Innovative Journal of Pediatrics
Volume 33 · Issue 3 · e130774

OPEN PEER REVIEW

The Relationship Between Copeptin Level and Enuresis in Children Aged 5 - 15 Years

Mahshid Mehrjerdian, Leila Barati, Farshid Kompani, Mohammadali Vakili, Fateme Teymouri

SUBMITTED	REVISED	ACCEPTED	DOI
13 Aug 2022	4 Mar 2023	25 Mar 2023	10.5812/ijp-130774

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.

More about open peer review: brieflands.com/knowledgebase/opr

Contents

1 Original submission 2
2 Revision 1 Referee 1 3
Authors' reply to reviewers 4
Reviewer and editor comments 9
3 Revision 2 Referee 1 10
Authors' reply to reviewers 11
Reviewer and editor comments 12

1 Original submission

0 comments

No public comments in this round.

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.

Dear editor,

Thank you very much for your letter and advice. Those comments are all valuable and very helpful for revising and improving our paper. We have studied comments carefully and have made correction which we hope meet with approval.

We hope the revision is acceptable, and I look forward to hearing from you soon. We would like to express our sincere thanks to the editor and reviewers for the constructive and positive comments, and we have revised the paper point-by-point as follows:

Best Regards

Reviewer 1:
The authors aimed to research the effect of copeptin on pathophysiology of nocturnal enuresis.
The number of cases in the study and control group is limited.

This study was a case-control study. The population included children with confirmed monosymptomatic enuresis and children without enuresis referred to the pediatric clinic of Taleghani Hospital in Gorgan in 2020.

The sample size was calculated for the equality test of mean of Copeptin in two independent groups and based on the study of Nalbantoğlu B et al.(7) , according to the estimate of the mean and standard deviation of Copeptin in the group of children with and without enuresis, 3.74 ± 1.44 ,16.57 ± 3.91 pg/mL, respectively and assuming a mean difference (precision) equal to 3 units instead of 12.83 and at the level of significance (α= 0.05) and a power of test (1-β=0.9), respecting the effect of sex, 42 people from each group and a total of 84 people were selected, it is necessary to remember that if the difference between the two averages was considered as .precision, 8 people from each group would have been enough

$$n=\frac{\left(z_{1-\frac{\alpha}{2}}+z_{1-\beta}\right)^2\left(s_1^2+s_2^2\right)}{\left(\overline{x}_1-\overline{x}_2\right)^2}$$

7. Nalbantoğlu B, Yazıcı CM, Nalbantoğlu A, Güzel S, Topçu B, Güzel EÇ, et al. Copeptin as a novel biomarker in nocturnal enuresis. Urology. 2013;82(5):1120-4.

Reviewer 2:
comments for authors:
I welcome your submission. The subject of manuscript is very important and one of the issues involved in children. I reviewed the manuscript and have a few comments. I hope my comments lead to improvement of the manuscript.

Abstract:
1- The study design must be noted in methods.

It was a case control study that mentioned in the method.

2- We are not allowed to use any abbreviation word without definition for the first time: ADH

It was corrected. Anti-Diuretic Hormone (ADH)

3- The correlation of copeptin and ADH must be expressed in introduction, briefly but precise.

It was corrected in the background of abstract.

Introduction:
4- It was good organized and suitable. However, it is suggested that emphasis on the limitations of previous studies (I did not see). You should be focused on finding of previous study and emphasis on the limitations of them then note the novelty of yours study.

It was corrected in the background section.

Methods:
5- This section was good. However, many confounders exist in enuresis such as family history, BMI, diet and nutrition status, sleep status, constipation, caffeine intake and etc. How did you include the confounding factors in the results? Clearly define all potential confounders and effect modifiers. Give diagnostic criteria, if applicable.

In this study Inclusion criteria included children aged 5-15 years with primary mono-symptomatic enuresis and healthy children aged 5-15 years who had referred to the clinic of Taleghani hospital ,with a normal ultrasonography and creatinine level. Exclusion criteria included children with diurnal urinary symptoms, bladder dysfunction, secondary enuresis, cirrhosis, diabetes mellitus, obesity, metabolic syndrome, congenital heart or hematological diseases and infection. None of the participants have taken medical drugs and vitamins in the last

three months; but family history, sleep status, constipation, caffeine intake were not assessed. It was mentioned in limitation and recommendation part.

Results:
6- The mean values of copeptin in each group should be noted in main text, because this was main values in this research.

It was mentioned in the result section.

7- Authors are encouraged to review and follow the recommendations put forward in the "Guidelines for reporting of statistics for clinical research in urology" (Assel et al., 2018) for guidance on the proper analysis, reporting, and interpretation of clinical research.

