Decision Letter (JCQ-2025-0004)

From: [redacted]

To: drsonipankaj@rediffmail.com

CC: drsonipankaj@rediffmail.com

BCC:

Subject: Journal of Clinical Question - Decision on Manuscript ID JCQ-2025-0004

Body: 12-Feb-2025

Dear Dr Soni:

Manuscript ID JCQ-2025-0004 entitled "Efficacy and Safety of Pharmacotherapy in Cancer-Related Anorexia and Cachexia Symptoms: A Systematic Review and Network Meta-Analysis of Randomized Controlled Trials" which you submitted to the Journal of Clinical Question, has been reviewed. The comments of the reviewer(s) are included at the bottom of this letter.

The reviewer(s) have recommended publication, but also suggest some revisions to your manuscript. Therefore, I invite you to respond to the reviewer(s)' comments and revise your manuscript.

To submit your revised manuscript, follow the below steps.
1. Access to https://mc.manuscriptcentral.com/jcq and log into the site.
2. Click "Author" at the top left of the screen at "Home" page.
3. Click "Manuscripts with Decisions" on Author Dashboard page.
4. Click "create a revision" on the manuscript you are going to revise.
5. The system creates your revision manuscript form. Provide your comments about the revised points at the response field, fill in on each field step by step as same as you did for the original submission, and submit your revised manuscript.
IMPORTANT: Your original files are available to you when you upload your revised manuscript. Please delete any redundant files before completing the submission.
Your manuscript number has been appended to denote a revision.

You will be unable to make your revisions on the originally submitted version of the manuscript. Instead, revise your manuscript using a word processing program and save it on your computer. Please also highlight the changes to your manuscript within the document by using the track changes mode in MS Word or by using bold or colored text.

Once the revised manuscript is prepared, you can upload it and submit it through your Author Center.

When submitting your revised manuscript, you will be able to respond to the comments made by the reviewer(s) in the space provided. You can use this space to document any changes you make to the original manuscript. In order to expedite the processing of the revised manuscript, please be as specific as possible in your response to the reviewer(s).

IMPORTANT: Your original files are available to you when you upload your revised manuscript. Please delete any redundant files before completing the submission.

Because we are trying to facilitate timely publication of manuscripts submitted to the Journal of Clinical Question, your revised manuscript should be uploaded as soon as possible. If it is not possible for you to submit your revision in a reasonable amount of time, we may have to consider your paper as a new submission.

Once again, thank you for submitting your manuscript to the Journal of Clinical Question and I look forward to receiving your revision.

Sincerely,
Professor EIC JCQ
Editor in Chief, Journal of Clinical Question
jcqeic@gleampub.com

[Editor's Comments]
Associate Editor
Comments to the Author:
(There are no comments.)

[Reviewer(s)' Comments]
Reviewer: 1

Comments to the Author
Thank you for the opportunity to review this wonderful manuscript. It is well-written, methodologically sound and addresses pertinent issues in current literature. It is thorough and acknowledges the study's limitations appropriately.

Reviewer: 2

Comments to the Author
Comments

1. How does the author determine the presence of significant heterogeneity? Should be highlighted.

2. It is essential to identify the source of heterogeneity through meta-regression and subgroup analysis.

3. Sensitivity analysis is advisable to evaluate the robustness of the pooled results rather than focusing on identifying the sources of heterogeneity. It is essential to conduct this analysis for each effect size.

4. How does the author determine that the result is statistically significant? P value? It is essential to include this information.

5. A funnel plot is used to identify publication bias when there are more than 10 studies involved. The author should conduct other tests to identify publication bias.

6. Table 2: Summary of network meta-analysis of pharmacotherapy in weight gain. In this table no weight gains data about Mirtazapine.

7. Table 3: Summary of network meta-analysis of pharmacotherapy in Anorexia-Cachexia Scale improvement. In this table why drug articles was not uniform?

Date Sent: 12-Feb-2025

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Author's Response to Decision Letter for (JCQ-2025-0004)

Efficacy and Safety of Pharmacotherapy in Cancer-Related Anorexia and Cachexia Symptoms: A Systematic Review and Network Meta-Analysis of Randomized Controlled Trials

Response Letter

Dear Reviewers,
We sincerely appreciate your thoughtful review and valuable comments on our manuscript titled "Efficacy and Safety of Pharmacotherapy in Cancer-Related Anorexia and Cachexia Symptoms: A Systematic Review and Network Meta-Analysis of RCTs". Your insightful feedback has greatly improved our work's clarity and quality. We have carefully addressed each of your comments and incorporated the necessary revisions accordingly. Below, we provide a detailed point-by-point response to your suggestions.

