



ISSN NO. 2320-5407

ISSN(O): 2320-5407 | ISSN(P): 3107-4928

International Journal of Advanced Research

Publisher's Name: Jana Publication and Research LLP

www.journalijar.com

REVIEWER'S REPORT

Manuscript No.: IJAR-58007

Title: Five-Year Survival of Cervical Cancer in Women Treated at a Secondary-Level Hospital

Recommendation:

Accept after major revision

Rating	Excel.	Good	Fair	Poor
Originality			✓	
Techn. Quality			✓	
Clarity		✓		
Significance		✓		

Reviewer's ID: JPR-198

Detailed Reviewer's Report

This manuscript evaluates five-year survival among women diagnosed with cervical cancer at a secondary-level hospital in Veracruz, Mexico. The topic is clinically relevant because survival data from regional healthcare centers are important for evaluating treatment outcomes and healthcare performance in resource-constrained settings.

The study includes 199 patients and applies Kaplan–Meier survival analysis to assess survival according to age, FIGO stage, histological subtype, HPV history, and treatment modality. The manuscript is generally well organized and addresses an important public health issue.

However, several methodological and interpretative concerns should be addressed before publication.

Major Concerns

1. Follow-up period inconsistency

- Patients were included from January 2019 to December 2024, yet the manuscript reports a five-year survival analysis.
- Patients diagnosed in later years could not have completed a full five-year follow-up.
- The authors should clearly explain how survival time was calculated and how censoring was handled.

2. Absence of multivariate analysis

- Only Kaplan–Meier and log-rank analyses were performed.

REVIEWER'S REPORT

- Important prognostic factors such as age, stage, histology, HPV status, and treatment should ideally be analyzed using Cox proportional hazards regression.
- Without multivariable adjustment, conclusions regarding prognostic factors remain limited.

3. Unexpected survival findings

- FIGO Stage III patients demonstrate a longer mean survival than Stage I and Stage II patients (Table 4), which is biologically unexpected.
- The authors should verify calculations and provide an explanation.

4. Histological subtype analysis is underpowered

- Some histological groups contain only 2–3 patients.
- Survival comparisons based on such small numbers are statistically unreliable and should be interpreted cautiously.

5. Potential selection bias

- Excluding records with incomplete information may have introduced bias.
- The authors should discuss this limitation.

Minor Concerns

1. The Introduction is excessively long and contains extensive information on cervical cancer epidemiology, screening, and treatment that is not directly related to the study objective.
2. Several sections read like textbook descriptions rather than supporting the study rationale.
3. Mean survival time should be complemented with median survival where appropriate.
4. Confidence intervals for survival percentages should be reported.
5. The Discussion should focus more on explaining the observed survival patterns rather than repeating results.
6. Some grammatical and language issues require editorial revision.