

# Multivisceral resection of primary multifocal retroperitoneal sarcomas: a retrospective study from a high-volume sarcoma center

Aobo Zhuang<sup>†</sup>, Yangju Chen<sup>†</sup>, Jiongyuan Wang<sup>†</sup>, Jin Xu, Hanxing Tong, Yuhong Zhou, Yong Zhang\*, Weiqi Lu\*

<sup>†</sup>These authors have contributed equally to this work

## \*Corresponding author

Weiqi Lu

Department of Neurology, Medical Oncology, General Surgery, Zhongshan Hospital, Fudan University, Shanghai, China.

Yong Zhang

Department of Neurology, Medical Oncology, General Surgery, Zhongshan Hospital, Fudan University, Shanghai, China.

## Handling editor:

Michal Heger

Department of Pharmaceutics, Utrecht University, the Netherlands Department of Chemistry, Utrecht University, Utrecht, the Netherlands Department of Pathology, Erasmus Medical Center, the Netherlands Department of Pharmaceutics, Jiaxing University Medical College, Zhejiang, China

#### Review timeline:

Received: 9 January, 2023 Editorial decision: 30 January, 2023 Revision received: 2 March, 2023 Editorial decision: 2 March, 2023 Published online: 28 March, 2023

1<sup>st</sup> Editorial decision 30-Jan-2023

Ref.: Ms. No. JCTRes-D-23-00006

Rural Research Network to Engage Rural and Minority Community Members in Translational Research

Journal of Clinical and Translational Research

Dear Dr. McElfish,

Reviewers have now commented on your paper. You will see that they are advising that you revise your manuscript. If you are prepared to undertake the work required, I would be pleased to reconsider my decision.

For your guidance, reviewers' comments are appended below.

If you decide to revise the work, please submit a list of changes or a rebuttal against each

Journal of Clinical and Translational Research Peer review process file 09.202302.007



point which is being raised when you submit the revised manuscript. Also, please ensure that the track changes function is switched on when implementing the revisions. This enables the reviewers to rapidly verify all changes made.

Your revision is due by Mar 01, 2023.

To submit a revision, go to https://www.editorialmanager.com/jctres/ and log in as an Author. You will see a menu item call Submission Needing Revision. You will find your submission record there.

Yours sincerely

Michal Heger Editor-in-Chief Journal of Clinical and Translational Research

#### Reviewers' comments:

Reviewer #2: The authors provide a succinct summary of barriers to participation by underserved populations in research, specifically: willingness, opportunity, and logistics. However, the manuscript lacks descriptions and analyses of efforts to address these barriers made by this group, and synthesis of insights into successes and failures of those efforts. For example, a description of how the CAB was formed, and how barriers were overcome, is missing. It is well recognized that the practical issues of attending meetings, agreements regarding clarity of roles, among other issues, are barriers to meaningful participation by community representatives. The manuscript would benefit from a description of how barriers were addressed and lessons learned regarding effectiveness of those efforts. Please revise to provide descriptions of actions taken and evaluative comments on those actions.

There is additional documentation related to this decision letter. To access the file(s), please click the link below. You may also login to the system and click the 'View Attachments' link in the Action column.

Authors' response

## **Response to Reviewers**

#### Reviewer 1

Peer review - Rural Research Network to Engage Rural and Minority Community Members in Translational Research – by Yasemin Inaç – 16 January 2023

The paper under review is a study which focuses on the development of a Rural Research Network to engage rural and minority community members in translational research in Arkansas. My general concerns are the following:

1. When reading the abstract the purpose of the study is unclear to me. Does the manuscript explain a study protocol, lessons learned from developing such a research network etc.? Please specify the aim of the paper.



Response: The aim of the paper is to describe the rationale, process, and progress in developing a rural research network. We have clarified that in the aim.

2. Although it is stated that rural and minority populations might be willing to participate in research. There is no information about how community engagement and participation were ensured. Therefore, I'm wondering in which way rural and minority community were included in the design and continuity of the research network?

Response: It is important to note that the network is a mechanism to conduct research, and each of the studies have a different degree of community engagement. We have provided additional information about the community engagement processes for the network, and we have cited articles that describe the individual community engagement for particular studies.

#### Other remarks:

#### Abstract:

• L19: This sentence is written in the past tense while the previous one is written in the present tense. It is unclear to me if the Rural Research Network was temporary or not?

Response: The Rural Research Network is not temporary. We have corrected the tense and ensured that it is clear and consistent throughout.

### Introduction:

• L6: What definition of rural and minority did you use for this project?

Response: The network and the manuscript describing the network does not adopt one single definition of rural. Rural is an inexact term in the US. Numerous US federal and state-level definitions of rural have been created over the years for various programs and regulatory needs. However, there are three federal government agencies whose definitions of what is rural are in widest use: US Census Bureau, Office of Management and Budget, and Economic Research Service of the US Department of Agriculture. While some definitions of rural are very broad, or merely what is left over after urban is defined, several government agencies have created detailed and nuanced definitions of rural to inform ruralspecific research, policies, and programs. These definitions also permit some flexibility, such as allowing users to select from varying degrees of rurality. Agencies involved with rural health services will continue to adapt their definitions, striving to better serve the needs of the rural population. This guide focuses on identifying and describing the various federal definitions and classification schemes for rural in current use and helping users find the appropriate rural definition for program planning, policymaking, and research.



