



## PEER-REVIEW REPORT

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

**Manuscript NO:** 103515

**Title:** Caregiver-involved nutritional support and mindfulness training for patients with gastrointestinal cancer: 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:** N/A

**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 Grade E: Do not publish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 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



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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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**Peer-review model:** Single blind

**Reviewer's code:** 07746808

**Position:** Peer Reviewer

**Academic degree:** Chief Physician, MD

**Professional title:** N/A

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

**Author's Country/Territory:** China

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<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 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



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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.