Reviewer 1
Comment: Thank you for the opportunity to review this wonderful manuscript. It is well-written, methodologically sound, and addresses pertinent issues in current literature. It is thorough and acknowledges the study's limitations appropriately.
Response： We sincerely appreciate your kind words and thoughtful review of our manuscript. Your positive feedback on its clarity, methodological rigor, and relevance is highly encouraging. We are grateful for your time and consideration in evaluating our work.

Reviewer 2
Comment 1. How does the author determine the presence of significant heterogeneity? Should be highlighted.
Response: Thank you for your insightful comment. We acknowledge the oversight in the discussion section regarding the conclusion on significant heterogeneity without verifying statistical parameters. Heterogeneity in meta-analysis can be assessed using various methods, with I^2 being a widely used measure. We have revised the manuscript to include the following clarification: "The I^2 statistic was used to assess heterogeneity, with values of 0–25% indicating low heterogeneity, 25–50% representing moderate heterogeneity, 50–75% reflecting substantial heterogeneity, and >75% signifying considerable heterogeneity."

Comment 2. It is essential to identify the source of heterogeneity through meta-regression and subgroup analysis.
Response: Thank you for your insightful suggestion. We have checked I^2 values as overall and between studies the results is as follows: "The total I^2 values for weight gain, improvement in ACS, and serious AEs were 45.5% ($p = 0.16$), 0%, and 46.9% ($p = 0.15$), respectively, indicating low to moderate heterogeneity. The I^2 values for between-design heterogeneity were 51.9% ($p = 0.15$), 0%, and 71.9% ($p = 0.06$), respectively." Given this level of heterogeneity, we determined that a subgroup analysis was unnecessary.

Comment 3: Sensitivity analysis is advisable to evaluate the robustness of the pooled results rather than focusing on identifying the sources of heterogeneity. It is essential to conduct this analysis for each effect size.
Response: Thank you for your useful suggestion. We acknowledge the importance of sensitivity analysis in assessing the robustness of the pooled results. Given the findings of moderate to low heterogeneity, with p-values >0.05, we determined that conducting a sensitivity analysis was unnecessary. Accordingly, we have modified the manuscript throughout to reflect this decision.

Comment 4: How does the author determine that the result is statistically significant? P value? It is essential to include this information.
Response: Thank you for your valuable comment. We acknowledge the importance of clearly defining statistical significance. In our analysis, statistical significance was determined using p-values, with a threshold of $p < 0.05$ considered statistically significant. We have revised the Statistical Analysis section of the manuscript to explicitly state this criterion and have ensured that relevant p-values are consistently reported throughout the Results section.

Comment 5: A funnel plot is used to identify publication bias when there are more than 10 studies involved. The author should conduct other tests to identify publication bias.
Response: We appreciate the reviewer's comment on this point. As the reviewer noted, funnel plot asymmetry is typically assessed when there are more than 10 studies. To evaluate potential publication bias, we conducted Egger's test and have added the following statement to the manuscript: "No significant publication bias was detected. The p-values from Egger's test for the outcomes of weight gain, improvement in ACS, and serious AEs were 0.06, 0.22, and 0.11, respectively."

Comment 6: Table 2: Summary of network meta-analysis of pharmacotherapy in weight gain. In this table, no weight gain data about Mirtazapine.
Response: We appreciate the reviewer's comment on this point. We have summarized the network meta-analysis's main outcomes and highlighted pharmacotherapy's positive findings in CACS. The analysis includes 13 treatments, and the detailed results are provided in the supplementary information. We have now incorporated the weight gain data for Mirtazapine into the main text.

Comment 7: Table 3: Summary of network meta-analysis of pharmacotherapy in Anorexia-Cachexia Scale improvement. In this table why drug articles was not uniform?
Response: Thank you for your comment. We acknowledge that our previous expression may have been unclear. Initially, the full content was provided in the supplementary material. To ensure uniformity and clarity, we have now moved all comparisons to the main text. The revised table presents a consistent and comprehensive summary of the network meta-analysis results for pharmacotherapy in Anorexia-Cachexia Scale improvement.

We sincerely appreciate the reviewers' valuable comments and suggestions, which have helped us improve the quality and clarity of our manuscript. We have carefully addressed each point and made the necessary revisions accordingly. We hope that our responses and modifications meet the expectations of the reviewers and enhance the overall scientific rigor of the study. Thank you for your time and consideration. We look forward to your feedback.

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