

REVIEWER'S REPORT

Manuscript No.: IJAR-55671

Title: Occurrence and determinants of MSS among health care students in Jeddah, Saudi Arabia,

Recommendation:

Accept as it isYES.....

Accept after minor revision.....

Accept after major revision

Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality		√		
Techn. Quality		√		
Clarity		√		
Significance		√		

Reviewer Name: PROF. DR DILLIP KUMAR MOHAPATRA

Detailed Reviewer's Report

Reviewer Report: "Occurrence and determinants of MSS among healthcare students in Jeddah, Saudi Arabia"

1. Strengths of the Study

Methodological Strengths

Adequate sample size (n=403) with strong response rate, improving statistical reliability.

Use of validated psychological instruments (SHAI-18 and MSD Perception/Distress scales).

Pilot testing ensured internal reliability, with Cronbach's alpha values acceptable for both subscales.

Multivariate statistical approach (t-tests, Chi-square, ANOVA, Pearson correlation) appropriately applied.

Research Strengths

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Clear identification of MSS, health anxiety, and MSD as relevant issues in medical education.

Demonstrates **progressive decline in health anxiety** as students advance, which aligns with developmental and educational theories.

Highlights a **moderate correlation** between health anxiety and somatic distress, suggesting a shared cognitive–affective mechanism.

Contextual & Practical Strengths

Focuses on **Saudi Arabian medical students**, a population with growing need for mental health research.

Provides **comparative prevalence data** that adds value to the regional literature.

Identifies **female gender, marital status, and academic stage** as important factors influencing MSS.

2. Weaknesses / Limitations of the Study

Methodological Limitations

Convenience sampling limits generalizability beyond the selected college.

Cross-sectional design restricts causal inference; psychological variables may fluctuate over time.

Self-reported GPA may introduce reporting bias.

Google Form data collection may exclude students with limited digital access or those less engaged.

Analytical Limitations

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Some statistically significant correlations (e.g., GPA vs SHA: $r = -0.017$) are **too weak to be practically meaningful**, despite p-values.

Certain demographic variables (e.g., marital status) have **small subgroup sizes**, affecting statistical power.

Conceptual Limitations

MSS is sometimes confused with health anxiety; although the manuscript addresses this difference, the **operational distinction could be strengthened**.

The study does not explore **mediating factors** such as personality, coping strategies, or burnout, which may influence health anxiety.

Reporting Limitations

Tables and figures (e.g., Figure 1) require **more clarity and consistent formatting** for publication standards.

The conclusion section appears **incomplete/truncated**.

3. Significance of the Study

Contribution to Medical Education

Demonstrates that **pre-clinical students are at highest risk** for MSS, health anxiety, and somatic distress—important for curriculum planners.

Supports evidence that **mental health interventions should be integrated early** in medical training.

Contribution to Psychological Research

Reinforces theoretical models where **health anxiety heightens symptom perception**, creating cyclical somatic distress.

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Highlights the need for **cognitive-behavioral and uncertainty-management interventions**.

Contribution to Regional Literature

Adds **updated prevalence and risk-factor data** for Saudi Arabia and the Gulf region.

Addresses a **gap in local research** concerning psychological determinants in early medical education.

4. Key Points

Health anxiety and medically unexplained somatic distress (MSD) are **most prevalent in early medical years**, declining as students progress.

Female gender, marital status, and lower academic performance are associated with higher health anxiety.

GPA has very weak negative correlations with both SHAI-18 and MSD scores—statistically significant but educationally negligible.

Moderate positive correlation between SHAI-18 and MSD indicates a meaningful link between illness anxiety and somatic distress.

Findings support **early psychological support**, especially before clinical exposure.

Study underscores the need for **curriculum-integrated mental health programs** and awareness about MSS.

Presents a region-specific perspective on MSS among **Saudi medical students**, enhancing international comparability.
