OPEN PEER REVIEW

Open Peer Review (OPR)

As a new feature for progressing towards transparency, we decided to open a new window for all of our editors as well as authors titled "**Open Peer Review**". We hope by this new facility, our reviewers will be more motivated and authors will be more satisfied with the review process. We believe that publishing our peer review reports could make a transparent and clear environment for all our efforts within a journal, but not all reviewers tend to publish their comments.

What is "Open Peer Review" process?

An "Open Peer Review" process is making the details of all review process (including reviewers, associate editors, and EICs comments) as "Public" as it is agreed by EIC, Authors, and reviewers.

Advantages of "Open Peer Review" process

- More transparency, constructiveness and tactful comments of the peer review process: leads to an increase in the quality of reviews
- More motivations for all involved roles in the review process
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Anesthesiology and Pain Medicine
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Peer Review Report for "Comparative Study of Effect of Spinal Anesthesia in Sitting and Lateral Positions on the Onset Time of Sensory Block and Hemodynamic Condition in Cesarean Section: A Randomized Clinical Trial"

Author(s): Nahid Manouchehrian, Abbas Moradi, Leyla Torkashvand

Review Timeline:

Submit Date:	27 Nov 2020
Revised Date:	29 Jan 2021
Accepted Date:	31 Jan 2021

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (0) — 13 Dec 2020

Dear AE,
Thank you for the opportunity to review this manuscript. . Although the authors have tried to focus on a very concerning spinal anesthesia issue, the study lacks the required novelty and precision. Therefore, my suggestion is “reject”. However, my comments are as follows:
1- How did the assessor, blind about the group of the patient
2- Please mention the weak and strong points of your study
3- The authors should have done a power analysis of the study and calculated the sample size.
Thanks.

REFEREE: Reviewer | **Revision** (0) — 27 Dec 2020

Dear AE,
There is no novelty in this article, and results were published in the text. Please describe what was the aim of the authors? and what was their difference to available main text?

Thanks.

REFEREE: Reviewer | **Revision** (0) 27 Dec 2020

Dear AE,
I welcome to the work of authors entitled: "Comparative Study of Spinal Anesthesia in the Sitting and Lateral Positions on the onset time of Sensory Block and Hemodynamic Condition in Cesarean Section : A Randomised Clinical Trial"
I have attached my corrections as a word file.
The text of the manuscript should be revised in terms of grammar, enhancement, punctuation, spelling and style.
My decision about this manuscript: acceptable with minor corrections
Thanks.

REFEREE: Associate Editor | **Revision** (0) 27 Dec 2020

Dear EIC,
Based on the reviewers' recommendations I think this manuscript needs revision before considering it for publication.
Thanks.

REFEREE: Associate Editor | **Revision** (0) 1 Jan 2021

Dear EIC,
I read with interest this submitted manuscript. In this format, due to lack of novelty and also several similar published papers, after some corrections, it may be considered only as Brief Report.
If authors are interested to publish their article as research format, consider and add all below 13 references (it can also be done by replacing some of the previous ref):
- Jaafarpour M, Taghizadeh Z, Shafiei E, Vasigh A, Sayehmiri K . The Effect of Intrathecal Meperidine on Maternal and Newborn Outcomes After Cesarean Section: A Systematic Review and Meta-Analysis Study, Anesth Pain Med. 2020;10(2):e100375.
- Gousheh M R, Akhondzade R, Asl Aghahoseini H, Olapour A, Rashidi M. The Effects of Pre-Spinal Anesthesia Administration of Crystalloid and Colloid Solutions on Hypotension in Elective Cesarean Section, Anesth Pain Med. 2018;8(4):e69446.
- Rajabi M, Razavizade M, Hamidi-Shad M, Tabasi Z, Akbari H, et al. Magnesium Sulfate and Clonidine; Effects on Hemodynamic Factors and Depth of General Anesthesia in Cesarean Section, Anesth Pain Med. 2020;10(5):e100563.
- Hajian P, Nikooseresht M, Lotfi T. Comparison of 1- and 2-Minute Sitting Positions Versus Immediately Lying Down on Hemodynamic Variables After Spinal Anesthesia with Hyperbaric Bupivacaine in Elective Cesarean Section, Anesth Pain Med. 2017;7(2):e43462.
- Nugroho AM, Sugiarto A, Chandra S, Lembahmanah L, Septica R I, et al. A Comparative Study of Fractionated Versus Single Dose Injection for Spinal Anesthesia During Cesarean Section in Patients with Pregnancy-Induced Hypertension, Anesth Pain Med. 2019;9(1):e85115.
- Shafeinia A, Ghaed MA, Nikoubakht N. The Effect of Phenylephrine Infusion on Maternal Hemodynamic Changes During Spinal Anesthesia for Cesarean Delivery, Anesth Pain Med.

