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OPEN PEER REVIEW

Assessment of Work-Related Factors Among Drug Abusers in an Educational and Research Addiction Center in Mashhad

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

3 comments · 6 May 2025 – 15 May 2025

Referee 1 Reviewer

MINOR REVISION 6 May 2025

Dear AE,
Thank you very much for giving me this opportunity to review this manuscript.
This revised manuscript presents findings from a cross-sectional study assessing the prevalence of visual impairment (VI) and its impact on health outcomes among nursing home residents in Austria. The authors have addressed many reviewer comments, including clarification of methods, improved contextualization in the introduction, and integration of relevant references. Overall, the revision improves the paper's clarity and scientific rigor, although some areas require further refinement.

@ Strengths
* Relevance: The study addresses an important public health issue with practical implications for elder care and screening programs.
* Data Quality: The use of standardized visual acuity (VA) measurements and inclusion of a large sample enhance the robustness of findings.
* Structured Revision: The authors provided clear point-by-point responses and addressed many prior concerns adequately.

@ Key Concerns and Recommendations
# Statistical Analysis and Interpretation
1. The regression models presented are clearer now, but interaction effects (e.g., age × sex or VI × comorbidities) are not discussed. Clarify whether interaction terms were tested or considered in model selection. If not included, justify this choice.
2. The authors stated "Visual impairment was not significantly associated with depressive symptoms or cognitive decline," yet there are odds ratios that trend toward significance. Report exact p-values in the text (e.g., p = 0.064), not just "ns", and interpret borderline results with caution rather than relying on binary significance.

Terminology Consistency
3. Terms such as "visual impairment," "low vision," and "visual loss" are used variably. Standardize terminology throughout the manuscript and ensure definitions (e.g., WHO classification) are consistently applied in methods and results.

Cognitive Assessment Clarification
4. The use of MoCA in a visually impaired population is problematic without adaptation. Provide more detail on how visual deficits were accounted for during cognitive testing (e.g., which sections were omitted or modified). This affects interpretability.

Impact Discussion
5. The discussion section could better explore mechanisms by which VI influences functional decline (e.g., reduced mobility, social isolation, risk of falls). Add 2–3 sentences reflecting possible causal pathways or mechanisms based on existing literature.

@ Minor Issues
6. Reference 17 is in Persian. References must be in English.

Overall, the authors have made a commendable effort in improving the manuscript. The current version is nearly acceptable for publication, with only a few remaining issues — mainly clarification and presentation

refinements — that should be addressed prior to acceptance.

Final Recommendation: Minor Revision

Associate Editor

MINOR REVISION 11 May 2025

Dear Authors,

Thank you for submitting your manuscript, "Assessment of work-related factors among drug abusers in an educational and research addiction center in Mashhad," to International Journal of High Risk Behaviors and Addiction. We have completed the review process, and I am pleased to inform you that your work has been assessed as suitable for publication pending minor revisions.

The reviewers have provided constructive feedback to enhance the clarity, presentation, and accuracy of your manuscript.

Please address all reviewer comments point-by-point in a response letter, highlight changes in the revised manuscript, and submit the revised manuscript and response.

We appreciate your commitment to improving this work and look forward to receiving your revision.

Kind Regards | Publisher Supervisor

Editor-in-Chief

MINOR REVISION 15 May 2025

Minor Revision

2

Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

The authors did not provide a point-by-point response to the reviewers' comments in this round.

2 Revision 1

1 comment · 22 Jun 2025

Editor-in-Chief

MAJOR REVISION 22 Jun 2025

Dear author,
Mention:
1. the analysis methods in the abstract.
2. the references related to the tools.
3. the validity and reliability of the job conditions checklist.
4. the ethical code.
regards,

3

Revision 2

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear editor in chief

We would like to express our sincere gratitude for their valuable feedback and constructive comments on our manuscript titled "[**Assessment of work-related factors among drug abusers in an educational and research addiction center in Mashhad**]" (Manuscript ID: [161718]). We have carefully considered all the suggestions and have made the necessary revisions to improve the quality of our work. Below, we provide a point-by-point response to the reviewers' comments and outline the changes made to the manuscript.

Comment : the analysis methods in abstract.

Response : the analysis methods revised

The collected data were processed and analyzed using SPSS version 16. Descriptive statistics, including frequencies (percentages) and means (standard deviations), were calculated and presented in appropriate tables. After assessing the normality of the data, the relationships between qualitative and quantitative variables were examined using independent samples T-test or Mann-Whitney U test. Additionally, Pearson and Spearman correlation coefficients were utilized to assess the correlation between quantitative variables. The association between qualitative variables was evaluated using the chi-square test or Fisher's exact test. A significance level of 0.05 was adopted for all statistical tests.

Comment : the related references to the tools

Response: The requested references have been included in the article and highlighted.

