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OPEN PEER REVIEW

Relationship Between Psychological Variables and Postoperative Pain in Children

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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

0 comments

No public comments in this round.

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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.

Reviewer 1	Answer
Abstract: It needs paraphrases, totally. e.g: Change “progress” to “advance” or “development” Pl explains “coping strategies.” Conclusion was vague; Pl defines it based on real finding of study.	This was edited.
Introduction: We are not allowed to use any abbreviation word without definition for the first time: NPO afterward, you use this abbreviation in text. This section needs revision. The introduction should include a better representation of the main rationale of the study and emphasis on the limitations of previous studies. The limitations of previous studies had not been insufficiently discussed. The overall and vague findings were not suitable.	This was edited.
The results of the present study also showed that parental anxiety was a predictor of postoperative pain in children. In this regard, previous studies have also shown that there is a positive relationship between children's pain and parental anxiety. Increased parental anxiety may increase postoperative pain in children. What this presentation adds to conventional and proven reader sciences? What was the novelty of this manuscript? The findings of this manuscript were clearly proven in the past.	Since the intensity of pain and anxiety in different children is different, therefore, the examination of these variables according to the conditions of each child in each family and society can lead to different results, which can be based on the results to reduce the pain and anxiety of the program. Compiled.
Methods: How did you calculate the sample size? Which formula? Explain it.	This was edited.
Exclusion and inclusion criteria were not defined. Inclusions and exclusions criteria must be mention to first paragraph then after, eligible and allocated participants were noted (with number, exact and clearly).	This was edited.
How many subjects were assessed for eligibility? And then how many subjects were allocated? Did you Lost to follow-up?	A total of 200 children who met the inclusion criteria participated in the study, and 29 children were excluded from the study based on the withdrawal criteria (refusal to cooperate in the study, severe pain after the operation, and inability to cooperate).
There are many important confounder in this regards such as type of surgery, time of surgery, gender, basic anthropometrics of subjects such as height, weight, BMI, level of	Type of Surgery, Time of Surgery, Gender And Level of Education of Parents Were Consideration.

education of parents, nutritional status of subjects, any physical abnormality and so on. But I did not see any investigation for relation of these important factors with health status of subjects.	
Describe all statistical methods, including those used to control for confounding. What was mean of other surgery? Did you consider outpatient or inpatients?	Internal consistency reliability and stability and linear regression, hospitalized children.
Results: The beginning of sentence with number is unsuitable.	This was edited.
You said that there was no correlation between type of surgery, and preoperative pain with postoperative pain. It was	Yes, no correlation was observed between these variables
Tables were incomplete. You expressed the correlation between demographic information, age, sex, type of surgery, and preoperative pain with postoperative pain and so on but I did not see in tables.	This was edited. Table 3
It must be to stratify the subjects and pooled data to stratify data and then analysis by each variable such as each type of surgery and so on to achieve exact finding about precise variable and minimizing the effect of main confounders. . The type of surgery is important in this issue.	This was mention in Table 3.
The overall and vague findings were not suitable. The results of the present study also showed that parental anxiety was a predictor of postoperative pain in children. In this regard, previous studies have also shown that there is a positive relationship between children's pain and parental anxiety. Increased parental anxiety may increase postoperative pain in children. What this presentation adds to conventional and proven reader sciences? What was the novelty of this manuscript? The findings of this manuscript were clearly proven in the past.	This was corrected.
Discussion: This section needs revision, totally. It was so week. It concentrates on the new and important aspects of the study and the achieve conclusions. The differences and advantages of this study should be compared and mention with other studied. Also mini-review of article must be done and compared	This was edited.

this presentation with others and novelty of study express in more detail, but unfortunately it was not seen accordingly.	
Limitation and recommendation should be mentioned in the last paragraph of discussion (no separate subheading). In recommendation part, it is suggested to express that using the guidelines in this situation. For example the authors note: [several modality are utilize to decrease post operative pain status of children. In addition, improper management of post operative pain, not only increases the morbidity of infants also it is unethical. The using guidelines are a way to decrease it. The guidelines can help pediatrics surgeons to manage post operative pain, properly, as had been described by guidelines in the antibiotic utilizing in different infectious diseases]. You should be mentioned to this valuable and new article in your references: [A Survey of Pediatricians' Views and Practices Regarding Parents' Request for Prescribing Antibiotics: A Qualitative Study. Arch Pediatr Infect Dis. 2019 July; 7(3):e91217. doi: 10.5812/pedinfect.91217.]	This was edited.
References: Many references were too old (almost 60% before 2013). There have been only a few new references. References need renewal. thank you	This was edited.

Reviewer 1	Answer
with thanks for your valuable study, we recommend for reviewing manuscript by a native English for grammar correction.	Thank you. After the content is approved, it will be reviewed from the native point of view

2 Revision 1

3 comments · 6 Oct 2023 – 7 Oct 2023

Referee 1 Reviewer

MAJOR REVISION 6 Oct 2023

dear authors.
Thank you for your valuable efforts. Here are some recommendations following the manuscript review:
1_ The introduction and discussion sections of the text are too long and contain unnecessary and irrelevant explanations in relation to the main title. They should be reviewed and rewritten more briefly.
2_ The text should be reviewed by a native English speaker due to the many grammatical and semantic errors.
3_ Terms such as " effects of psychological variables on ....." that are used in the manuscript are not recommended for this title because this is a cross-sectional descriptive study, NOT A CLINICAL TRIAL. Please consult with an epidemiologist.
4_ Some parts of the methodology, such as the type of surgery or similar pain management for all participants, are confusing. These sections are indicated and need review.

Associate Editor

MAJOR REVISION 7 Oct 2023

Dear EIC,
The great effort in improving the manuscript is highly appreciated. However, there are a few areas for further improvement that the authors should consider.

Editor-in-Chief

MINOR REVISION 7 Oct 2023

Dear Author,
The manuscript still needs revision. Please revise it accurately.

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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.

Reviewer 1	Answer
the most of my concerns were answered properly. In my opinion, the revised paper was good enough to be accepted for publication. Thanks	Thank you
Reviewer 2	**Answer**
introduction and discussion part of text is too long and contains unnecessary and irrelevant explanations according to main title.it should be reviewed and rewritten more briefly.	It was done.
the text should be reviewed by a naïve ENGLISH due to so many grammar and semantic errors.	Ok, It was done.
terms such as " effects of psychological variables on ....." that used in manuscript is not recommended for this title. because this study is a cross sectional descriptive type NOT CLINICAL TRIAL. plz consult with an epidemiologist.	Thank you for your great comment, we changed.
some parts of methodology such as type of surgery or similar pain management for all participants are confusing. these sections are indicated and needs review.	The specified sections in the article were corrected.
the samples were the same in terms of the surgeon and the pain management protocol, what means exactly?	It means that the samples were operated by a special doctor.
Associate Editor 1	**Answer**
The manuscript still needs revision. Please revise it accurately.	It was done. All items were corrected and highlighted.

3 Revision 2

2 comments · 9 Dec 2023 – 9 Dec 2023

Associate Editor

ACCEPT 9 Dec 2023

Dear AE,
I reviewed the manuscript again. The great effort in improving the manuscript is highly appreciated.
The authors have addressed all comments.
Thank you

Editor-in-Chief

ACCEPT 9 Dec 2023

Dear Author,
Thank you for your explanation, and I find your manuscript acceptable.