

HOW TO BE A BEST REVIEWER?

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학술지 (Medical Journal)

- 전문가가 독자인 정기간행물
- 전문가 심사를 받은 글의 모음 (Peer reviewed articles)

Position of Peer Reviewer

Peer reviewer:

- 원고 내용과 같은 분야에서 일하는 전문가
- 학술지 편집과 관련이 없는 외부 인사
- 학문적 동료라는 뜻의 동료

학문발전, 동료의 발전을 위하여 대가없이 출판 과정에 참여

학문적 동료를 존중함

Invitation to Review for **Journal of International Medical Research** - JIMR-15-0118

받은편지함 x

 **JIMR.Editor@sagepub.co.uk** 도메인: manuscriptcentral.com

4월 7일 ☆

나에게 ▾

07-Apr-2015

Dear Dr Song:

Manuscript ID JIMR-15-0118 entitled "Primary ovarian mucinous carcinomas: an outcome-based clinicopathological study in comparison with serous carcinoma." has been submitted to Journal of International Medical Research.

I invite you to review this paper. The abstract appears at the end of this letter. Some information about the journal's unique model and what would be required of you to do a review follows. At this point we ask you simply to identify any major flaws in the methodology used, the data presented and misleading or false conclusions.

Journal of International Medical Research is committed to ensuring that the peer-review process is as robust and ethical as possible. The Committee on Publication Ethics (COPE) guidelines regarding peer review can be found at the following link. Please read the guidelines before accepting or declining my invitation. http://publicationethics.org/files/Ethical_guidelines_for_peer_reviewers_0.pdf.

Don't rush to accept an invitation to peer review a manuscript

- Familiar enough with the content area or the method
- Conflict of interest
- Enough time to review

The definitive role of Reviewer: Decision about the paper

Judging the importance of the research question as well as the quality of the paper is **very subjective**.

Reporting guidelines

- RCT
 - **CONSORT** (Consolidated Standards of Reporting trials)
- Systematic reviews and meta-analyses
 - **PRISMA** (Preferred Reporting Items for Systematic Reviews and Meta-analyses)
 - **MOOSE** (Meta-analysis of Observational Studies in Epidemiology)
- Observational studies
 - **STARD** (Strengthening the Reporting of Diagnostic Accuracy)
- Tumor marker
 - **REMARK** (Reporting recommendations for tumor marker prognostic studies)

| Section/Topic | Item No | Checklist item |
|---------------------------|---------|---|
| Title and abstract | 1a | Identification as a randomised trial in the title |
| | 1b | Structured summary of trial design, methods, results, and conclusions (for specific guidance see CONSORT for abstracts ^{45 65}) |
| Introduction | | |
| Background and objectives | 2a | Scientific background and explanation of rationale |
| | 2b | Specific objectives or hypotheses |
| Methods | | |
| Trial design | 3a | Description of trial design (such as parallel, factorial) including allocation ratio |
| | 3b | Important changes to methods after trial commencement (such as eligibility criteria), with reasons |
| Participants | 4a | Eligibility criteria for participants |
| | 4b | Settings and locations where the data were collected |
| Interventions | 5 | The interventions for each group with sufficient details to allow replication, including how and when they were actually administered |
| Outcomes | 6a | Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed |
| | 6b | Any changes to trial outcomes after the trial commenced, with reasons |
| Sample size | 7a | How sample size was determined |
| | 7b | When applicable, explanation of any interim analyses and stopping guidelines |

Systematic process to review the manuscript

- Scientific originality
- Its strengths and weakness (content, methodological, ethical)
- The presentation/clarity of the paper
- The interpretation of results
- Future direction
- Suitability for publication

Title

The key to ensuring your article will be found

Good research title paper title

: Condense the paper's content in a few words

: Captures the readers' attention

: Differentiates the paper from other papers of the same subject area

예시

Avoid: Drug XYZ has an effect of muscular contraction for an hour in snails of Achatina fulcia species

Keep it simple, brief and attractive

Better: Drug XYZ induces muscular contraction in Achatina fulcia snails

Avoid: Effects of drug A on schizophrenia patients: study of a multi center mixed group

Use appropriate descriptive words

Better: Psychosocial effects of drug A on schizophrenia patients: a multi center randomized controlled trial

Abstract checklist

Selecting the most important information

- 각 저널에서 규정하는 structure와 일치하는지?
- 각 단락에 필수적인 정보가 있는지?
- 목적이 명확한지, introduction의 마지막 단락과 동일한가?
- 결과에서 기술하는 것과 동일한 결과인가?
- Discussion에서 내린 결론과 동일한가?