2020;10(1):e99094.
- Olapour A, Akhondzadeh R, Rashidi M, Gousheh M, Homayoon R. Comparing the Effect of Bupivacaine and Ropivacaine in Cesarean Delivery with Spinal Anesthesia, Anesth Pain Med. 2020;10(1):e94155.
- Zangouei A , Zahraei SAH , Sabertanha A, Nademi A, Golafshan Z, et al. Effect of Low-Dose Intravenous Ketamine on Prevention of Headache After Spinal Anesthesia in Patients Undergoing Elective Cesarean Section: A Double-Blind Clinical Trial Study, Anesth Pain Med. 2019 9(6):e97249.
- Atashkhoei S, Abri R, Naghipour B, Hatami Marandi P, Fazeli Danesh MT. Effect of Glucose Containing Crystalloid Infusion on Maternal Hemodynamic Status After Spinal Anesthesia for Cesarean Section, Anesth Pain Med. 2018;8(4):e80184.
- Chandra S, Nugroho AM, Agus H, Susilo AP. How Low Can We Go? A Double-Blinded Randomized Controlled Trial to Compare Bupivacaine 5 mg and Bupivacaine 7.5 mg for Spinal Anesthesia in Cesarean Delivery in Indonesian Population, Anesth Pain Med. 2019;9(2):e91275.
- Imani F, Entezary SR, Alebouyeh MR, Parhizgar S. The maternal and neonatal effects of adding tramadol to 2% lidocaine in epidural anesthesia for cesarean section, Anesth Pain Med. 2011;1(1):25-29
- Derakhshan P, Imani F, Koleini Z S, Barati A. Comparison of Adding Sufentanil and Low-Dose Epinephrine to Bupivacaine in Spinal Anesthesia: A Randomized, Double-Blind, Clinical Trial, Anesth Pain Med. 2018;8(5):e69600
- Fathi M, Imani F, Joudi M, Gudarzi V. Comparison the Effects of Ringer`s Lactate and Hydroxyethyl Starch on Hemodynamic Parameter After Spinal Anesthesia: A Randomized Clinical Trial. Anesth Pain Med. 2013;2(3):127-33.
Regards

REFEREE: EIC | **Revision (0)** 1 Jan 2021

Dear Author,
The reviewers' comments are mentioned. Please correct the details as mentioned above carefully according to reviewers' request.
Thanks.

OPEN PEER REVIEW

Revision (1)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

Dear Reviewer 1:

Thanks for your comments, all the requested corrections were made and marked in red font.

1-The method of blinding is explained in the method of the study.

2-The weak and strong points of the study are detailed at the end of the discussion.

3- Descriptions related to study power and sample size are given at the beginning of the study design.

Dear Reviewer 2:

Thanks for your comments.

In text book of Miller, it is mentioned that in obstetric population small studies have shown that spinal anesthesia in a sitting position has a later onset of sensory block than the lateral position, but there is no comparison between the hemodynamic status of patients in sitting and lateral positions. Our aim in this study was to compare the hemodynamic status in lateral and sitting positions and to discuss it more, but at the same time with the evaluation of the hemodynamics, the onset of sensory and motor block was also examined.

Dear Reviewer 3:

Thanks for your comments, writing corrections and other requested corrections have been done and highlighted.

Regards

OPEN PEER REVIEW

Revision (1)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (1) 31 Jan 2021

Dear AE,
Thank you for inviting me to review again the revised format of manuscript ID#111483. The author could correct the majority of requested items, and now it can be considered for the next step during the final decision.
Sincerely yours

REFEREE: Associate Editor | **Revision** (1) 31 Jan 2021

Dear EIC,
Based on reviewers' comments, the article titled "Comparative Study of Spinal Anesthesia in the Sitting and Lateral Positions on the onset time of Sensory Block and Hemodynamic Condition in Cesarean Section" can be accepted for publishing.
Final decision: Acceptance
Regards

REFEREE: EIC | **Revision** (1) 31 Jan 2021

Dear Author,
The document is reviewed carefully by the reviewers. According to their comments and your revisions as requested, this manuscript is accepted.
Thanks.