PEER-REVIEW REPORT

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[ ] Grade C: Good		[ ] Duplicate publication	
[ ] Grade D: Fair	[ ] Grade C: A great deal of language polishing	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor		[ ] No	[ ] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[Y] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[ ] No	

COMMENTS TO AUTHORS

Thank you for conducting this interesting research! I have put some of my comments on the manuscript. Below are my other comments: Materials and Methods: Some of the important information is missing in this section. The authors need to address the followings in this section: - How did you identify the clusters? How many clusters were identified? - How were the potential participants approached and recruited? - What were the inclusion and exclusion criteria? - What was the setting? From where were the participants recruited? I see that in the "limitations" of the study it was mentioned that "This study was conducted among the university employee". This needs to be mentioned in the Methods section too.

Authors: Thank you, It has been addressed that participants were recruited from employees of Isfahan University of Medical Sciences in the "Subjects" section, more

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details about sampling strategy have been provided in current version according to your suggestions. (page 7, lines 71-76).

Discussion: - The adjusted regression showed no association between water consumption and risk of anxiety. However, throughout the Discussions section the authors have mentioned several times that low daily water intake is a risk factor for depression and ANXIETY! This needs to be corrected.

Authors: Agreed. Thank you, we corrected the sentence (for example please see the conclusion section in abstract (page 2, lines 21-23)) and some ones were deleted, as can be seen, the lower levels of water consumption are risk factor (second category in logistic regression models-table 3) although the trends were not statistically significant however the ORs are larger than 1, even in first category in fully adjusted models.

- In the "limitations" it was mentioned that "…they were from different socio-economic status and therefore, our findings can be generalized to other individuals of our society". The researchers recruited participants through convenience sampling. In addition, there is not enough information about the participants' socioeconomic background. How do you make sure the participants are representative of the entire population of men and women in your society? This needs to be removed and the authors need to mention this a s limitation of their study: 'Since we used convenience sampling, the participants may not be representative of the entire population and therefore the results of our study may not be generalized to other individuals in our society" (or something similar…)

Authors: Agreed. Suggested sentence by the reviewer has been addressed in the manuscript as a limitation of our study and it has been deleted as a strength (page 14, lines 226-229).

Tables: - In Tables 1 and 2, put both numbers and percentage for the variables, not only the percentages. - Round all decimal number to one decimal point: for example instead of '37.18±0.29' write '37.2±0.3'. please amend all the tables accordingly

Authors: Numbers were added in Tables 1 and 2 in addition to percentage for categorical variables. For decimal numbers, tables 1 and 2 were amended according to the reviewer's comment; however, in Table 3 reporting one decimal point lead to misunderstanding of associations, for example for depression in the <2 glasses/d category, ORs in models 2-4 would be 1.8 with approximately the same CIs. In the 2-5 glasses/d category, again this misunderstanding will happen. Therefore, we did not amend decimal points in Table 3 and sincerely hope that this reason is convincing for the

reviewer.

PEER-REVIEW REPORT

Name of journal: World Journal of Psychiatry
Manuscript NO: 38275
Title: Drinking plain water is associated with decreased risk of depression and anxiety in adults: Results from a large cross-sectional study
Reviewer's code: 02445209
Reviewer's country: Czech Republic
Science editor: Li-Jun Cui
Date sent for review: 2018-02-14
Date reviewed: 2018-02-21
Review time: 7 Days

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COMMENTS TO AUTHORS

Dear authors, I only have one general comment on your manuscript: My only concern is that the article is too detailed (it involves very many variables - age, BMI, anxiety, depression gender, marital status, medication, smoking, education, gastrointestinal problems, food intake, protein, fat, carbohydrate intake, caffeine, magnesium, thiamin, riboflavin, pyridoxine, folate, cobalamie, DHA, EPA, fruit, meat, grains...) and I am not sure why this all is so important to be published. It is in a contrast with the fact that the water consumption in participants was not measured in any way, it was only guessed by the participants (!). I would recommend a major revision of the article, to shorten it at least by one third, or I suggest the authors to explain to the reader why all the details are so necessary. Best regards The reviewer

Authors: Thank you for your suggestion. SEPAHAN project is a large epidemiological study amongst Iranians which assessed various variables using validated, self-administered questionnaires. To date, many articles have been published from this data which their results are in line with the findings of similar studies in other populations, which may confirm the accuracy of the data collection in this project. In addition, we agreed that self-reported method may affect the accuracy of findings, but this method has been validated in elderly people. Furthermore, our study was not the first one which did by this way and there are earlier published articles which used this method (please see the following ref 1). This matter has been discussed in the limitations in the revised version (pages 10-11, lines 219-223).

1- Kant AK, Graubard BI, Atchison EA. Intakes of plain water, moisture in foods and beverages, and total water in the adult US population—nutritional, meal pattern, and body weight correlates: National Health and Nutrition Examination Surveys 1999–2006. Am J Clin Nutr. 2009 Sep; 90(3): 655–663.

2- Jimoh FO, Bunn D, Hooper L. Assessment of a Self-Reported Drinks Diary for the Estimation of Drinks Intake by Care Home Residents: Fluid Intake Study in the Elderly (FISE). J Nutr Health Aging. 2015 May;19(5):491-6.

3- Nissensohn M, López-Ufano M, Castro-Quezada I, Serra-Majem L. Assessment of beverage intake and hydration status. Nutr Hosp. 2015 Feb 26;31 Suppl 3:62-9.

Regarding many confounders that we have included them, we wanted to control all potential confounders which were assessed in the SEPAHAN project and tried to define several models by the subjective priority. We sincerely hope that the reviewer let us keep our article in the present format, because the adjusted confounders play important role in the mental health and we also did by this way in our earlier publications. We explained about the relevance of the adjusted confounders (diet and gastrointestinal disorders) in the revised manuscript (page 8 line 102 and page 9, line 120).

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COMMENTS TO AUTHORS
None

Authors: Thank you.