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
- Authors' satisfactions from the review process: Increases honesty between authors and reviewers
- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

Anesthesiology and Pain Medicine
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Peer Review Report for "Inferior Hypogastric Block for the Treatment of Chronic Pelvic Pain"

Author(s): Ivan Urits, Ruben Schwartz, Harish Bangalore Siddaiah, Sathyadev Kikkeri, David Chernobylsky, Karina Charipova, Jai Won Jung, Farnad Imani, Mohsen Khorramian, Giustino Varrassi, Elyse M. Cornett, Alan D. Kaye, Omar Viswanath

Review Timeline:

Submit Date: 16 Dec 2020
Revised Date: 30 Jan 2021
Accepted Date: 30 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.

Farsad Imani: Reviewer | **Revision** (0) — 24 Dec 2020

Dear AE,
An important topic is discussed in this paper, pelvic pain can be a complex disorder, restriction of activities imposed by this pain and a significant reduction in the function and quality of life can be very frustrating for patients. The authors state that they want to elucidate several aspects to the treatment of chronic pelvic pain by inferior hypogastric block. Overall it's a relevant paper and warrants publication with the following suggestions:
1. Line 143: At evidence acquisition: The not only type of study (Narrative Review) but also sources for this review the data sources, including the research strategies, time of the study, and other sources of the used materials, such as subsequent reference searches of retrieved articles, the methods used for quality assessment and the inclusion of identified articles should be mentioned.
2. Although Limitations of some treatments have been added but limitations of the whole manuscript should be added.
3. Line 359: Conclusions: Future perspectives or comments to researches should be added.
Thanks.

REFEREE: Associate Editor | **Revision** (0) — 2 Jan 2021

Dear EIC,

Recommend to the author for considering below five references:

- Tavakoli F, Yousefshahi F, Dabir A, Majedi H. Superior Hypogastric Plexus Block in the Lateral Position: A Case Report, Anesth Pain Med. 2019;9(5):e94706.
- Malik K M, Imani F, Beckerly R , Chovatiya R. Risk of Opioid Use Disorder from Exposure to Opioids in the Perioperative Period: A Systematic Review, Anesth Pain Med. 2020;10(1):e101339.
- Imani F, Varrassi G. Ketamine as Adjuvant for Acute Pain Management, Anesth Pain Med. 2019;9(6):e100178.
- Hemati K, Zaman B, Hassani V, Imani F, Dariaie P. Efficacy of Fentanyl Transdermal Patch in the Treatment of Chronic Soft Tissue Cancer Pain. Anesth Pain Med. 2015;5(1): e22900.
- Yousefshahi F, Tahmasebi M. Long-Lasting Orthostatic Hypotension and Constipation After Celiac Plexus Block; A Case Report, Anesth Pain Med. 2018 ; 8(1):e63221.

Regards

REFEREE: EIC | **Revision (0)** 2 Jan 2021

Dear Author,

Your article is reviewed by the reviewers carefully. According to their comments, this document needs minor revision. Please follow their comments as requested.

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.

Reviewers' Comments:

Reviewer 1:
Dear Editor in Chief
An important topic is discussed in this paper, pelvic pain can be a complex disorder, restriction of activities imposed by this pain and a significant reduction in the function and quality of life can be very frustrating for patients. The authors states that they want to elucidate several aspects to treatment of chronic pelvic pain by inferior hypogastric block. Over all it's a relevant paper and warrants publication with the following suggestions:
1. Line 143: At evidence acquisition: Not only type of study (Narrative Review) but also sources for this review the data sources, including the research strategies, time of the study, and other sources of the used materials, such as subsequent reference searches of retrieved articles, the methods used for quality assessment and the inclusion of identified articles should be mentioned.

Evidence Acquisition: Narrative Review. In 2020, we performed a comprehensive search for English-language studies related to inferior hypogastric block for the treatment of chronic pelvic pain. We searched the following databases: PubMed, Medline, SciHub, Cochrane Database of Systematic Reviews, and Google Scholar. We used the following combinations of keywords: chronic pelvic pain, inferior hypogastric plexus, transsacral fluoroscopic technique, coccygeal transverse approach. We tried to include as many recent manuscripts as possible (within the last three years) but also included papers that were older than three years if they were particularly relevant to our topic. We also attempted to search for, use, and cite primary manuscripts whenever possible.

2. Although Limitations of some treatments has been added but limitations of the whole manuscript should be added.

This manuscript does have limitations. The nature of a narrative review itself is subjective. Therefore, although we tried to remain unbiased in our inclusion of manuscripts to discuss in the paper (as evidenced by the Limitations section above) it it still possible that the authors were biased of which manuscripts to include (selection bias), the conclusions that were drawn from these studies, and how the studies were analyzed.

3. Line 359: Conclusions: Future perspectives or comment to researches should be added.

Future perspectives should include successful CPP evaluation and management needs a change in focus towards a biopsychosocial paradigm that targets not only individual peripheral

pathology sources, but also the common underlying CPP core mechanisms. Using a multimodal, systemic approach, future research should further examine these core processes and how best to target them.

Associate Editor's Comments:

Associate Editor 1:

Dear Editor in Chief
Recommend to author for considering below five references: OK

Tavakoli F, Yousefshahi F, Dabir A, Majedi H. Superior Hypogastric Plexus Block in the Lateral Position: A Case Report, Anesth Pain Med. 2019;9(5):e94706.

Malik K M, Imani F, Beckerly R , Chovatiya R. Risk of Opioid Use Disorder from Exposure to Opioids in the Perioperative Period: A Systematic Review, Anesth Pain Med. 2020;10(1):e101339.

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Hemati K, Zaman B, Hassani V, Imani F, Dariaie P. Efficacy of Fentanyl Transdermal Patch in the Treatment of Chronic Soft Tissue Cancer Pain. Anesth Pain Med. 2015;5(1): e22900.

Yousefshahi F, Tahmasebi M. Long-Lasting Orthostatic Hypotension and Constipation After Celiac Plexus Block; A Case Report, Anesth Pain Med. 2018 ; 8(1):e63221.
Regards
AE

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Revision (1)

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REFEREE: Reviewer | **Revision** (1) 30 Jan 2021

Dear AE,
This revised manuscript ID#112225 was corrected by the author and can be considered for the next steps.
Sincerely yours

REFEREE: Associate Editor | **Revision** (1) 30 Jan 2021

Dear EIC,
Based on reviewers' comments this revised manuscript titled "Inferior Hypogastric Block for the Treatment of Chronic Pelvic Pain" is acceptable for publishing at Anesth Pain Med.
Kind regards

REFEREE: EIC | **Revision** (1) 30 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.