J Gynecol Oncol

Objective: To assess retrospectively the feasibility of intraoperative intraperitoneal (IP) chemotherapy with cisplatin in epithelial ovarian cancer.

Methods: IP chemotherapy during optimal staging surgery was performed in 10 patients who were diagnosed with primary epithelial ovarian cancers between April 2008 and February 2011. Cisplatin (70 mg/m² in 1 L normal saline solution) was administered in the abdominal cavity for 24 hours postoperatively and then adjuvant chemotherapy was started 2-4 weeks after surgery. Perioperative toxicity of the combined treatment was evaluated until the initiation of postoperative adjuvant chemotherapy.

Results: A total of 23 adverse events were observed in 9 of 10 patients (grade 1, 7; grade 2, 13; grade 3, 3; grade 4, 0). In descending order of frequency, adverse events affected the gastrointestinal system (n=14), hematologic system (n=6), pulmonary system (n=2), and genito-urinary system (n=1). The adverse events did not affect adjuvant systemic chemotherapy schedules. One patient experienced disease recurrence in the liver 16 months after surgery. The remaining 9 patients have been well controlled by chemotherapy and/or observation during the follow-up period of 4 to 39 months after surgery.

Conclusion: Intraoperative IP chemotherapy with cisplatin during surgical procedures is considered feasible for the treatment of primary epithelial ovarian cancer. Further studies, including long-term, prospective and comparative trials, are needed to validate the efficacy of this combined therapy.

Human Reprod

STUDY QUESTION: Is hemostasis by hemostatic sealant superior to that achieved by bipolar coagulation in preserving ovarian reserve in patients undergoing laparoscopic ovarian cystectomy?

SUMMARY ANSWER: Post-operative ovarian reserve, determined by serial serum anti-Müllerian hormone (AMH) levels, was significantly less diminished after ovarian hemostasis when hemostatic sealant was used rather than bipolar coagulation.

WHAT IS KNOWN ALREADY: Hemostasis achieved with bipolar coagulation at ovarian bleeding site results in damage to the ovarian reserve.

STUDY DESIGN, SIZE, DURATION: A prospective, multi-center randomized trial was conducted on 100 participants with benign ovarian cysts, between December 2012 and October 2013.

PARTICIPANT/MATERIALS, SETTING, METHODS: Participants were randomized to undergo hemostasis by use of either hemostatic sealant (FloSeal™) or bipolar coagulation during laparoendoscopic single-site (LESS) ovarian cystectomy. The primary end-point was the rate of decline of ovarian reserve calculated by measuring serum AMH levels preoperatively and 3 months post-operatively.

MAIN RESULTS AND THE ROLE OF CHANCE: Age, parity, socio-demographic variables, preoperative AMH levels, procedures performed and histologic findings were similar between the two groups of patients. There were also no differences in operative outcomes, such as conversion to other surgical approaches, operative time, estimated blood loss, or perioperative complications between the two groups. In both study groups, post-operative AMH levels were lower than preoperative AMH levels (all $P < 0.001$). The rate of decline of AMH levels was significantly greater in the bipolar coagulation group than the hemostatic sealant group (41.2% [IQR, 17.2–54.5%] and 16.1% [IQR, 8.3–44.7%], respectively, $P = 0.004$).

LIMITATIONS, REASONS FOR CAUTION: Some caution is warranted because other ovarian reserve markers such as serum markers (basal FSH and inhibin-B) or sonographic markers were not assessed.

