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PEER-REVIEW REPORT

Name of journal: *World Journal of Experimental Medicine*

Manuscript NO: 96988

Title: Haematology results, inflammatory haematological ratios, and inflammatory indices in cervical cancer: How is the difference between cancer stage?

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06330069
Position: Peer Reviewer
Academic degree: MD

Professional title: Consultant Physician-Scientist, Researcher, Staff Physician

Reviewer's Country/Territory: Indonesia

Author's Country/Territory: Indonesia

Manuscript submission date: 2024-05-20

Reviewer chosen by: Jia-Lin Zhang

Reviewer accepted review: 2024-09-26 09:50

Reviewer performed review: 2024-10-05 06:20

Review time: 8 Days and 20 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation

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Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
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
Peer-reviewer statements	Peer-Review: [ ] Anonymous [Y] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Abstracts: The background and aim sections slightly overlap. For example, the statement "Early detection is crucial for early detection and treatment" can be rephrased or removed to avoid redundancy. You could consider condensing these sentences to be more concise while still effectively setting the stage for the study. The methods section could be simplified slightly to make it more concise without losing clarity. For instance, the sentence "The data obtained from medical records and central laboratory installation consisted of sociodemographic status…" is a bit long and can be restructured for clarity. The results section is comprehensive, but a brief mention of how the laboratory tests correlate with cancer stage could enhance clarity. For instance, it is stated that there were "significant differences" in many laboratory parameters but does not explain how these values changed with stage progression. Background: The introduction touches on a variety of related topics (HPV, the global prevalence of cervical cancer, advanced cancer stages, etc.), but the focus could be more streamlined. After introducing the prevalence and significance of cervical cancer, the connection to laboratory findings in cancer progression should be made more explicit. Suggestion: Introduce the role of laboratory

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markers earlier and emphasize the link between the cancer stage and these tests in a more laboratory manner. The sentence “Sexual intercourse is the primary factor contributing to the transmission of this disease…” oversimplifies the transmission of HPV, which can be transmitted via various forms of sexual contact, not just intercourse. Additionally, while HPV is a major factor, the emphasis should be on the fact that persistent high-risk HPV infection is necessary for cervical cancer development. While the manuscript discusses the Neutrophil-to-Lymphocyte Ratio (NLR) and its link to cancer progression, the role of other ratios, such as platelet-lymphocyte ratio (PLR) and systemic inflammatory indices (SII, SIRI), could be introduced more clearly. Methods: While the total sample size is implied (due to the mention of categorization into stages), the sample size calculation or justification is missing. Describing how the sample size was determined would strengthen the methods, as it would show whether the study was adequately powered to detect significant differences. The manuscript does not address whether potential confounding variables, such as co-morbidities (e.g., diabetes, hypertension), treatment history, or lifestyle factors (e.g., smoking, alcohol use), were considered or adjusted for in the analysis. Since these factors could influence haematological and inflammatory markers, accounting for or mentioning them would add depth to the study’s methodology. The manuscript does not discuss how missing data were handled, which is important when dealing with medical records or laboratory data. If there were any missing values, it would be useful to mention how they were managed (e.g., imputation, exclusion). Results:While the study demonstrates significant associations between haematological markers and cancer stages, it would be beneficial to discuss more explicitly how these findings might impact clinical practice. For example, how might clinicians use haematological and inflammatory indices to monitor patients or predict disease progression in real-world settings? The study could explore how these markers could complement existing diagnostic methods, such as imaging or

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histopathology. The manuscript presents significant differences in haematological markers, but there is limited biological interpretation or discussion of why these specific changes (e.g., elevated NLR or lower haemoglobin) are observed in different stages of cervical cancer. Providing a physiological or mechanistic explanation could strengthen the interpretation of the results. Discussion: While the study clearly highlights significant findings, it lacks a thorough discussion of how these findings could impact clinical practice. The relevance of haematological and inflammatory indices to cervical cancer diagnosis, staging, or prognosis should be emphasized more explicitly. The manuscript mentions that certain findings, such as the variation in monocytes across different stages of cervical cancer, contradict prior studies. However, the discussion on why this discrepancy exists could be expanded. Exploring whether these differences are due to population-specific factors, differences in study design, or other variables would add depth to the discussion.The manuscript does well in discussing biological mechanisms but could benefit from condensing some of the more detailed discussions of cytokines and cellular responses. This would streamline the section and make it more accessible to a broader readership while still providing valuable scientific insight.