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OPEN PEER REVIEW

Women with Spinal Cord Injuries, Anxiety and Sexual Dissatisfaction: Do They Benefit from Sexual Rehabilitation Education?

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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 · 3 Jun 2024 – 6 Jul 2024

Referee 1 Reviewer

MAJOR REVISION 3 Jun 2024

The background is well written. It seems that it is only necessary to highlight the necessity and importance of connecting the issue with the consequences of rehabilitation.
On page 5, line 120, and page 7, line 171, inclusion criteria should be replaced by entry conditions.
Are the following criteria not effective in assessing the impact on women's sexual performance?
Cognitive level, level and category of injury, time since spinal cord injury, age, education level. Why were these not considered?
Based on what criteria, formula, or study was the sample size determined?
It is not clear how the participants were allocated to the two groups. How was this randomization done? By whom and with what level of experience?
Was the culture-based sexual satisfaction questionnaire administered in Iran in the current study? The authors did not provide details on this aspect. It appears that the validity and reliability of this tool were not investigated in Iran.
Who made the evaluations? Was the assessor blind? Were assessments online or in person?
On page 6, line 158, add a subheading titled "Intervention". Provide more details on the preparation process and the implementation of the intervention.
Specify whether booklets were sent to patients or if online training was also utilized.
It is suggested that the intervention items be listed in a table and that more detailed information be provided for each section to help the audience better understand the intervention and its process.

In the current study, it is unclear from what source the participating women were identified and selected and who contacted them. Who defined the goals? How and by whom was the consent form obtained?

In the Implementation Method section, I understood the intervention process. Lines 180-198 should be moved to the proposed section with the subheading "intervention" to avoid confusing readers.
It is recommended that the statistical method be included in a separate section with a more detailed description.
Given that the intervention occurred during the COVID-19 pandemic, it is crucial to highlight the significance of adhering to online interventions to enhance patients' health status.
I recommend including the following study, conducted online in Iran during this period, in this section and the discussion:
"Motaharinezhad F, Hoseinpour F, Al rabiee R, Zaheri M, Vatanparast N. The effect of telerehabilitation on the participation of people with spinal cord injury: secondary analysis from a randomized controlled trial. Koomesh 2023; 25 (1):30-37"

A CONSORT flowchart should be included to illustrate the sampling and analysis procedures.
What has your study added to the body of the literature? Please state the implications of your research for rehabilitation and your suggestions for future research.

Associate Editor

MAJOR REVISION 2 Jul 2024

Dear EIC,
3 reviewers reviewed the article. The reviewers gave a definite opinion on the

major revision of the article.
Thanks

Editor-in-Chief MAJOR REVISION 6 Jul 2024

Dear Authors
According to the reviewers' and associate editor's comments, your article needs major revision. When revising your manuscript, please consider all issues mentioned in the reviewers' comments carefully: please outline every change made in response to their comments and submit the required files.

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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:

The background is well written. It seems that it is only necessary to highlight the necessity and importance of connecting the issue with the consequences of rehabilitation.

Reply to Reviewer: Last paragraph of the background is edited.

On page 5, line 120, and page 7, line 171, inclusion criteria should be replaced by entry conditions.

Reply to Reviewer: This is edited.

Are the following criteria not effective in assessing the impact on women's sexual performance? Cognitive level, level and category of injury, time since spinal cord injury, age, education level. Why were these not considered?

Reply to Reviewer: Level (location) of injury, age, injury duration, and educational level are mentioned in table1. Cognitive level was not a goal to assess in this study.

The sample size was determined based on what criteria/with what formula or based on what study?

Reply to Reviewer: Part 3.2. is edited and completed.

It is not clear whether to allocate the participants in two groups. How was this randomization done? By whom and with what level of experience?

Reply to Reviewer: Part 3.2. is edited and completed to explain this matter.

Was the culture-based sexual satisfaction questionnaire conducted in Iran in the current study? The authors did not provide details on this aspect. It appears that the validity and reliability of this tool were not investigated in Iran.

