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
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You can find out more at:
https://brieflands.com/briefland/knowledgebase/category/tree.html#opr.html

Archives of Neuroscience
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Peer Review Report for "Evaluating the Relationship Between Myofascial Pain Syndrome (MPS) and Physical and Mental Health Status in Patients with Stroke"

Author(s): Masoud Hatefi, Lida Nouri

Review Timeline:

Submit Date: 13 Sep 2021
Revised Date: 16 Oct 2021
Accepted Date: 21 Oct 2021

Revision (0)

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

hamid hojjati: Reviewer | Revision (0) 16 Sep 2021

Dear AE,
Comments for the authors:
1. In the introductory part of the article, explain more about Myofascial Trigger Points.
2. The Objectives section needs to be edited. The purpose of your study was the relationship between pain and quality of life and mental health or the relationship between myofascial syndrome and ...?
3. Is the case study a control case or a cross-sectional description? Please specify. Needs to be modified both in the introduction and in the methodology.
4. Explain how to collect more samples? What method is used?
5. How many nursing homes were there? Have you reviewed them all? How many sample sizes are community-level seniors and how many are nursing home seniors?
6. Was the sample size of the nursing home and the elderly living in the community equal in the control and test groups? Please specify.
7. Explain the procedure in more detail. For example, ethics criteria in research, sampling

method, how to complete questionnaires, licenses obtained sample size drop, etc.
8. In the analysis method, linear regression method was used. Please mention it too.
9. Specify the sample size formula.
10. A very good analysis of the article has been done, which is commendable but review the findings again. In the explanation of the tables, you should write more carefully. In some parts, the explanation of the tables is not correct.
11. It is necessary to measure the relationship between age and the variables under study.
12. Some of the references in the references section DOI to other articles. Please correct.
Thanks.

REFEREE: Reviewer | **Revision** (0) 8 Oct 2021

Dear AE,
Comments for the authors:
Abstract
- The Aim was written incorrectly.
- The type of study is wrong.
- Please be sure to mention the values of the results of correlation analyzes in the findings.
- Conclusions are consistent with the findings.
- In one part of the article, write down all the acronyms listed.
- Mention the keywords according to the title of the article and the abstract of the article.
Introduction
- No comment
Methods
- The type of study is wrong.
- Please list entry and exit criteria in conjunction with other articles. Be sure to check.
- Demographic Characteristic needed to edit.
- Data analysis should be fully mentioned. You used good analyzes but did not explain them. Please explain.
- From which hospitals or centers have patients been sampled?
- How is the sample size estimated?
- Mention that you have used the Persian version of the questionnaires.
- Mention the criteria of ethics in research.
- What evidence do you have of the physiotherapist who worked with you?(Bachelor, Master or PhD)
Results
- Table 1 should indicate the difference or no difference in age.
- Please explain more about the findings of the mentioned tables.
Discussion
- Explain the prevalence of problems in patients with stroke. For example, pain and ...
Conclusions
- Conclusions are consistent with the findings.
References
- No comment
Thanks.

REFEREE: Associate Editor | **Revision** (0) 12 Oct 2021

Dear EIC,
The manuscript needs major revision. Please revise it based on the reviewers' comments.
Thanks.

REFEREE: EIC | **Revision** (0) 12 Oct 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.

Reviewer 1

Abstract

The Aim was written incorrectly.

Reply:

Objectives: This study is to definition relationship between Myofascial Syndrome with physical and mental health status in patients with Stroke.

The type of study is wrong.

Reply:

Case control

Please be sure to mention the values of the results of correlation analyzes in the findings.

Reply:

Results: According to the findings in the case group patients, the M(SD) pain score was 6.35 (1.39), QOL score was 38.86 (11.69) and MH score was 16.26 (2.75). While in the control group, this M(SD) was 2.15 (0.96) in relation to pain, 63.96 (17.52) in relation to QOL and 9.02 (4.63) in relation to MH. Result showed no statistically significant relationship between MS and QOL. But there was a statistically significant inverse relationship between MS and MH, so that the MH status of patients with myofascial syndrome was lower than the MH status of other patients

Conclusions are consistent with the findings.

Reply:

According to the findings of this study, in patients with myofascial syndrome with pain experience and mental health were reported to be lower. Necessary interventions have been done to improve the health status of patients with myofascial syndrome, which will lead to an increase in the health status of these patients.

In one part of the article, write down all the acronyms listed.

Reply:

Abbreviation

MS: myofascial syndrome

QOL: Quality of Life

MH: Mental Health

Mention the keywords according to the title of the article and the abstract of the article.

Reply:

Keywords: Myofascial Syndrome, Pain, Stroke

Introduction

No comment

Reply:

Thank you

The type of study is wrong.

Reply:

Case control

Demographic Characteristic needed to edit.

Reply:

Variable	Cases N (%)	Control N (%)	P-value
Sex	-	-	0.45
Male	74(56.9)	71(54.6)	-
Female	56(43.1)	59(45.4)	-
Job status	-	-	0.46
Employed	54(41.5)	79(60.8)	-
No job	76(58.5)	51(39.2)	-
Education	-	-	0.19
Primary school	38(29.2)	32(24.6)	-
Associate diploma	84(64.6)	91(70)	-
Postgraduates	8(6.2)	7(5.4)	-
Marital status	-	-	0.25
Single	95(73.1)	99(76.2)	-
Married	35(26.9)	31(23.8)	-
Family support	-	-	0.43
Low	33(25.4)	45(34.6)	-
medium	54(41.5)	47(36.2)	-
Much	43(33.1)	38(29.2)	-
Income	-	-	0.54

Weak	69(53.1)	71(54.6)	-
medium	56(43.1)	52(40)	-
Good	5(3.8)	7(5.4)	-
Age (M(SD))	69.43(13.12)	70.70(14.70)	0.76

Data analysis should be fully mentioned. You used good analyzes but did not explain them. Please explain.