WIDER IMPLICATIONS OF THE FINDINGS: The present study shows that the use of a hemostatic sealant during laparoscopic ovarian cystectomy should be considered, as hemostatic sealant provides the additional benefit of preservation of ovarian reserve.

STUDY FUNDING/COMPLETING OF INTEREST(S): This study was supported by the Medical Research Funds from Kangbuk Samsung Hospital. No conflict of interest is declared.

TRIAL REGISTRATION NUMBER: www.clinicaltrials.gov, no. NCT01857466.

Key words: ovarian cystectomy / ovarian cysts / ovarian reserve / AMH

Introduction checklist

Funnel structure and Gap in Knowledge



- 연구 필요성이 논리적으로 설명되어있는가?
(Funnel structure를 취하고 있는지?)
- 독자들이 연구의 필요성에 대한 기대함을 느낄 수 있게 기술되어 있는지?
- 단순한 논문 리뷰는 피하고 참고문헌을 알맞게 인용하였는가?
- 마지막 단락에 목적(가설)이 명확하게 기술되어 있는가?
- 너무 장황하지 않는가?

나랏말싸미 등궤에 달아 문썰와로서
르스뭇디아니씨 이런 전츰로 어린 박
성이 니르고져 흠배이셔도 꺾춤내제
쁘들시러퍼디몬 혼노미하니라 내이쿨
윙헝야어옛비너겨 새로스물여듬쭙쿨
땡꺾노니 사람마다히며수비니겨날로
뿌메 뵤한크헝고져흠 썩꺾미니라

Methods

- Reproducible, sequential, and not complicated
- Poor methodology → Suspicious credibility
- Even unattractive items or results, but with scientific methodology → improved level of evidence

Methods: checklist

- 사람 대상과 동물실험이면 첫 단락에 IRB 승인 표시가 있는가?
- 환자 대상이면 연구의 시작과 종료기간 및 장소가 기술되어 있는가?
- 연구대상자의 선정 및 제외 기준 등 기술되어 있는가?
- 각 평가항목(outcome)에 대해 정의가 되었는가?
- 그룹으로 나눈 이유가 합리적인가? (flow chart 사용)
- 통계분석법이 적절한가?
- 결과에서 사용한 모든 통계방법이 기술되었는가?

Results checklist

- 결과가 논리적으로 나열되어 있는가?
(Consistency in manuscript, figure, table, and abstract)
- Method section에서 설명한 연구 방법과 결과가 모두 제시되어 있는가?
- 통계분석에 대한 해석은 올바른가?
- 결과를 표현하기 위해 표나 그림을 적절히 이용했는가?
- 표와 그림의 중복이 없는가?
- 조그만 결과를 크게 확대 설명하지는 않았나?

Discussion

- **Concise** writing
 - What is the something new or the difference compared to prior studies
 - Impact on clinical practice
- **Scientific** and **logical** writing
 - Balanced discussion with equilibrating reference (pros vs cons)
 - Strength and limitation

Discussion checklist

- 중요한 결과에 집중하여 토의하고 있는가?
- 주된 결과에 대한 이유에 대해 설명하고 있는가?
- 유사한 타 논문을 잘 비교하여 설명하고 있는가?
- 결과를 단순 반복하여 기술하지는 않는가?
- 서문 내용과 중복되지 않는가?
- 연구의 제한점을 제시하는가?

Conclusion checklist

- 결론은 데이터를 근거로 도출되었는가?
- 결과를 지나치게 확대해석하는 것은 아닌가?
(indication, significance)
- 향후방향을 제시하는가?

References checklist

- 순서대로 제시되어 있는가?
- 투고 저널 style에 맞는가?
- 최근 문헌을 인용하는가?
- 중요한 문헌이 누락되지 않았는가?
- 잘못 인용된 문헌이 있는가?

Table checklist

- Abstract, table과 figure만으로도 논문을 파악할 수 있는가?
- 약어가 설명되어 있는가?
- 각주에 기호가 설명되어 있는가?
- Table제목이 누락되지 않았는가?
- Text설명과 Table번호가 일치하는가?