Reply to Reviewer: Designing an instrument to measure sexual satisfaction based on Iranian culture can be a separate study to adapt the culture; besides, due to the lack of time of the student (author), existing and common tools have been used. The validity and reliability of the tools were previously done in Iran, which is mentioned in section 3.4. Validity and reliability have also been determined in this study, which is mentioned in this section

Who made the evaluations? Was the assessor blind? Were assessments Online or in person?

Reply to Reviewer: We described this in part 3.5.

On page 6, line 158, add a sub-heading titled "Intervention". Provide more details on the preparation process and the implementation of the intervention.

Reply to Reviewer: Added to part 3.3.1.

Specify whether booklets were sent to patients or if online training was also utilized.

Reply to Reviewer: Added to part 3.3.1.

It is suggested that the intervention items be listed in a table and that more detailed information be provided for each section to help the audience better understand the intervention and its process.

Reply to Reviewer: The title and topic of the educational content are given in section 3.4.1. The detailed description of the educational content will be published in another study.

In the current study, it is unclear what source the participating women were identified and selected and who contacted them. Who defined the goals? How and by whom was the consent form obtained?

Reply to Reviewer: Description added to the third line of part 3.5.

In the Implementation Method section, I understood the intervention process. Lines 180-198 should be moved to the proposed section with the sub-heading "intervention" to avoid confusing readers.

Reply to Reviewer: Fixed, paragraphs 2 and 3 in section 3.4.1 complete the explanations.

It is recommended that the statistical method be included in a separate section with a more detailed description.

Reply to Reviewer: Part 3.6. is added.

Given that the intervention occurred during the COVID-19 pandemic, it is crucial to highlight the significance of adhering to online interventions to enhance patients' health status.

Reply to Reviewer: Paragraph 7 of the introduction was added for this purpose.

I recommend using the following study, conducted online in Iran during this period, for inclusion in this section and discussion: "Motaharinezhad F, Hoseinpour F, Al rabiee R, Zaheri M, Vatanparast N. The effect of telerehabilitation on the participation of people with spinal cord injury: secondary analysis from a randomized controlled trial. Koomesh 2023; 25 (1):30-37"

Reply to Reviewer: Reference number 18 is this article.

A CONSORT flowchart should be included to illustrate the sampling and analysis procedures.

Reply to Reviewer: The flow chart is added as a figure and uploaded as a separate file (as the rules of the journal goes). In part 3.1 we mention that.

What has your study added to the body of the literature? Please state the implications of your research for rehabilitation and your suggestions for future research.

Reply to Reviewer: The last paragraph of the conclusion was added.

Reviewer 2:

1- فرمول محاسبه حجم نمونه را بنویسید و بنویسید از کدام مطالعه مشابه برای این سنجش استفاده کرده اید؟

پاسخ به داور محترم: به قسمت 3.2. اضافه شد.

2- ملاحظات اخلاقی را قید نمایید.

پاسخ به داور محترم: قسمت 3.3. اضافه شد

3- ملاک شما برای یکپارچگی نمونه ها در گروه کیس و کنترل چه بود؟ محل ضایعه، سن افراد (که تاثیر زیادی بر عملکرد جنسی دارد)، متاهل بودن و ...

پاسخ به داور محترم: ملاک یکپارچگی تاهل بود که در بخش 3.2. ذکر شده.

4- معیار خروج از مطالعه صحیح نیست.

پاسخ به داور محترم: خط آخر 3.1. اضافه شد.

5- پیشنهاد می شود براي تحلیل داده ها و به منظور کنترل اثر پیش آزمون و پس آزمون از روش تحلیل کواریانس چندمتغیري یا مانکوا استفاده شود. قبل از اجرای آزمون تحلیل کوواریانس چندمتغیری، برای حصول از توزیع نرمالیتی داده ها از آزمون کولموگرونف اسمیروف استفاده شود و بعد بر اساس نرمال بودن یا نبودن داده ها از تحلیل کواریانس چندمتغیری که بر رضایت یا عملکرد جنسی زنان موثر هستند گزارش نمایید تا کاری جامع را بتوانید منتشر نمایید.

پاسخ به داور محترم: از پیشنهاد داور محترم در رابطه با تحلیل های آماری متشکریم. تحلیل های حاضر با توجه به اهداف پایان نامه ی نویسنده اوسط آستاد مشاور آمار تعیین گردیده است؛ انشالله در نشر مطالعات بعدی از تحقیق حاضر، از پیشنهادات شما سود خواهیم برد.

