Review of: "The Assessment of Anxiety Levels in Undergraduate Medical Students and The Determination of Various Coping Mechanisms Used"

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Potential competing interests: No potential competing interests to declare.

Thank you for giving me the opportunity to review this study.

This cross-sectional study was assessing the anxiety levels in undergraduate medical students and determining the most effective of various coping mechanisms. This study was conducted in Peshawar, Pakistan in 2019. Apparently, the authors comparing these two outcomes according to sex, medical institution, students' residence, and year of academic study. It is indeed an important topic to address. However, the authors might need to consider several points to improve their research article in a structural order.

Abstract

1. Avoiding uncommon abbreviations in the abstract is always advisable.
2. Please provide general information on anxiety experienced and coping methods used by students in, such as actual numbers (and/or percentage)
3. Please provide statistical analyses used to determine the association between variables

Introduction

1. This part needs to be restructured significantly by considering the flow of each paragraph. The movement from a paragraph to the next one could be smoother. The incidence of anxiety in undergraduate medical students in any other institutions are needed to be included as well.
2. The aims of study need to be included in the last paragraph of the Introduction section, but not in The Method section.

Methods

1. I suggest to provide the criteria for excluding and including participants in the study, including the reason why the 9th year of undergraduate medical students were excluded.
2. It is always better to submit the study protocol to an ethic committee prior conducting the study to justify that the study is valid and ethically correct.
3. To get a better clinical implication of the study results, I suggest to define the anxiety level into different category (mild, moderate, and severe) rather than using actual numbers to interpret the significance of the results. As consequence, it will change the statistical analyses used.

4. For me, it is not quite clear, whether sex, medical institution, students' residence, and year of academic study are used to stratify the results. Both anxiety level and the coping mechanism seems to be assessed to all variables above.

Results

I recommend to present characteristics (demographic data) of participants in a table as well as the results of bivariate analyses done by the authors. Hence, the readers will understand easily by looking at tables.