Reply:

Results: According to the findings in the case group patients, the M(SD) pain score was 6.35 (1.39), QOL score was 38.86 (11.69) and MH score was 16.26 (2.75). While in the control group, this M(SD) was 2.15 (0.96) in relation to pain, 63.96 (17.52) in relation to QOL and 9.02 (4.63) in relation to MH. Result showed no statistically significant relationship between MS and QOL. But there was a statistically significant inverse relationship between MS and MH, so that the MH status of patients with myofascial syndrome was lower than the MH status of other patients

From which hospitals or centers have patients been sampled?

Reply:

How is the sample size estimated?

Reply:

A total of 280 patients with stroke (140 patients with myofascial syndrome and 140 patients without Myofascial syndrome) were included in the study.

Mention that you have used the Persian version of the questionnaires.

Reply:

I add to the article.

What evidence do you have of the physiotherapist who worked with you? (Bachelor, Master or PhD)

Reply:

The diagnosis of active trigger points in the studied muscles was made by a Has a bachelor's degree in physiotherapy with at least 5 years of experience based on the presence of a tight band in the muscle, having sensitive points in the muscle, pain reset (special pattern of pain propagation following pressure on the trigger points).

Explain the prevalence of problems in patients with stroke. For example, pain and ...

Conclusions

Conclusions are consistent with the findings.

References

No comment

Reply:

Thank you

Reviewer 2

The Objectives section needs to be edited. The purpose of your study was the relationship between pain and quality of life and mental health or the relationship between myofascial syndrome and ...?

Reply:

Given the significant prevalence of stroke and the importance of paying attention to pain in these patients, the aim of this study is to definition relationship between Myofascial Syndrome with physical and mental health status in patients with Stroke.

Is the case study a control case or a cross-sectional description? Please specify. Needs to be modified both in the introduction and in the methodology.

Reply:

control case

Explain how to collect more samples? What method is used?

Reply:

To collect the samples, purpose-based sampling method was used

How many nursing homes were there? Have you reviewed them all? How many sample sizes are community-level seniors and how many are nursing home seniors?

Reply:

All government hospitals as well as 2 nursing homes in Ilam

Was the sample size of the nursing home and the elderly living in the community equal in the control and test groups? Please specify.

Reply:

A total of 280 patients with stroke (140 patients with myofascial syndrome and 140 patients without Myofascial syndrome) were included in the study.

7. Explain the procedure in more detail. For example, ethics criteria in research, sampling method, how to complete questionnaires, licenses obtained, sample size drop, etc.

Reply:

After obtaining the necessary permits from the relevant authorities of Ilam University of Medical Sciences, the researchers sampled and, obtained the informed consent of the patients by explaining the objectives of this research and the confidentiality of the information. Participation in the study was completely voluntary and non-participation in the study had no effect on providing services to patients. Sampling method was of available type and patients referred to hospitals in Ilam were included in the study. In this study, to evaluate all muscles based on the main points of trigger points, the patient was lying on his side, the myofascial status of the multifidus muscle, quadratus lumborum muscle and Iliopsoas muscle, Pectoralis major muscle, Iliocostalis muscle, Piriformis muscle, Gluteus maximus muscle, Gluteus medius and Minimus muscle, Fascia Lata tensor muscle, Bapps femoris muscle and venomous membranous muscle, gastrocnemius and solius muscle, peroneal muscle of upper upper and lower third of leg and anterior tibialis muscle was examined [33]. To collect the samples, purpose-based sampling method was used. Ethical criteria in the research including informed written satisfaction of patients, voluntary participation in the study, non-collection of costs from patients and ethics guidelines were observed in the university research.

In the analysis method, linear regression method was used. Please mention it too.

Reply:

Data analysis was measured using SPSS 16 statistical software and descriptive statistics (mean and standard deviation) and inferential tests (independent t-test, paired t-test, ANOVA, Linear regression).

A very good analysis of the article has been done, which is commendable, but review the findings again. In the explanation of the tables, you should write more carefully. In some parts, the explanation of the tables is not correct.

Reply:

According to the findings of Tables 3 and 4, it was shown that there was no statistically significant relationship between myofascial syndrome and QOL. But there was a statistically significant inverse relationship between myofascial syndrome and MH, so that the MH status of patients with myofascial syndrome was lower than the MH status of other patients. (Table 3,4). According to the findings, there was no relationship between age and pain status, but with age, the quality of life and health of patients decreased($p<0.05$).

It is necessary to measure the relationship between age and the variables under study.

Reply:

According to the findings, there was no relationship between age and pain status, but with age, the quality of life and health of patients decreased($p<0.05$).

Some of the references in the references section DOI to other articles. Please correct.

Reply:

I add to the article.

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.

hamid hojjati: Reviewer | **Revision** (1) 19 Oct 2021

Dear AE,
The study is reviewed carefully. According to comments and revisions by the author, this manuscript is accepted.
Thanks

REFEREE: Reviewer | **Revision** (1) 20 Oct 2021

Dear AE,
The study is reviewed carefully. According to comments and revisions by the author, this manuscript is accepted.
Thanks

REFEREE: Associate Editor | **Revision** (1) 20 Oct 2021

Dear EIC
Based on the authors' answers to the reviewers' comments, the reviewer(s) have recommended publication.
Kind regards.

REFEREE: EIC | **Revision** (1) 21 Oct 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.