Figure checklist

- 투고저널의 Guideline에 충실한가 (DPI, color)?
- 그림의 개수가 적절한가?
- 그림이 있는 label이 caption에 설명되어 있나?
- 조직 사진이면 배율이 있는가?
- 환자 사진이면 신상 파악이 안되도록 되어있나?

평가의견서 작성 가이드라인

(Council of Biology Editors)

1. 원고는 저자의 재산권임

복사, 불허, 인용불허, 원고 심사를 지연시킨 후 심사위원 연구진이 먼저 발표하는 행위 금지

2. 원고에 대하여 불편 부당한 태도로 심사

3. 이해관계가 있다고 판단하면 심사 사양

4. 심사기간(2주일) 지연사유가 있으면 미리 양해를 구함

5. 추정하는 저자와 연락하면 안 됨

6. 게재 승인 여부에 관한 문장을 평가의견서에 쓰면 안됨
7. 저자의 입장에서 평가서 작성: 자극적 표현 자제
8. 수정을 요하는 부분을 코치하는 방식으로 제시수정을 하지 않으면 게재하지 못한다는 표현 자제: 반드시 수정하여야할 부분과 수정이 바람직한 부분을 구분
9. 잘 작성한 심사의견서는 편집인 판단에 매우 유용함
10. 원고의 문법, 투고양식 등을 세세히 지적할 필요는 없음 (제작 편집자가 수정)
11. 편집인은 전문가 심사자의 심사의견서를 그대로 따르는 것이 아니고 다른 요인을 감안하여 최종 결정
12. 평가서에 기록할 사항
연구의 중요성 (significance), 독창성 (originality), 실험 디자인의 적정성, 실험 기법의 적정성, 문장의 수준과 원고 구성의 수준

Rating

(1) Comments to the authors

- **Overall**

- Of high and acute interest, original and high scientific value
- Original, but moderately interesting
- 'Repeat performance', but of some value
- Of little interest to average reader

- **Specific**

(Title, Abstract, Introduction, Method, Results, Discussion, References, Table, and Reference)

- Adequate, inadequate, or not applicable

(2) Confidential comments to the EIC

예시, Confidential comments to the EIC

- This manuscript is very interesting. Although this paper has minor concerns about the methodology, the manuscript is well written and well presented. Especially, the method section is systematic and scientific.
- Although this manuscript had several limitations including a referral bias, this manuscript is worthy of publication, considering the rarity of GTN following partial molar pregnancy.
- Although the purpose of this study seemed to be clinically important, the authors drew improper conclusions from the inappropriate sample. Also, the methodology of this study was very poor (un-scientific).
- Although the method and result section of this manuscript were reasonable and scientific, the author drew improper conclusions from the scant evidence. Also, the main result of this study (The RFS and OS of cervical cancer patients with initial tumor size $> 2\text{cm}$ were worse than tumor size $\leq 2\text{cm}$) was already well-known. The authors failed to provide novel findings.

Why accepted?

- Timely and relevant to a current problem
- Well designed and had appropriate methodology
- Well written, logical, and easy to comprehend

Why rejected?

- An insufficient problem statement
- A sample population that was too small or was biased
- Incomplete or insufficiently described statistics
- Suboptimal or insufficiently described means of measuring data
- Over-interpretation of the results
- Text difficult to follow

Review Quality Assessment

- Did the reviewer discuss the **importance** of the research question?
- Did the reviewer discuss the **originality** of the paper?
- Did the reviewer clearly identify the **strengths and weakness of the method** (study design, data collection and analysis)?
- Did the reviewer make scientific **useful comments** on the writing, organization, tables and figures of the manuscript?
- Were the reviewer's **comments constructive**?
- Did the reviewer supply appropriate evidence using examples from the paper to **substantiate their comments**?
- Did the reviewer **comment on the author's interpretation** of the results?
- How would you rate the **tone of the review**?

논문리뷰에 대해 두려워마라

Peer reviewer가

모두 rejection하여도 출판되는 논문이 있고

모두 accept하여도 출판되지 못하는 논문이 있다

절반의 논문은 심사평이 일치하지 않는다

경청해주셔서 감사합니다