The mentioned article was studied and accordingly, the following corrections were made in the last paragraph before the results and tables in the article:

Statistical Analysis:

Continuous variables were summarized as mean ± standard deviation, and categorical variables were presented as numbers and percentages. Age was considered continuous and categorized into two groups (5-9 years and 10-15 years). Shapiro-Wilk test was used to test the normality of data distribution. The non-parametric Mann-Whitney test was used to compare the level of copeptin in the two groups and subgroups by sex and age categories. The statistical analysis was performed using SPSS software (version 24.0). A P-value < 0.05 was considered statistically significant.

8- It is better expressed OR at 95 % CI. Avoid relying solely on statistical hypothesis testing, such as P values, which fail to convey important information about effect size and precision of estimates. P values should never be presented alone without the data that are being compared and the test used to derive them.
Case- control studies are observational studies in which patients are identified who have the condition (in this study, enuretic children) and are compared retrospectively to patients without condition (without enuresis). Incidence rate and prevalence rates cannot be generated from this type of study, but one can establish an odds ratio (OR) for associated factors potentially associated with the condition (copeptin).

Multivariate Logistic regression analysis was performed and no significant difference was observed in the group, gender and age, and therefore OR with CI: 95% cannot be considered

9- Distinguish pre-specified from exploratory analyses, including subgroup analyses. At

the end of the Methods section, please describe all of the statistical tests used for the analyses. State any a priori levels of significance, and whether tests were 1- or 2-sided. Also, specify the statistical software package(s) used in the analyses, and its versions. We encourage authors to follow SAMPL guidelines.
In tables, it is better expressed OR at 95 % CI.

It was mentioned in the text.

Statistical Analysis:

Continuous variables were summarized as mean ± standard deviation, and categorical variables were presented as numbers and percentages. Age was considered continuous and categorized into two groups (5-9 years and 10-15 years). Shapiro-Wilk test was used to test the normality of data distribution. The non-parametric Mann-Whitney test was used to compare the level of copeptin in the two groups and subgroups by sex and age categories. The statistical analysis was performed using SPSS software (version 24.0). A P-value < 0.05 was considered statistically significant.

Discussion:
10- It section was so short. Citing references was so low. it is suggested the author used the new and valuable ref in introduction and discussion section such as "Is Renal Bladder Ultrasound Necessary in Monosymptomatic Primary Nocturnal Enuresis? A Case Control Study, J Compr Ped. 2018 ; 9(4):e69006. doi: 10.5812/compreped.69006.]"

It was mentioned in article.

11- In the discussion part you should write the main(s) finding(s) and specially (novelty) at first and then allude to other studies. The clinical significance of the study findings was still inadequately discussed.

It was revised.

12- Limitation and recommendation were not seen. Limitation and recommendation should be mentioned in the last paragraph of discussion and in last paragraph any gap, question, hypothesis or comment should be declared (not utilize separate subheading).

Limitation and recommendation were added in the last paragraph.

References:

13- It needs renewal and revision, totally.
The most (80%) of references were too old. There have been only a few new references.

Reference no 13 was corrected.

References were added and renewed.

14- The citing references were not enough and so few (especially in discussion section).

The references were added and revised.

15- The references no 10, 11 and 12 were incomplete.

References were corrected.

16- The style of references was not organized. Some of them were Vancouver style but some were APA style. PI arranges all references according to journal rules (Vancouver style).

All of the references were corrected in Vancouver style.

Thank you

2 Revision 1

1 comment · 1 Mar 2023

Referee 1 Reviewer

MINOR REVISION 1 Mar 2023

Comments to the Author:
The great effort in improving the manuscript is highly appreciated. However, there is room for further improvement, which the authors should consider. The following points are of concern, and minor suggestions are noted below.
In abstract:
We are not allowed to use any abbreviation without defining it at first use: AVP, etc. (in the abstract and text).
In the discussion part, you should write the main finding(s), especially the novelty, first and then allude to other studies.
Thank you

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,

Thank you very much for your letter and advice. Those comments are all valuable and very helpful for revising and improving our paper.

We would like to express our sincere thanks to the editor and reviewers for the constructive and positive comments, and we have revised the paper point-by-point as follows:

Best Regards

Reviewer 1:
Comments to the Author:
The great effort in improving the manuscript is highly appreciated. However, there are rooms for further improvement which the authors should consider. The following points are of concern and minor suggestions are marked in the following.
In abstract:
1- We are not allowed to use any abbreviation word without definition for the first time: AVP and etc (in abstract and text).

All of the abbreviation words in the abstract and text were corrected.

2- In the discussion part you should write the main(s) finding(s) and specially (novelty) at first and then allude to other studies.

It was revised.

Thank you

3 Revision 2

1 comment · 25 Mar 2023

Referee 1 Reviewer

ACCEPT 25 Mar 2023

I reviewed this manuscript again. All comments were addressed by the authors.
Thank you