6- در جدول شماره یک تفاوت معنی داری را گزارش کنید

پاسخ به داور محترم: این مورد در پاراگراف دوم بخش 4 (نتایج) ذکر شده است.

7- در جدول شماره 2 نمرات هر خرده مقیاس را گزارش نمایید.

پاسخ به داور محترم: شاخص های عددی اضطراب و رضایت جنسی در گروه کنترل و مداخله قبل و بعد از مداخله، به همراه P و نتیجه آزمون تی در جدول 2 ذکر شده اند. ریزنمرات هر خرده مقیاس در مطالعه ای دیگر منتشر خواهد شد.

Reviewer 3:

While thanking the respected authors, in general, the goals of this research seem to be aligned with the identified research gaps, however, some suggestions below are recommended.

Grammar and Language Use:

- There are minor grammatical errors and awkward phrasing that could be revised for clarity and precision.

- For example, in the sentence "leading to abnormalities in all body systems," it would be more concise to say "resulting in abnormalities in all body systems." - Additionally, some sentences can be restructured for better flow and readability.

Reply to Reviewer: It was modified in the third line of the background, and errors have been corrected.

While the essay touches on various aspects of SCI and sexual health, a deeper analysis of the psychological and emotional effects on individuals with SCI could enrich the discussion.

Reply to Reviewer: Several studies have been added to the background and discussion section in this regard.

- Exploring the societal stigma or lack of awareness surrounding sexual health in individuals with disabilities would add depth to the analysis.

Reply to Reviewer: In this regard, an article was added to the fourth paragraph.

Including direct quotes from experts in the field or referencing clinical guidelines on sexual health care for individuals with SCI could strengthen the argument

Reply to Reviewer: In the last paragraph, in the conclusion section, a study was added in this direction.

Consider including more references to studies that support the importance of sexual rehabilitation in improving the quality of life for individuals with spinal cord injuries

Discuss the implications and importance of the results of the study by comparing the results of other studies

Reply to Reviewer: In discussion part, the impact of interventions on anxiety, sexual satisfaction and quality of life, and evidences from other studies are mentioned separately. In this regard, paragraphs 2 and 4 of the discussion have also been added to this topic.

In the suggestions section, state what topics should be investigated in future research?

Reply to Reviewer: This was added in last line of limitations.

2 Revision 1

4 comments · 31 Jul 2024 – 11 Aug 2024

Referee 1 Reviewer

MINOR REVISION 31 Jul 2024

- The meaning of the following comment is that the participants' cognitive level could not affect their inclusion in the study. In other words, were all the participants at the same level of cognition?
"Are the following criteria not effective in assessing the impact on women's sexuality Performance? Cognitive level, level and category of injury, time since spinal cord injury, age, education level. Why were these not considered?"
- Please add a valid citation for this claim "The detailed description of the educational content will be published in another study".

Referee 2 Reviewer

REJECT 8 Aug 2024

In individuals with spinal cord injury, the location of the lesion plays a very important role in sexual functioning. Sexual desire is also age-dependent (for example, at older ages and near menopause, sexual desire decreases because of vaginal dryness, and marital satisfaction subsequently decreases). Therefore, you did not take these two important points into account during matching, and this is a serious flaw in your work. You have not responded to the reviewer's comments 5 and 7.

Associate Editor

MAJOR REVISION 10 Aug 2024

Dear EIC,
The manuscript has been reviewed, and there are some comments that the author should address. According to the comments, the document needs major revision.

Editor-in-Chief

MAJOR REVISION 11 Aug 2024

Dear Authors
According to the reviewers' and associate editor's comments, your article requires major revision, especially in the methods and results sections. When revising your manuscript, please consider all issues mentioned in the reviewers' comments carefully: please outline every change made in response to their comments.

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.

Reviewer 1:

- The meaning of the following comment is that the participants' cognitive level could not affect their inclusion in the study. In other words, were all the participants at the same level of cognition?
"Are the following criteria not effective in assessing the impact on women's sexuality Performance? Cognitive level, level and category of injury, time since spinal cord injury, age, education level. Why were these not considered?"

