

Peer Review File

Article information: <https://dx.doi.org/10.21037/tbcr-23-52>

Reviewer Comments

Reviewer A

Comment 1: Abstract: Perhaps remove the comment that the patient wrote a letter to the hospital regarding her unfavorable experience. It's sufficient to state that she voiced her concerns during and at the end of treatment.

Reply 1: Done as suggested

Comment 2: Line 60: change 'moist desquamation can occur' instead of 'often'

Reply 2: Done as suggested

Comment 3: Line 77-78: rephrase to indicate that lower volumes of non-targeted tissue receive less high doses.

Reply 3: Done as suggested

Comment 4: Line 84: Revise to read 'long term local-regional control and survival'

Reply 4: Done. Changed to disease-free survival

Comment 5: Line 85: strike the word 'extremely'. The author does a good job of outlining the importance of RD and does not need to use additional language to drive the relevance of the paper.

Reply 5: Done as suggested

Comment 6: Methods: Discuss whether the patient was considered to be brought back to the OR to have the DCIS margins removed. If not, outline the dose/fractionation and decision for boost. Please include prescription, dose, target, and technique.

Reply 6: Done as suggested

Comment 7: Methods: strike the patient listening to her favorite music. This is not relevant and detracts from the argument and prose.

Reply 7: Done as suggested

Comment 8: Methods and paper: was it a radiologist, or radiation oncologist?

Reply 8: Done. Changed to radiation oncologist throughout the article

Comment 9: Case Report: please address the tone and temper the language when objectively reporting the patient's experience. it is clear the patient is upset and that this is captured. However, we do not want this report to read like a personal blog or essay but rather a scientific article. The author here is a very good writer. The paper just needs some attention to tone.

Reply 9: Done as suggested

Comment 10: Discussion: avoid quotations such as in lines 270-272 unless expressly stated. Otherwise, assuming patient answers or statements is speculative and beyond the scope of a research article.

Reply 10: Done as suggested

Comment 11: Conclusion: Agree with the author that all members of the RT team play an equally important role in caring for patients. Happy to see this here.

Reply 11: Thank you for the validation of this idea

Comment 12: It would be useful to include a figure of a Timeline that shows, at what points, the citation 32 Clinical Guide has which elements implemented at which times throughout care. This will help the readers understand how to practically roll out each phase of the Clinical Guide when caring for patients.

Reply 12: In the article published in Healthcare, the Clinician Guide was presented as a table. In the article for TBCR, I decided to write the contents of the table in narrative form. However, if the editors prefer to have the content presented as a table, this may satisfy the suggestion of a timeline. I have attached a document entitled “A Clinician Guide to Provide Holistic Care of Breast Cancer Patients Receiving RT.”

I will leave this decision to the editor’s discretion and approve the format as the editors prefer.

Reviewer B

Comment 1: TITLE: Suggestion: “The Need for a holistic guide for managing radiation treatment induced dermatitis for breast cancer: A Case Study”. To my knowledge, there are no published studies that show RD can be prevented, only reduced symptoms or symptoms managed. Please be mindful of exaggerating results.

Reply 1: Changed the title to “The Need for a Holistic Guide to Prevent and Manage Radiation Dermatitis in Patients with Breast Cancer: A Case Report”

Comment 2: Be careful of using the term “long-term survival”. Reviewer suggests more appropriate to cancer diagnosis, such as “disease-free survival” or “progression-free survival”. You cannot predict “long-term survival” in life because of too many variables that cannot be anticipated (i.e.: hit by a bus tomorrow has nothing to do with cancer progression or management of RD).

Reply 2: Done as suggested

Comment 3: Be careful about claims using topical steroids without the disclaimer that individuals with Diabetes may not be able to use these products without close medical care of blood sugar levels if used at all.

Reply 3: Done as suggested

Comment 4: Much of the case study is focused on therapeutics communication,

supportive measures, instilling patient confidence to manage symptoms, etc... However, other supportive measures, practice-based, include cool damp cotton cloths to immediately cool the skin after RT. The reviewer would suggest looking into these.

Reply 4: Downloaded and reviewed the ONS guideline which was consistent with the Evidence-based Skin Care Plan

Comment 5: The paper is lacking in providing evidence-based skin care guidelines. Reviewer suggests looking into the Oncology Nursing Society's Putting Evidence into Practice (PEP) guidelines and resources. Check out:

(https://www.ons.org/explore-resources?source=1506&display=results&sort_by=created&items_per_page=50)

Reply 5: The discussion section of the paper indicates that the Clinician Guide and Evidence-based Skin Care Plan was based on an integrative review of the literature and published in the journal Healthcare. Citations of articles from the review are cited in the discussion of this case report.

Comment 6: To further research RD, the reviewer would suggest grading the RD at each weekly visit using CTCAE or RTOG. This way, future scientists can build off what you have completed.

Reply 6: Agree and include under physical assessment. Gave reference for the RTOG and CTCAE as suggested and included in the reference list.

Comment 7: Several major universities and cancer centers have their SOC for managing RD online. You may find some of these useful as you continue to refine your guidelines. Here is an example:

<https://www.mskcc.org/cancer-care/patient-education/skin-care-guidelines-patients-receiving-radiation-therapy>

Reply 7: Thank you very much for sharing the ONS and MSKCC resources which I carefully reviewed and added some language regarding "do NOT scrub."