Comment : the validity and reliability of job conditions check list

Response: The job conditions checklist employed in our study is a simple, researcher-created instrument designed to assess various work-related factors that may influence substance use among participants. While this checklist has not undergone formal validation processes typically associated with standardized instruments, it was developed based on a thorough review of existing literature and relevant occupational health frameworks.To ensure its applicability and relevance, we conducted preliminary testing with a small sample of participants to evaluate its clarity and comprehensibility. Feedback from this testing informed minor adjustments to enhance the checklist's effectiveness in capturing essential job conditions

Comment : the ethical code

Response : The Ethics Committee of Mashhad University of Medical Sciences approved this research project with code IR.MUMS.MEDICAL.1398.845. The ethical code added to article and highlighted

Comment : **The rationale for the study size is not provided.**

Response : Thank you for your valuable feedback and for highlighting the need for clarification regarding the study size.The sample size of 210 male participants was determined based on a power analysis, which aimed for an 80% power and a significance level (alpha) of 0.05. This analysis indicated that a minimum of 185 participants would be necessary to achieve the study's objectives effectively.To account for potential missing or invalid data, we increased the sample size to 210 participants. This adjustment ensures that we have sufficient data to meet the study's goals while maintaining the robustness of our findings.this sentences added to article and highlighted

Comments : The abstract does not discuss efforts to address potential sources of bias.

Response :Thank you for your insightful comment. We agree that the original abstract did not explicitly mention efforts to minimize potential sources of bias. In response, we have revised the abstract to briefly mention key measures undertaken to reduce bias, including the use of standardized and validated data collection tools (MAP questionnaire), census-based sampling of all eligible patients during the study period, and reliance on documented diagnoses. While we recognize that inherent limitations exist due to the cross-sectional design and reliance on self-reported data, we aimed to reduce selection and measurement bias as much as possible.

New abstract

Background: More than 70% of addicts are employed, and several factors have been identified that increase susceptibility to addiction. The role of occupation in addiction has long been discussed. The present study aimed to investigate the prevalence of work-related factors in individuals suffering from addiction while minimizing potential sources of bias through the use of validated instruments and inclusive sampling.

Objectives: To assess the frequency and prevalence of work-related factors affecting addictive substance use.

Method: This cross-sectional study included all eligible male patients who visited the addiction treatment center of Mashhad University of Medical Sciences during 2020. Data were collected using the validated Maudsley Addiction Profile (MAP) questionnaire and a researcher-developed job conditions checklist. A census sampling method was used to reduce selection bias. Data were analyzed in SPSS 16 at a significance level of 0.05.

Results: A total of 210 male participants (mean age: 39 years) were included. The most frequent job-related predisposing factor was having an addicted colleague (33.3%), followed by hard work (18.6%) and ease of access to drugs in the workplace (13.8%). There was no significant relationship between job-related predisposing factors and job type.

Conclusion: The presence of an addicted colleague was the most common occupational risk factor. Despite the limitations of a cross-sectional design, efforts such as the use of validated tools and a census-based approach were made to reduce potential bias.

Keywords: Addiction, work-related factors, job

Comment : Limitations of the study are not discussed.

Response : Limitations of the study discussed

One of the main limitations of our study was its cross-sectional design, which restricted the ability to draw definitive causal conclusions. Additionally, due to limited funding, the research focused solely on male participants from a single addiction treatment center, limiting the generalizability of the findings to other populations, including females and individuals from diverse geographical or cultural backgrounds. The reliance on self-reported data from the MAP questionnaire and the job conditions checklist further adds to the limitations.

Moreover, the study did not employ advanced statistical methods to control for potential confounding variables. While we used univariate and bivariate statistical tests (such as Chi-square, T-test, and Pearson/Spearman correlations) to examine associations, we did not conduct multivariable analyses like logistic or linear regression, which could have better accounted for confounders such as age, psychiatric disorders, and job-related factors. Consequently, observed associations should be interpreted with caution, and future research should encompass a broader timeframe, multiple locations, and larger patient populations, incorporating multivariate statistical approaches to rigorously explore these relationships and adjust for potential confounders.

Comment : Specific statistical methods to control for confounding are not detailed.

Response : We acknowledge that specific statistical methods to control for confounding were not explicitly detailed in the initial manuscript. As this was a cross-sectional observational study, the primary focus was to explore associations rather than establish causality. However, we did apply several statistical tests to examine the relationships between variables, as detailed in the "Materials and Methods" section. In our analysis, we used: Independent samples T-test and Mann–Whitney U test for comparing continuous variables, Chi-square test or Fisher's exact test for categorical variables, Pearson and Spearman correlation coefficients to assess the strength and direction of associations between continuous variables. Although we did not perform multivariate regression analyses, which are commonly used to adjust for potential confounders, we recognize this as a limitation and have now addressed it explicitly in the Limitations section of the revised manuscript.

We have revised the discussion to clarify that due to the study design and available data, advanced statistical methods such as logistic regression to control for confounding were not applied, and future studies should incorporate them to validate these associations. The following sentence has been added to the discussion.

One of the main limitations of our study was its cross-sectional design, which restricted the ability to draw definitive causal conclusions. Additionally, due to limited funding, the research focused solely on male participants from a single addiction treatment center, limiting the generalizability of the findings to other populations, including females and individuals from diverse geographical or cultural backgrounds. The reliance on self-reported data from the MAP questionnaire and the job conditions checklist further adds to the limitations.

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conduct multivariable analyses like logistic or linear regression, which could have better accounted for confounders such as age, psychiatric disorders, and job-related factors. Consequently, observed associations should be interpreted with caution, and future research should encompass a broader timeframe, multiple locations, and larger patient populations, incorporating multivariate statistical approaches to rigorously explore these relationships and adjust for potential confounders.

Comment : The interpretation does not compare results with similar studies or discuss limitations.

Response : In our discussion, we referenced several studies that align with our findings.

3 Revision 2

1 comment · 3 Sep 2025

Editor-in-Chief

ACCEPT 3 Sep 2025

accept