly proposed, such as further optimizing the intervention measures, exploring the best intervention plans for different patient groups, and conducting long - term follow - up studies, to provide more specific directions and ideas for subsequent research.



## 2 Peer-review report

### Reviewer #1:

1. The article contains some Chinese words in its writing. It is advisable to identify and rectify them.

Re: Thank you very much for your suggestion. We have checked the full text and replaced all the Chinese words.

2. Some paragraphs have a large amount of content and loose logic, and the paragraph structure can be appropriately optimized. For example, the content of intervention measures and assessment indicators can be described in separate paragraphs to make the article structure clearer and the logic more coherent.

Re: Thank you very much for your suggestion. We have checked the full text and modified the logic problems.

3. In addition to mentioning the limitations of sample size and observation time, other possible limitations, such as the impact of patient loss to follow - up on the results and the differences between the research environment and the actual clinical environment, should be further discussed, and corresponding improvement measures should be proposed.

Re: Thank you very much for your comments, and we have summarized and supplemented the limitations of the paper. The revision is as follows:

In exploring the impact of family nutritional support combined with mindfulness-based behavioral therapy and shared decision-making among caregivers on the risk of malnutrition and mood states in patients with gastrointestinal tumors, our study has several limitations. Firstly, the relatively small sample size may limit the generalizability and external validity of the results. Secondly, the observation period of six months may not be sufficient to fully assess the long-term effects of the intervention. Additionally, patient loss to follow-up during the study may have affected the accuracy of the results.



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Lastly, the study was conducted in a single medical environment, which may differ from the actual clinical environment, potentially affecting the applicability of the intervention measures.

To address these issues, we recommend that future studies should expand the sample size and be conducted across multiple medical centers to enhance the representativeness and external validity of the results. Concurrently, extending the follow-up period will allow for a more comprehensive assessment of the long-term effects of the intervention. To reduce the impact of patient loss to follow-up on the study results, stricter follow-up strategies could be employed, such as regular reminders and incentive measures to increase patient engagement and follow-up rates. Furthermore, future studies should consider conducting research in different clinical settings to evaluate the universality and adaptability of the intervention measures and adjust the intervention strategies according to the characteristics of each environment. These improvements can enhance the quality of the research and the practical application value of the intervention measures.

4. At the end of the discussion section, future research directions should be more clearly proposed, such as further optimizing the intervention measures, exploring the best intervention plans for different patient groups, and conducting long - term follow - up studies, to provide more specific directions and ideas for subsequent research.

Re: Thank you very much for your comments, we supplement the significance of the paper and further research direction in the future.

The significance of this study lies in its demonstration of the potential for caregiver-shared decision-making and mindfulness-based behavioral therapy to enhance patient outcomes in gastrointestinal tumor care. Our findings suggest that this integrated approach can significantly reduce malnutrition risk and improve mood,





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compliance, and satisfaction. Moving forward, future research should aim to refine these intervention strategies, tailoring them to the diverse needs of patient subgroups. Additionally, long-term follow-up studies are essential to assess the sustainability of these benefits over time. These directions will provide a more nuanced understanding of how best to support patients with gastrointestinal tumors, ultimately informing clinical practice and improving patient care.

**Reviewer #2:**

1. Some professional terms are expressed rather complexly and can be appropriately simplified or explained to improve the readability of the article.

Rep: Thank you very much for your opinion. I have revised the grammar and logic of the paper.

2. The representation of data in the tables (such as the number of decimal places retained) can be further unified, and the titles of some tables can be made clearer and more accurate.

Re: Thank you very much for your opinion. I will modify and unify the title and digits of each form of the paper.

3. English language needs correction.

Re: Thank you very much for your opinion. I have revised the grammar and logic of the paper.

4. When comparing the results of the two groups, in addition to describing the differences, the possible reasons for the differences should be further analyzed in depth, such as the specific differences in the implementation of the nutritional support plan and



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the different acceptance degrees of patients for mindfulness training, to enhance the depth of the discussion.

Re: Thank you very much for your comments, and we have deeply discussed the differences between the groups,