Reply to Reviewer: Level (location) of injury, age, injury duration, and educational level are mentioned in table1.

Regarding the *cognitive level*, explanations were added to section 3.2.

- Please add a valid citation for this claim "The detailed description of the educational content will be published in another study".
The last paragraph of section 3.4.1. is added in this regard.

Reviewer 2:

In individuals with spinal cord injury, the location of the injury plays a very important role in the occurrence of individuals' sexual functions. Also, given that sexual desire is age-dependent (for example, at older ages and near the age of menopause, sexual desire decreases due to vaginal dryness and, subsequently, marital satisfaction falls), you had not paid attention to these two important points at the time of matching, and this is a serious flaw in your work.

Response to the respected reviewer: Age and location of spinal cord injury, separately for the intervention and control groups, and the Independent T-test are shown in Table 1.

You have not answered the reviewer's comments No. 5 and No. 7. And if you use the reviewer's suggestions in the statistics section to publish another article, this would be an instance of slicing and could lead to RETRACTION of your current article even after publication.

Response to the respected reviewer: In view of your comment, Tables 3 and 4 were added to report the subscales. Also, in these data, the homogeneity of the data is evident, which is also mentioned in the last paragraph of the Results. (Given the publication of all findings in this study, the reviewer is assured that no other study will be published using your comments.)

Reviewer 3:

1. It is recommended to make the introduction more concise.

Reply to Reviewer: In this regard, a new paragraph was added to the introduction and minor changes were made in the paragraphs.

2. Please replace the numbers in the sample size formula.

Reply to Reviewer: values were added regarding dear reviewer`s comment.

3. Ethical considerations should be presented in narrative form.

Reply to Reviewer: This paragraph is edited.

4. Arrange the tables to facilitate easy access to the study results for the audience.

Reply to Reviewer: some change have been made in the tables.

3 Revision 2

4 comments · 23 Sep 2024 – 5 Oct 2024

Referee 2 Reviewer

ACCEPT 23 Sep 2024

No comment.

Referee 1 Reviewer

MINOR REVISION 23 Sep 2024

-Page 8, line 148: You claimed that people with cognitive problems were not included in the study. What tool or questionnaire was used for cognitive screening?
-The CONSORT flowchart should be revised. Please modify it based on the latest version and add the related numbers (such as the number of patients in the groups) to it.

Associate Editor

MINOR REVISION 5 Oct 2024

Dear EIC
The reviewers have recommended publication but also suggest some minor revisions to the manuscript. Therefore, I invite the authors to respond to the reviewers' comments and revise their manuscript.
Kind regards,

Editor-in-Chief

MINOR REVISION 5 Oct 2024

Dear Authors
Based on the reviewers' and associate editor's comments, your article requires minor revision. When revising your manuscript, please consider all issues mentioned in the reviewers' comments carefully: please outline every change made in response to their comments and submit the required files.

4

Revision 3

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:

-Page 8, line 148: You claimed that people with cognitive problems were not included in the study. What tool or questionnaire was used for cognitive screening?

Reply to the reviewer:

In part 3.2 line three, it is said that it was all based on their medical documents which were recorded in the centre.

-CONSORT flowchart should be revised. Please modify it based on the latest version and add the related numbers (such as number of patients in the groups) in it.

Reply to the reviewer:

The flowchart is revised and uploaded in a separate file. Thanks to the honorable referee.

Reviewer2: No comments.

Thanks to the honorable referee.

Reviewer 3: No comments.

Thanks to the honorable referee.

4 Revision 3

3 comments · 1 Nov 2024 – 2 Nov 2024

Referee 1 Reviewer

ACCEPT 1 Nov 2024

The manuscript is ok.

Associate Editor

ACCEPT 2 Nov 2024

Dear EIC,
The authors of the article have made the necessary corrections, and the article has been modified based on the opinions of the reviewer and is now suitable for acceptance. The article is currently acceptable for publication.
Thanks.

Editor-in-Chief

ACCEPT 2 Nov 2024

Dear Authors
We are pleased to inform you that your article is accepted for publication in the MEJRHS. We hope to receive other qualified articles from your group.