




Coping Mechanisms Among Patients with Terminal Illnesses

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1. Round 1

1.1. Reviewer 1

Reviewer:

While purposive sampling is appropriate for qualitative research, the rationale for selecting specific types of terminal illnesses (cancer, heart disease, etc.) should be better articulated. How do these conditions affect the generalizability of your findings?

Clarify at what point data saturation was reached and provide a rationale. This could include mentioning the number of interviews conducted after no new themes emerged, to substantiate the claim of saturation.

Enhance transparency in the data analysis section by describing the process of coding in NVivo more comprehensively. Were there multiple coders? If so, how did you address inter-coder reliability?

Expand the ethical considerations section by detailing any specific ethical challenges faced during the interview process with terminally ill patients and how they were mitigated.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

Discuss the measures taken to ensure the validity and reliability of the thematic analysis results. This could involve triangulation methods, member checks, or other verification techniques used during the study.

The discussion could be strengthened by providing more concrete suggestions for healthcare providers based on your findings. How can the identified coping mechanisms be integrated into patient care strategies?

The limitations section should address the potential bias introduced by conducting interviews in English only, as this may have excluded non-English speaking participants. Future research directions could include studies in multilingual settings to compare coping mechanisms across different cultural and linguistic groups.

The abstract should briefly mention the key findings related to the four main themes of coping mechanisms. This would provide readers with a clearer snapshot of what to expect in the paper.

Some references seem outdated. Include more recent studies (post-2015) that could provide updated insights into the coping mechanisms for terminally ill patients.

Response: Revised and uploaded the manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.