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 "**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:

Peer Review

Anesthesiology and Pain Medicine
Article DOI: https://doi.org/10.5812/aapm.121834
Published in: Anesthesiology and Pain Medicine: 12(1) ; e121834

Peer Review Report for "Evaluation of the Effects of Oral Magnesium Sachet on the Prevention of Spinal Anesthesia-Induced Headache After Cesarean Section: A Randomized Clinical Trial"

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Review Timeline:

Submit Date:	12 Dec 2021
Revised Date:	31 Jan 2022
Accepted Date:	8 Feb 2022

Revision (0)

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

REFEREE : EIC

7 Jan 2022

Major revision

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.

Reply to reviewer comments:

Dear EIC

Thanks for your time and valuable comments. All of the comments were corrected point by point and clarified below. The changes were highlighted in the text.

Reviewer1 comments

1- "*Conclusion: should be presented completely and fair, especially [but its impact on reducing analgesic consumption is not significant], which has been added in abstract, should be added in conclusion."*
Reply: The requested sentence was added at the end of conclusion.

2- "*References: Need some corrections and up-data."*
Reply: Most of the recommended references were added. The new references with their citation number in the manuscript text are as below:

14. Safarpour AR, Mehrabi M, Tarkesh F, Ashrafizadeh H, Keshtkar A, Askari H, et al. Aminophylline for Prevention and/or Treatment of Post-Dural Puncture Headache: A Systematic Review and Meta-Analysis Study Protocol. Anesthesiology and Pain Medicine. 2021;11(5).
15. Zangouei A, Zahraei SAH, Sabertanha A, Nademi A, Golafshan Z, Zangoue M. 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. Anesthesiology and Pain Medicine. 2019;9(6).
20. Amighi D, Majedi H, Tafakhori A, Orandi A. The Efficacy of Sphenopalatine Ganglion Block and Radiofrequency Denervation in the Treatment of Cluster Headache: A Case Series. Anesthesiology and Pain Medicine. 2020;10(6).
24. Imani F, Rahimzadeh P, Faiz H-R, Abdullahzadeh-Baghaei A. An evaluation of the adding magnesium sulfate to ropivacaine on ultrasound-guided transverse abdominis plane block after abdominal hysterectomy. Anesthesiology and Pain Medicine. 2018;8(4).
25. Rashwan DAEK, Mohammed AR, Rashwan SAK, Abd El Basset AS, Nafady HA. Efficacy of serratus anterior plane block using bupivacaine/magnesium sulfate versus bupivacaine/nalbuphine for mastectomy: A randomized, double-blinded comparative study. Anesthesiology and Pain Medicine. 2020;10(3).
26. Urits I, Jung JW, Amgalan A, Fortier L, Anya A, Wesp B, et al. Utilization of magnesium for the treatment of chronic pain. Anesthesiology and Pain Medicine. 2021;11(1).
. 2021;11(3).

Reviewer 2:

1- "*I searched for the IRCT number. It seems that it should be replaced with IRCT20120215009014N289"*
Reply: The IRCT code was corrected.

2- "*The tip design of the spinal needle has a significant effect on the occurrence of PDPH. Please clarify it in the main text."*
Reply: The needle type and orientation of needle tip were explained precisely

.

3- "*The rescue analgesic regiment for PDPH needs more explanation"*
Reply: rescue analgesia consists of acetaminophen or Novafen and was clarified in the text.
4- "*Accordingly, the study time interval needs correction."*

Reply: According to IRCT registration site, data collection was started at 8/2019 and the same time was mentioned in the article(Aug 2019)

Reviewer3

1- The reviewer3 commentd that "there are a couple of articles under this title!!" Would you please mention only one of the related articles that used oral magnesium for prophylaxis or treatment of PDPH. We can not find any !!...There are a lot of articles that studied the effect of IV infusion magnesium sulfate or adding magnesium to nerve block coctaile; on post operative pain but no article studied the effect of oral magnesium on PDPH .

Sincerely

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OPEN PEER REVIEW

Revision (1)

Farnad Imani : EIC

8 Feb 2022

Dear AUTHORS,
We are pleased to inform you that your manuscript has been accepted for publication.