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

Journal of Comprehensive Pediatrics
Article DOI: https://doi.org/10.5812/compreped-117406
Published in: Journal of Comprehensive Pediatrics: 13(4) ; e117406

Peer Review Report for "Frequency of Voiding and Defecation Dysfunction in Primary School Children in Zahedan, Southeast Iran"

Author(s): Touran Shahraki, Simin Sadeghi-Bojd, Saeedeh Yaghoubi, Tahereh Ghaderi

Review Timeline:

Submit Date:	29 Jun 2021
Revised Date:	23 Oct 2022
Accepted Date:	27 Oct 2022

Revision (0)

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

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.

Answer to reviewer:

Reviewer 1:
Thank you for presenting this manuscript. But I have many questions about this presentation:
Comments:

Title:
It is suggested that "disorders" change to "dysfunction" (in title and whole of the text)

Abstract:
In Background, "at Zahedan in 2016"must be omitted.
In last part of this section, objects and rational of study must be mentioned precisely and clear. What is novelty of your study?
Methods, The prevalence of urinary incontinence among boys and girls must be shown, separately. Also total the prevalence of fecal incontinence to be shown.
387 and 383 ?! it must be noticed the studied subjects that enrolled in the study, finally. Pl corrects the number of studied subjects in methods and results section. Correct number of enrolled subjects that analysis was done should be mentioned precisely.
Conclusion was incomplete.
Key words were incorrect. All keywords should be provided according to the MeSH terms. The preferred expression is indicated by the label "MeSH Heading" and not "Entry Term.

Introduction:
What was the mean of "Nocturia disappears"?
Nocturia while sleeping is enuresis. Pl corrects it.
In Background, "at Zahedan in 2016" must be omitted.
In line 7, paragraph 1, definition of incontinence was incomplete. It is suggested that the authors note and declare this definition. The authors should be noted: [Urinary incontinence is the inability to urinary control at an age when children should naturally be able to control their urination.] You should be mentioned to this new and valuable article in your references: [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.]

I ask you the critical question: Many studies have been done in this regard. Why the authors decided to conduct this study again? What is novelty of this study? In last part of this section, objects and rational of study must be mentioned in more details, precisely and clear.
There are different types of fecal and urinary incontinence. What kind of incontinence did you study?

Methods:
How did you calculate the sample size? Which formula? Explain it.
Author said "Subjects were randomly selected". It was seen that sampling was census.
Exclusion and inclusion criteria were incomplete. Inclusions and exclusions criteria must be mention to first paragraph then after, eligible and allocated participants were noted (with number, exact and clearly).
Eligible and allocated participants were noted in text (with number, briefly and clear). Finally,

the number of subjects analyzed should be stated.
How many subjects were assessed for eligibility? And then how many subjects were allocated? Did you Lost to follow-up?
There are many important confounder in this regards such as psychological status of subjects, usage of computer games and entertainment, sleep disorder, speech and walking disorder, family income, number of children in house, divorce, parents psychological status, level of education of parents, family history of incontinence and so on. But I did not see any investigation for relation of these important factors with incontinence status of subjects.

Results:
Line 1 and 4-5 moves to methods section (not belong to results section).
You said" all children age 3 to 7 years" !!!? but studied subjects were 7-13.
I did not score of incontinence of subjects in whole of text.

Discussion:
This section needs revision, totally. In fact there was no comprehensive discussion. In the discussion part you should write the main(s) finding(s) and specially (novelty) at first paragraph and then allude to other studies. Justify the possible reason for the consistency/ inconsistency of the results of the present study and previously published study.
The discussion part should be in an organized way; It must be concentrated on the new and important aspects of the study and the achieve conclusions.

References:
More than 35% of them were so old. The most of references were too old (almost before 2011, 10 references). There have been only a few new references. References need renewal.

thank you

All the main file corrected based on your massages. Thanks for your cooperation.

OPEN PEER REVIEW

Revision (1)

OPEN PEER REVIEW

Revision (2)

Reply to Reviewers

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You can read the authors' responses to the reviewers' comments in the next page.

با سلام و احترام

کلیه اصلاحات خواسته شده در متن های لایت شد و فایل به پیوست خدمتتان ارسال شد.

1-اصلاح کلمه disorder به dysfunction در کل متن انجام شد.

2-در مورد حجم نمونه در قسمت روش کار توضیح داده شد.

3-معیارهای ورود و خروج ذکر شد.

4-کودکان مورد مطالعه 7 تا 13 سال بودند و این اصلاح شد.

5-در پاراگراف 2و3 نتایج سن 3 تا 7 سال اصلاح شد.

6-قسمت محدودیت مطالعه حذف و به پاراگراف اخر بحث اضافه شد.

7-پیشنهاد ارایه شده اصلاح شد.

8-رفرنس شماره 24 اصلاح شد.

با تشکر فراوان

OPEN PEER REVIEW

Revision (2)

Parisa Bahmani : Associate Editor — 27 Oct 2022

Dear EIC,
The manuscript is acceptable now.

Mohammad Reza Boloursaz : EIC — 27 Oct 2022

Dear Author,
Thank you for your efforts in revising the manuscript, it is acceptable now.