For the network and this manuscript, we did not confine to one single definition; instead, we focus on non-urban areas of Arkansas.

Citation: https://www.ruralhealthinfo.org/topics/what-is-rural

• L6-24: The introduction gives a lot of facts regarding the state of Arkansas but I feel that these facts could be tied together in a better way. At the moment each sentence contains information about the state without linking it together to create more concise paragraph.

Response: We have edited the introduction to create flow and improve concision.

• L14: What do you mean with 'The population'? Is this the entire population of Arkansas or the population in the areas that are designated as being in persistent poverty?

Response: We have clarified to state "rural and minority populations."

• L28 'Figure 1': Although the map is very interesting it could be more informative and in-line with the rules of cartography by adding a title, scale, legend, compass and the latitude and longitude.

Response: We have added a title and compass. We do not feel that scale and latitude and longitude are warranted.

#### Methods:

• Adding a (flow) diagram or a figure to visualize the development of the network would make it more easily understandable.

Response: We attempted to develop a flow chart, but it did not add value to the article, and we respectfully decline to add one.

• The methods section goes in depth about the three departments which created the network but I'm missing information about how the sites were included? Why were these nine locations chosen as regional sites? Was there an open call or was it based on existing collaborations etc.?

Response: We agree with the reviewers. To address this comment, we moved some information from the introduction and added more information about the selection of the clinics. The clinics were selected because they were already established in the rural regions of Arkansas with integrated electronic medical records.

• The table that includes an overview of the studies that were part of the network is very interesting but I'm missing the evaluation of the studies.



Response: The evaluation of each study will be published by the principal investigator of those studies and were not meant to be part of this article. However, we agree that this information is important, and we have cited all studies currently published.

• L7: Could you provide more information on the 'honest broker mechanism'. What does this entail for research participants?

Response: We have provided additional information about the honesty broker.

• L24: Is the MoU signed for each study that is conducted as part of the research network was it signed between each clinic and the overarching director of the network during the preliminary stages of the network?

Response: Yes; an MoU is signed for each study that is conducted as part of the research network. An MoU was signed between each clinic and the overarching director of the network during development of the network, and an additional MoU is signed for each specific study.

• L14: Do the meetings at the end of the study period also include community members and take the opinion of the community/study-participants into account?

Response: Yes; the meetings do include the community advisory board and community level dissemination. We have added this information. As discussed above and below, it is important to note that the network is a mechanism to conduct research, and each of the studies have a different degree of community engagement. We have cited the articles that describe their community engagement and dissemination processes.

## Discussion/conclusion:

• L14: Please wrote the full name before using the abbreviation (CTSA).

Response: We have ensured that acronyms are spelled out at first mention throughout the manuscript.

• L14-L21: The text color seems to be different in this part compared to the rest of the text.

Response: We have ensured that the text color is consistent throughout the manuscript.

• L58: Where you also able to conduct qualitative studies? It would also be interesting to specify the design of each study in the table.



Response: We agree with the reviewer and have added more about each study's method in the table. Yes; we have conducted mixed methods studies with a qualitative component in the network. We have also provided citations for any published articles.

• L19: The focus in the last paragraph is very much on scholarly output and research network between institutions. Information on how rural and minority communities can benefit from the (equitable) research network in the long-term seems to be missing.

Response: We agree with the reviewer, and we have added this information. It is important to note that the network is a mechanism to conduct research, and each of the studies have a different degree of community engagement.

## Reviewer 2

The authors provide a succinct summary of barriers to participation by underserved populations in research, specifically: willingness, opportunity, and logistics. However, the manuscript lacks descriptions and analyses of efforts to address these barriers made by this group, and synthesis of insights into successes and failures of those efforts. For example, a description of how the CAB was formed, and how barriers were overcome, is missing. It is well recognized that the practical issues of attending meetings, agreements regarding clarity of roles, among other issues, are barriers to meaningful participation by community representatives. The manuscript would benefit from a description of how barriers were addressed and lessons learned regarding effectiveness of those efforts.

Please revise to provide descriptions of actions taken and evaluative comments on those actions.

Response: We agree and have added best practices. Specifically, we have discussed best practices around the MOU, collaboration between CTSA and cancer institute partners, use of an honesty broker, and ensuring clinic faculty and residents are able to publish. It is important to note that the network is a mechanism to conduct research, and each of the studies have a different degree of community engagement. Therefore, we have cited the studies that are published so that their level of community engagement is defined.

2<sup>nd</sup> Editorial decision 02-Mar-2023

Ref.: Ms. No. JCTRes-D-23-00006R1

Rural Research Network to Engage Rural and Minority Community Members in Translational Research

Journal of Clinical and Translational Research

Journal of Clinical and Translational Research Peer review process file 09.202302.007



Dear authors,

I am pleased to inform you that your manuscript has been accepted for publication in the Journal of Clinical and Translational Research.

You will receive the proofs of your article shortly, which we kindly ask you to thoroughly review for any errors.

Please notify our assistant editor/production editor when you receive the proofs if your article should belong to a special issue specifying the issue's title.

Thank you for submitting your work to JCTR.

Kindest regards,

Michal Heger Editor-in-Chief Journal of Clinical and Translational Research

Comments from the editors and reviewers: