Response Letter

Dear editor,

Thanks for the editor' and reviewers' opinions, these comments are very helpful to improve the quality of our manuscript. We have carefully revised the manuscript. The following are a point-by-point responses to the reviewers' comments and the changes were highlighted yellow in revised manuscript. We sincerely hope that you find our responses and modifications satisfactory and that the manuscript could be considered for publication.

Responds to the reviewers' comments

Reviewer #1

- **1.Comment:** You did not explain why you reviewed the articles from January 2010 and not from 2000, 1990 etc. Why did you choose the term 2010 2023?
- **1.Response:** Sincere thanks to the reviewer for pointing out this issue, we indeed should have provided more information to explain the time selection. According to the papers we reviewed initially, there has been a major shift in the mainstream of psychotherapy paradigm in the late 19th and early 20th century, with the third wave CBT approaches became popular among adult intervention^[1], and these therapies gained increasing attention for use in younger population for about a decade after that ^[2]. Meanwhile, due to the rapid development of physiological, neuroscience and psychometric techniques, there have been a proliferation of outstanding researches emerging in the field of psychotherapy. A giant leap in the both contents and forms of psychotherapy has been made in recent years ^[3]. Therefore, considering the developmental process and growing trend of psychotherapy, we selected relevant studies from 2010 to the present as our database.

We have also added the content in manuscript correspondingly for further explanation: "According to the papers we reviewed initially, there has been a major shift in the mainstream of psychotherapy paradigm in the late 19th and early 20th century, as well as a large number of emerging studies on child and adolescent psychotherapy has been conducted closely over the past almost ten years. Therefore, considering the developmental process and growing trend of psychotherapy, this paper plans to conduct a bibliometric analysis of PIDCA from 2010 to the present to systematically introduce the knowledge structure and theme trends through data mining and mapping".

- [1] Steven CH and Stefan GH "Third-wave" cognitive and behavioral therapies and the emergence of a process-based approach to intervention in psychiatry. World Psychiatry 2021; 20: 363–375.
- [2] Perkins AM, Meiser-Stedman R, Spaul SW, Bowers G, Perkins AG and Pass L The effectiveness of third wave cognitive behavioural therapies for children and adolescents:

A systematic review and meta-analysis. Br J Clin Psychol 2023; 62: 209-227.

- [3] Holmes EA, Ghaderi A, Harmer CJ, Ramchandani PG, Cuijpers P, Morrison AP, Roiser JP, Bockting CLH, O'Connor RC, Shafran R, Moulds ML and Craske MG The Lancet Psychiatry Commission on psychological treatments research in tomorrow's science. The Lancet Psychiatry 2018; 5: 237-286.
- **2.Comment:** In Introduction, you state some disadvantages of psychotherapy (e.g. requires a high level of professional qualification). You can also state that psychotherapy is time-consuming and expensive, as compared with pharmacotherapy.
- **2.Response:** Thanks for the suggestion, we have revised in introduction part of the manuscript as "However, both of these therapies require a high level of professional qualification, and they are time-consuming and expensive compared to pharmacotherapy. To further expand access to psychotherapy, scholars are still exploring brief, efficacious, time-saving, and low-cost psychotherapy for the treatment of depression in children and adolescents."
- **3.Comment:** In "The risks of psychological intervention", you write that "It is widely believed that ... some patients' symptoms do not improve much after receiving psychological interventions and even tend to worsen". You should state which symptoms concretely.
- **3.Response:** We appreciate it very much for this good suggestion, and we revised the statement as "It is widely believed that psychological interventions are always beneficial, but some studies have found that some patients' symptoms do not improve much after receiving psychological interventions and even accompanied by adverse events (AEs) (e.g. suicide, suicide attempts, mental health related hospital admissions) [1,2]. A systematic review by Lodewyk summarized the AEs caused from psychological interventions, their team identified that AEs were consist of the following four 4 types, including physical, cognitive and/or mental health, social and/or academic, and health care usage, and the most common event monitored was hospitalization [3]. AEs of psychological interventions were mainly caused by ineffective engagement, ineffective practice, and accidental events [4]. However, the monitoring of AEs is largely absent in studies of psychotherapy with children and adolescents [5]. Assessing and reporting AEs comprehensively in studies of psychotherapy is crucial to improve research and service quality."
- [1] Holmes EA, Ghaderi A, Harmer CJ, Ramchandani PG, Cuijpers P, Morrison AP, Roiser JP, Bockting CLH, O'Connor RC, Shafran R, Moulds ML and Craske MG The Lancet Psychiatry Commission on psychological treatments research in tomorrow's science. The Lancet Psychiatry 2018; 5: 237-286.
- [2] Parry GD, Crawford MJ and Duggan C Iatrogenic harm from psychological therapies

- time to move on. British Journal of Psychiatry 2018; 208: 210-212.
- [3] Lodewyk K, Bagnell A, Courtney DB and Newton AS Review: Adverse event monitoring and reporting in studies of pediatric psychosocial interventions: a systematic review. Child and Adolescent Mental Health 2023; 28: 425-437.
- [4] Wolpert M, Deighton J, Fleming I and Lachman P Considering harm and safety in youth mental health: a call for attention and action. Adm Policy Ment Health 2015; 42: 6-9.
- [5] Papaioannou D, Cooper C, Mooney C, Glover R and Coates E Adverse event recording failed to reflect potential harms: a review of trial protocols of behavioral, lifestyle and psychological therapy interventions. Journal of Clinical Epidemiology 2021; 136: 64-76.